



# PROTECTING RESIDENTS FROM FINANCIAL EXPLOITATION

Complements of  
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A Manual for  
Kentucky's  
Long-Term  
Care Facilities

## The Nursing Home Ombudsman Agency of the Bluegrass, Inc (NHOA)

The Nursing Home Ombudsman Agency's award-winning ombudsman program has been providing advocacy services to long-term care residents since 1981. Our ombudsmen are regularly at the bedsides of long-term care residents, visiting and establishing trusting relationships, informing residents of their rights, and empowering residents to speak up about care concerns. NHOA's clear, Kentucky-specific information about nursing home placement helps individuals and families make educated decisions about long-term care.

Ombudsman (om-buh dz-muh n) is a Swedish word for advocate. A long-term care ombudsman is an advocate for individuals and their families who need the services of a long-term care facility. Ombudsmen are trained to investigate and resolve concerns of residents in long-term care facilities. They also provide information and refer residents to additional community resources when appropriate. The ombudsman is not an employee of the nursing facility or a government agency. Your ombudsman works free of charge on **your** behalf.

## The Kentucky State Long-Term Care Ombudsman Program (KYSLTCOP)

Services of the state Long-Term Care Ombudsman Program are coordinated through the Office of the State Long Term Care Ombudsman, which is housed at the Nursing Home Ombudsman Agency. The Kentucky Office of the State Ombudsman Program oversees 15 district programs affiliated with Area Agencies on Aging and Independent Living. Ombudsmen in these 15 districts provide services to more than 35,000 residents in Kentucky's long-term care facilities.

## The Bluegrass District Long-Term Care Ombudsman Program

The Bluegrass District Long-Term Care Ombudsman Program is one of the 15 district programs. Ombudsmen in the Bluegrass serve 5,500 residents in more than 80 long-term care facilities across 17 counties in Central Kentucky. The Bluegrass Program serves Anderson, Bourbon, Boyle, Clark, Estill, Fayette, Franklin, Garrard, Harrison, Jessamine, Lincoln, Madison, Mercer, Nicholas, Powell, Scott, and Woodford Counties.

## About this Guide

The Nursing Home Ombudsman Agency developed this guide based on one produced by the Consumer Financial Protection Bureau. It is not intended to provide legal advice or to serve as a substitute for your own legal counsel. If you have questions or concerns about legal issues and responsibilities, we recommend that you seek the guidance of the appropriate legal professional.

# Kentucky's District Ombudsman Programs

## State Long-Term Care Ombudsman

1-800-372-2991

### **Barren River**

1-800-355-7580

Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, and Warren counties

### **Big Sandy**

1-800-737-2723

Floyd, Johnson, Magoffin, Martin, and Pike counties

### **Bluegrass**

1-877-787-0077

Anderson, Bourbon, Boyle, Clark, Estill, Fayette, Franklin, Garrard, Harrison, Jessamine, Lincoln, Madison, Mercer, Nicholas, Powell, Scott, and Woodford counties

### **Buffalo Trace**

1-800-998-4347

Bracken, Fleming, Lewis, Mason, and Robertson counties

### **Cumberland Valley**

1-800-795-7654

Bell, Clay, Harlan, Jackson, Knox, Laurel, Rockcastle, and Whitley counties

### **FIVCO**

1-800-274-5863

Boyd, Carter, Elliott, Greenup and Lawrence counties

### **Gateway**

1-800-274-5863

Bath, Menifee, Montgomery, Morgan, and Rowan counties

### **Green River**

1-800-928-9094

Daviess, Hancock, Henderson, McLean, Ohio, Union, and Webster counties

### **Kentucky River**

1-800-928-5723

Breathitt, Knott, Lee, Leslie, Letcher, Owsley, Perry, and Wolfe counties

### **Kentuckiana Regional Planning & Development Agency (KIPDA)**

1-800-854-3233

Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer, and Trimble counties

### **Lake Cumberland**

1-800-264-7093

Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor, and Wayne counties

### **Lincoln Trail**

1-800-264-0393

Breckinridge, Grayson, Hardin, Larue, Marion, Meade, Nelson, and Washington counties

### **Northern Kentucky**

1-800-255-7265

Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen, and Pendleton counties

### **Pennyrile**

1-800-928-7233

Caldwell, Christian, Crittenden, Hopkins, Livingston, Lyon, Muhlenberg, Todd, and Trigg counties

### **Purchase**

1-877-352-5183

Ballard, Carlisle, Fulton, Hickman, Graves, Marshall, and McCracken counties

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## Introduction

*Mr. R, age 77, suffered from Alzheimer's and Parkinson's diseases, diabetes and other ailments. His pastor persuaded the former church deacon to grant him authority to manage his finances and care decisions. The result of this misplaced trust included 130 ATM withdrawals from Mr. R's bank account, nine months of unpaid nursing home bills, and the threat of discharge for nonpayment. The victim died at his facility. The perpetrator was charged and convicted of financial exploitation of a vulnerable adult.*

When an older person in a personal care home or nursing facility is the target of financial abuse, everyone suffers. Financial losses affect the resident, the facility, and the broader community. The primary victim is the vulnerable resident, robbed of economic security and placed at risk of involuntary discharge or loss of housing for nonpayment.

Sadly, the people exploiting older adults are often family members or other trusted people who are handling the financial affairs of an incapacitated parent, relative, or friend. The financial arrangement may be informal or based on a formal grant of authority to a fiduciary, such as an agent under power of attorney or a guardian. The financial wrongdoing may have begun at the time of admission, or it may go back months or years. Intervention, however, rarely begins until the exploitation causes repeated non-payment and overdue bills. While most family members and others in positions of trust are worthy of the confidence placed in them, you must act quickly when that trust is violated.

As a care provider, you are in a unique position to protect vulnerable residents from exploitation. You can prevent abuse or intervene early when the threat comes from:

- trusted persons handling financial affairs
- stranger scams, and
- staff or intruders.

Your role in the daily lives of residents positions you to stand guard and jump in when your resident is in jeopardy. This guide, which focuses primarily on exploitation by trusted persons but also includes material about responding to scams and other types of theft.

### **Purpose and Scope**

This guide aims to help operators and staff of long-term care facilities protect residents from financial exploitation through prevention and early intervention. The manual is for administrators, business office staff, social service personnel, and every staff member involved in the care and daily lives of residents.

## Four pillars of successful intervention

This manual will walk you through the following steps to protect residents from financial abuse:

1. Prevent – through awareness and training
2. Recognize – spot the warning signs and take action
3. Record – document your findings, and
4. Report – tell the appropriate authorities and trigger responses.

The model response protocol is further explained on page 14.

## Defined: Kentucky's Licensed Long-Term Care

### Family Care Home

A family care home is licensed to provide 24-hour supervision and personal care services for up to 3 adults over the age of 18 with an impaired capacity for self-care or requiring a protective environment. The resident must be ambulatory (able to walk) or mobile non-ambulatory (able to use a device to assist with walking) and be able to manage most of their activities of daily living (ADLs). Residents do not have to have an illness, injury, or disability to live in the family care home.

Services include assistance with medications, obtaining medical care or therapeutic services, assistance with bathing and grooming, and dietary assistance.

### Personal Care Home

A personal care home is licensed to provide supervision and personal care services to persons over the age of 16 with an impaired capacity for self-care or requiring a protective environment. Residents must be ambulatory or mobile non-ambulatory and able to manage most activities of daily living (ADLs), such as grooming, bathing, dressing and undressing, toileting, and feeding.

Residents receive basic health and health-related services, personal care, dietary, social, and recreational services. Housekeeping and maintenance are also included.

### Nursing Facility

A nursing facility is licensed to provide 24-hour supervision and nursing care to individuals over the age of 18 who have complex medical needs. Residents must be deficient in at least two activities of daily living (ADLs).

Services include nursing services; physical, occupational, and speech therapy; personal care services; housekeeping and maintenance; and dietary, social, and recreational services.

## What is elder financial exploitation?

*A Kentucky citizen was arrested for stealing more than \$100,000 from a 74-year-old woman with dementia. The charges included felony theft, fraud, and misuse of power of attorney. The facility alerted police when the victim fell \$20,000 behind in payments to her care facility. The investigation revealed that the perpetrator sold the victim's home to a relative for less than fair market value and took control of various other assets.*

Family, friends, neighbors, caregivers, fiduciaries, business people, and others may try to take advantage of an older person. They may take money without permission, fail to repay money they owe, charge too much for services, or not do what they were paid to do. These are examples of financial exploitation. Exploitation is defined by KRS 209.020(9) as “obtaining or using another person’s resources, including but not limited to funds, assets, or property, by deception, intimidation, or similar means, with the intent to deprive the person of those resources.” Exploitation is a form of elder abuse.

Elder abuse, often referred to as “abuse, neglect, and exploitation” includes many types of mistreatment of older adults. Abuse is defined by KRS 209.020(8) as “the infliction of injury, sexual abuse, unreasonable confinement, intimidation, or punishment that results in physical pain or injury, including mental injury.” The National Center on Elder Abuse describes seven types of elder abuse:

- Physical Abuse
- Sexual Abuse
- Emotional or Psychological Abuse
- Neglect
- Abandonment
- Financial or Material Exploitation
- Self-neglect

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*If you would like the long-term care ombudsman to provide training on other types of abuse, please call the state ombudsman at 1-800-392-2991 or your local ombudsman listed on page 2.*

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While everyone, regardless of age, is a potential victim of theft and other financial crimes, older Americans are at greater risk than the general population. Cognitive impairment diminishes the ability of older adults to make financial decisions and to detect frauds and scams. Many older people have cognitive impairments: an estimated 22 percent of Americans over age 70 have mild cognitive impairment; one in eight Americans age 65 and up has Alzheimer’s disease. The percentage of congregate care residents with cognitive impairment is much higher than the general older population. About half of nursing facility residents have dementia. Finally, new research suggests that financial exploitation in later life may occur even when older people do not have mild cognitive impairment or dementia.

As family and other trusted persons step in or are brought in to manage an elder's finances, some succumb to victimization. They are left destitute and unable to pay for their care.

Financial exploitation takes many different forms. Someone with a legal obligation to handle the vulnerable person's finances may fail to use the funds for necessities like food, clothing, shelter and health care, thus putting the vulnerable adult at risk. Agents under power of attorney, trustees, guardians, Social Security representative payees and VA fiduciaries have a legal obligation to handle finances.

In other cases, the perpetrator may have no legal obligation to take care of a vulnerable person's money. Someone may take possession of and control the vulnerable resident's property by pressuring, misleading, or lying to the vulnerable person; sometimes they gain the vulnerable adult's trust by professing to love and promising to care for him/her if they can just share a bank account.

Elder financial exploitation cases are complex. Financial exploitation often occurs in relationships where the vulnerable person has placed his/her trust and confidence in another person. When family members are perpetrators, the subtleties of family history, sibling conflicts, and expectations concerning estate management and inheritance may surface. Financial abuse may be accompanied by other types of mistreatment, such as emotional abuse or neglect of care

For the victim, the losses are more extensive than money and property. Financial exploitation can cause severe emotional distress, depression, deterioration of physical health, loss of independence, and a shortened lifespan. Despite the exploitation, the victim may continue to feel dependent on and protective of the perpetrator.

## Definitions:

***Vulnerable adult** is defined in KRS 209.020(4) as "a person eighteen years of age or older who, because of mental or physical dysfunctioning, is unable to manage his or her own resources, carry out the activity of daily living, or protect himself or herself from neglect, exploitation, or a hazardous or abusive situation without assistance from others, and who may be in need of protective services.*



## Understanding the laws

*When Mrs. B was 72, she sold her mobile home and moved in with her daughter and granddaughter in Lexington. She decided she didn't want to deal with her finances any longer and let them take control. The two drained Mrs. B of jewelry, furniture, and an annuity worth almost \$90,000 before abandoning her at a nursing facility, according to court documents. The daughter and granddaughter were convicted of grand theft and financial elder abuse, both felonies.*

### **Kentucky's Laws and Response Systems**

Kentucky's laws include definitions of financial exploitation, reporting mandates, criminal sanctions, and other important guidance. The primary agencies that investigate reports of suspected elder financial exploitation are Adult Protective Services, the Office of Inspector General Division of Long-Term Care, law enforcement, and the long-term care ombudsman. Kentucky requires health care providers to report suspected abuse, neglect, and exploitation (referred to as mandatory reporters in this guide) to Adult Protective Services, the Office of Inspector General, and local law enforcement.

### **Quick Definitions: Response Systems**

**Adult Protective Services' (APS)** is committed to keeping vulnerable adults safe and in the least restrictive living arrangement. The Department for Community Based Services (DCBS), Adult Protective Services investigates all known or suspected incidents of abuse, neglect, or exploitation of an adult as defined in KRS 209.020 (4).

**The Office of Inspector General (OIG)** is the regulatory and licensing agency for all long-term care (LTC) facilities. The Division of Health Care is responsible for inspecting, monitoring, licensing and certifying all LTC facilities. The division also is responsible for investigating complaints against those facilities.

**Kentucky's Long-term Care Ombudsmen** are advocates for residents of nursing facilities, personal care homes, and family care homes. Ombudsman staff and volunteers work to resolve problems and concerns of individual residents.

**Mandatory reporters** are people required by law required to report their suspicions about elder abuse to a specified public authority. All LTC facility staff are mandatory reporters.

## **Kentucky's Mandatory Reporting Laws**

Kentucky's mandatory reporting laws require that abuse, neglect, and exploitation be reported when the victim is a child under 18 (KRS 620.030) or a vulnerable adult (KRS 209.030).

### ***Adult Protective Services***

Frequently, Adult Protective Service workers are the first to respond in cases of abuse, neglect or exploitation. Adult Protective Service workers evaluate two things before opening an investigation:

- whether the alleged victim is *eligible* for protective services, and
- whether the information reported *meets Kentucky's legal definition* of abuse, neglect or exploitation.

**All long-term care facility staff have a mandatory obligation to report known or suspected abuse, neglect, and exploitation to Adult Protective Services.**

### *Eligibility for Protective Services*

In Kentucky, Adult Protective Services investigates alleged abuse of adults aged 18 or older who are vulnerable due to a physical or mental impairment, as defined in KRS 209.020(4). Adult Protective Services also investigates reports of spousal/partner abuse.

### *Definition of Mistreatment*

Adult Protective Service workers look at whether the allegations meet Kentucky's definition of financial exploitation. Exploitation is defined by KRS 209.020(9) as "obtaining or using another person's resources, including but not limited to funds, assets, or property, by deception, intimidation, or similar means, with the intent to deprive the person of those resources." This definition helps you to know what to watch out for and what facts to include when reporting suspected abuse.

If Adult Protective Services finds that the person has experienced or is at risk of experiencing financial exploitation, Adult Protective Services decides what services, if any, are necessary to ensure the vulnerable adult's safety or well-being and recommends a service plan.

### *Victims' Rights*

Individuals who are offered Adult Protective Services have the legal right to decline help if they have decision-making capacity. The victim may refuse services even when a mandated reporter, service provider, advocate, or the Adult Protective Service investigator believe services may be appropriate.

## Law Enforcement

Federal regulations require every facility that accepts Medicare or Medicaid dollars to report suspected financial exploitation to law enforcement. Financial exploitation may violate an array of criminal laws, including KRS 209. Some charges resulting from an investigation could include theft, larceny, embezzlement, forgery, fraud and money laundering.

Communicating and coordinating with law enforcement will help ensure that you report suspected criminal acts. You may also get help with training your staff and enhance working relationships.

## Federal Reporting Requirements

In addition to Kentucky's mandatory reporting laws, federal law<sup>1</sup> requires long-term care facilities that received at least \$10,000 in federal funds during the preceding year to report suspected crimes against a resident to state survey agencies and to local law enforcement.

Specifically, the law requires that the owner, operator, employee, manager, agent, or contractor of a covered facility report "any reasonable suspicion of a crime," as defined by local law, committed against a resident of, or someone receiving care from, the facility. If the victim has serious bodily injury, covered individuals must report immediately upon suspicion, but no later than two hours after the suspicion occurs. Other reports must be made no later than 24 hours after forming the suspicion.

Covered individuals are subject to penalties for failure to fulfill these obligations. Facilities must notify covered individuals, e.g. employees and contractors, of their duties annually. In addition, facilities must display in a conspicuous location a notice of employees' rights, including protections from retaliation for carrying out their responsibilities under this law.<sup>2</sup>

### Retaliation:

According to 42 USC 1320b-25 Section 1150B(d), a facility may not discharge, demote, suspend, threaten, harass, or deny a promotion or other employment-related benefit to an employee, or in any other manner discriminate against an employee because of lawful acts done by the employee, including reporting suspected abuse, neglect, or exploitation.

<sup>1</sup> 42 U.S.C. 1320b-25

<sup>2</sup> [http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/downloads/SCLetter11\\_30.pdf](http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/downloads/SCLetter11_30.pdf)

## Warning Signs that *May* Indicate Financial Exploitation

*Mr. C was charged with stealing more than \$315,000 from his elderly mother's retirement accounts over the course of five years. According to the criminal complaint, he was named as his mother's agent under a power of attorney. Prudent investment and funds from long-term care insurance should have been sufficient to cover his mother's care for the rest of her life, yet she was evicted from her assisted living residence for nonpayment. In the process of searching for a less expensive facility, another of the victim's children uncovered the theft. The majority of withdrawals had been made at a casino over a period of years.*

A variety of things you observe or detect may signal that a resident is a victim of financial exploitation. Here are some of the red flags:

### Things a resident tells you or that you observe concerning the resident

- Resident, **regardless of cognitive impairment**, complains or reports that someone is misusing or stealing his/her money or property.
- Resident reports missing checkbook, credit card, or important papers.
- Resident is agitated or distraught prior to or after a family member or friend visits or takes him/her out for a visit or appointment.
- Resident becomes secretive and suddenly starts hiding possessions or hoarding papers.

### Things you observe in or about a resident's room or apartment

- Disappearance of possessions.
- Replacement of possessions in resident's room with less valuable ones.
- Resident lacks basics (e.g. underwear) and personal needs account is depleted.
- Blank deposit slips or withdrawal forms in conspicuous places for easy taking.
- Missing or unaccounted for medications.

### **Family dynamics and other observations when the resident is with visitors**

- Observing/hearing a resident pressured to make a decision or sign a document “now.”
- Observing/hearing a resident being threatened by family or other visitor that unless the resident agrees to or signs a document, he or she will stop taking care of the resident.
- Suspected person lets others visit only when he/she is present and insists on speaking for the resident (chaperoning).
- New acquaintance shows intense affection for resident and isolates her/him from others.
- Previously uninvolved persons claim authority to manage resident’s care and/or finances but do not provide documentation.
- Agent or family member declines or pressures resident to decline prescribed treatment(s) on the basis of cost, overriding the resident’s wishes.
- Family members or fiduciaries avoid care plan meetings or fail to return calls from facility staff.
- Resident, family member, or visitor has a known problem with gambling, drugs, or alcohol.
- Conflicts arise concerning finances between resident’s adult children or others with close relationships to the resident.

### **Billing issues**

- Unpaid facility or pharmacy bills.
- Person handling resident’s money stalls and breaks promises.
- Abrupt or repeated changes in responsibility for paying resident’s bills.
- Bills paid in cash.
- Family member, friend, fiduciary or partner indicates he or she plans to move the resident after questions arise about suspected financial exploitation.

## **Power of Attorney Matters**

- Agent under power of attorney fails to provide documentation.
- Multiple agents under powers of attorney in conflict over responsibility to pay the facility bill.
- Resident who appears to lack decision-making capacity signs new power of attorney document.

## **Checks and Imbalances**

- Checks or other documents signed/dated even though a resident is unable to write.
- Suspicious signatures, such as many versions of a resident's signature or one that was shaky is suddenly firm or vice versa.
- Resident's checkbook or check register shows checks payable to "cash" and/or check numbers out of sequence.
- Telephone card or telephone bill fees for calls not made or authorized by the resident.
- Credit card charges for items not purchased by the resident.
- Erratic use of personal needs allowance by family member or fiduciary.
- Frequent or expensive gifts for staff or volunteers.
- Sales of valuables to facility staff or volunteers.

## **Model response protocol: recognize, record and report**

*Mrs. A, who suffered a series of strokes, named her daughter Lisa as agent under a power of attorney to pay her nursing home bills. Instead, Lisa wrote checks to herself and to buy groceries and personal items. The daughter then moved her mother from one skilled nursing facility to another because of unpaid bills. An ombudsman who became involved during the victim's second placement noted that the second home similarly discharged the resident and wrote off the bills. At the third nursing home, the ombudsman, adult protective services, and the police addressed the financial exploitation of the resident and arranged stable housing for her. Prosecutors charged the daughter, and she pleaded guilty to one count of theft by swindle for taking \$22,000.*

### **Establish and maintain a team approach to financial security.**

Prevention of financial exploitation is the number one goal and awareness and training are keys to prevention. However, your other priorities should be early recognition, documentation and reporting. In fact, these activities also contribute to prevention—since financial abuse is often ongoing, early identification of a problem can help “stop the bleeding.”

Assemble a team that will form your facility's frontline on financial exploitation. The team should include the administrator, business office representative, and social worker. The team should implement a system for early, effective responses to financial exploitation through regular meetings, case review, and coordinated action. Consider adding other staff, such as the admissions coordinator, to the team. The system should be part of any corporate compliance plan.

Decide who has the lead responsibility for record-keeping and reporting cases of suspected financial exploitation. In nursing facilities, the compliance officer would most likely have that role. The team should designate a back-up person in case the lead person is unavailable.

Provide training for the team on your objectives for preventing and responding to financial exploitation and the jurisdictions and boundaries of pertinent agencies.

Without a solid team approach, led by the administrator, hectic days in a facility and periodic changes in staffing can allow exploitation to continue. An effective team promotes the safety of the resident and the financial security of the facility.

### **Investigate and record as soon as warning signs appear**

- When suspicions arise, call a team meeting. The red flag might be an account that is delinquent for 60 days or any of the warning signs listed on pages 11-13.
- Consult with other staff members who may have observed relevant behavior. Remind them to document each instance of the behavior with the date, time, what was observed, and names and contact information for witness(es).
- Direct care and housekeeping or maintenance staff may be the most familiar with the resident. Encourage them to talk with you about their concerns, and include their observations in the record.
- Document all pertinent communication such as phone calls, meetings, and letters. Investigators will need dates, times, locations, behaviors/statements, physical evidence, and the names of witnesses.

### **Advocate for the vulnerable resident**

- Talk with the resident separately from the individual(s) suspected of exploitation. Note inconsistencies in their stories. Ask open-ended questions. Take note of nonverbal cues in your conversation and in the interactions between the resident and suspected abuser. The resident may be hesitant to acknowledge a loved one's financial missteps due to guilt, fear of retaliation, or sympathy for the exploitative person, particularly when the resident has rescued the person from trouble repeatedly. With support from a trusted advocate, a victim who refuses to acknowledge abuse or exploitation may later develop the courage to talk about the experience.
- The social worker or other designated staff member should inform the resident about the local Long-term Care Ombudsman Program and assist the resident with contacting that office. If there is an ombudsman visitor who comes to the facility periodically, the resident may prefer talking to that individual in person rather than making a call for help. Facility staff should not contact the ombudsman solely because the resident is at risk of discharge for nonpayment.
  - The ombudsman's role is to respond directly to the resident and to act on his or her behalf. You may reach out to the ombudsman when a resident is cognitively or physically unable to make contact themselves.



- When a resident cannot consent and does not have a legally authorized surrogate—or the local ombudsman determines that a legal representative is not acting in the resident’s best interest—the local ombudsman takes guidance from the state ombudsman on how to proceed. The state ombudsman uses an established protocol to take action on behalf of a resident who cannot make or communicate decisions.

### **Understand reporting requirements**

- Be aware of Kentucky’s laws about reporting suspected financial exploitation. In Kentucky:
  - You and members of your staff are mandatory reporters to Adult Protective Services.
  - If you are working in a Medicare or Medicaid certified facility, you have additional reporting obligations to law enforcement and the Office of Inspector General.
  - Anyone living in a long-term care facility is a vulnerable adult and therefore eligible for services from Adult Protective Services.
  - Adult Protective Services and law enforcement investigate financial exploitation in long-term care facilities.
- Understand the immunity provisions in Kentucky’s laws—and reassure your staff that there are “safe harbors” for reporting suspected abuse. Kentucky’s KRS 209.050 describes the provisions providing immunity for good faith reporting of suspected elder financial exploitation. As long as you made the report in good faith, you can’t be held liable if the activity you observed wasn’t exploitation. This immunity includes civil and criminal liability. It also applies to other activities that may stem from those reports, such as testifying in a court or administrative proceeding.
- Remember that federal law requires nursing home providers and specific “covered individuals” to report suspected crimes against a resident to local law enforcement. Understanding how Kentucky defines financial exploitation will help you fulfill this reporting obligation.
- Document your information as thoroughly as you can, but remember that you are reporting a reasonable suspicion, not investigating a crime or proving a case. Think of the reporter’s role as that of a traditional newspaper reporter. Keep notes to the degree possible on who, what, where, when, and how.

## Make a report: who, what, where, when and how

- Report financial exploitation of a vulnerable resident in accordance with state and federal law. The Adult Protective Services Elder Abuse Hotline is 1-800-752-6200. Keep local law enforcement contact information accessible to your staff.
- To report suspected elder financial exploitation to local authorities, state that you are requesting an investigation of financial exploitation of a vulnerable resident.
- Your allegation should include facts that support and illustrate the report. Your state's law may list the things you should include in your report. Here are basic components of a report to authorities:
  - time and date of the report
  - name, address, email address and telephone number of the person reporting
  - time, date, and location of the incident(s)
  - name(s) of the persons involved, including but not limited to the alleged victim, alleged perpetrator(s) and witness(es)
  - whether you believe the resident is in imminent danger
  - a description of the suspected financial exploitation and signs of any other type of abuse or neglect
  - alleged victim's disability and/or health condition, including any information on cognitive status
  - relationship of the alleged perpetrator to the alleged victim, if known
  - whether a report has been made to any other public agency
  - whether the facility has conducted an internal investigation and if so, the contact information for the individual(s) responsible for the investigation.
- There are specific federal requirements for reporting financial crimes directly to law enforcement. However, staff report suspected exploitation, theft and any other financial crime directly to local law enforcement, just as you would in your own home.

### Fact or Fiction:

Sometimes staff at a protective services, law enforcement or licensing agency will claim that a discharge notice is required before you may make a report. **This is not true.** Regardless of whether a resident has a delinquent account or is facing discharge from the facility, agencies should accept the report and assign the case for investigation.

## **Follow-up makes a difference**

If you are dissatisfied with a public agency's response to your report, you may be able to make headway by asking the agency whether additional information would be helpful to the investigation. Ask to discuss the case with a supervisor. Contact Kentucky's Association of Health Care Facilities for advice on how to work more effectively with the public agency. You may not have to accept NO as the one and only answer. Be aware, however, that Adult Protective Services is bound by confidentiality restrictions that may preclude sharing information without the client's permission. It may appear to you and others in the community that Adult Protective Services did not respond or offer services, when in fact the agency did all it could.

Document every conversation with agency officials for future reference, noting the names of contacts and the dates and times of your conversations.

Unfortunately, national trends indicate an increasing demand for Adult Protective Services but no growth in investigative staff. Adult Protective Services agencies may prioritize case types and may not have the capacity to respond to all reports. The resulting triage of cases inevitably causes frustration for people whose reports do not trigger an investigation. **But keep at it when you believe your resident has been victimized and needs help.**

## **Additional Avenues for Action When You Suspect Financial Abuse of a Resident**

Contact the local **Social Security** office if you suspect a representative of the payee is misusing a resident's Social Security benefits. Call the Social Security's toll-free number (1-800-772-1213) from 7 a.m. to 7 p.m. on business days.

If the resident needs a new payee, try to assist in identifying an alternative family member or trusted person who can serve as representative payee. Representative payee applications are available at the local Social Security office. As a last resort, the provider can be the representative payee. As a general principle, there is an inherent conflict of interest when one entity has the simultaneous authority to bill for payment and to pay the bills. For more information, consult the Social Security Administration's guide for organizational representative payees. [www.ssa.gov/payee/NewGuide/toc.htm](http://www.ssa.gov/payee/NewGuide/toc.htm).

Contact the **Department of Veterans Affairs** if you suspect financial abuse by a VA fiduciary. The Department provides contact information at [https://iris.custhelp.com/app/answers/detail/a\\_id/3029](https://iris.custhelp.com/app/answers/detail/a_id/3029) or you can use the "contact us" feature at <https://iris.custhelp.com/app/ask>. For more information about the VA fiduciary program, check [www.benefits.va.gov/fiduciary/](http://www.benefits.va.gov/fiduciary/).

Contact the **court** that appointed the resident’s guardian or conservator if you suspect that he or she is misusing the resident’s funds or property.

Contact the vulnerable resident’s **bank, credit union or other financial services provider**. Your notification may trigger an internal investigation and further action by the financial institution. Without authorization by the owner of the account or a legally authorized fiduciary, you are not entitled to receive information or follow-up to your “report.” Direct your call to a security officer at the bank or financial institution. Also remember that your first call should be to the local authorities who investigate suspected financial exploitation of vulnerable adults in your state and your type of facility.

### **The suspected perpetrator is a staff member, contractor, or volunteer in the facility**

This manual does not include procedures for handling personnel issues when the suspected perpetrator is a staff member, contractor, or volunteer. Have protocols and processes in place before it is needed.

### **Civil laws**

In Kentucky, there are remedies beyond criminal sanctions. These laws help victims of financial exploitation and their attorneys bring cases in civil court and recover assets. Suggest that victims and those acting on their behalf consult an attorney to explore potential civil remedies.

### **Getting advice in your community**

Call the long-term care ombudsman who visits residents at your facility. The ombudsman’s phone number should be easily found on a poster displayed in the nursing home. Call the Nursing Home Ombudsman Agency of the Bluegrass at 1-877-787-0077. When in doubt, call and talk with a trained professional about your concerns. In addition to legal counsel, every facility needs a dependable source for advice and assistance on financial exploitation. Try to identify a useful source in your community or state for advice in handling difficult cases.

## Preventing and Deterring Financial Exploitation: Orientation, Training, and Facility Policies

*“There is a time I was working in a nursing home and one lady was admitted there. I worked with her for several months and she explained to me how her family and investment advisers had colluded and she lost all her money and was now on welfare. She expressed how she missed a lot of things she wanted to do or buy. One thing she really missed was a good deodorant. I took it upon myself to buy her deodorant and lotion. I was happy that I added joy and happiness to the life of a lady who was suffering from depression.”*

### Building awareness through staff orientation and training

Educating staff can help prevent financial exploitation of your residents and encourage compassionate responses. Facility management sets the tone that encourages good faith communication between staff and administration. This guide provides content, such as warning signs, to use as you train your staff. **In addition, your local ombudsman may be able to provide training on preventing, identifying, and reporting abuse, neglect, and financial exploitation.** See page 2 to find your local ombudsman.

Invite a police officer or other law enforcement official (particularly one with special knowledge of older victims or financial crimes) and/or an ombudsman to participate in training and answer questions. Adult Protective Service representatives and social service providers also make good trainers. These are opportunities to open up communication on difficult topics within the facility as well as between facility staff and local service providers. These events promote a culture in which staff members feel safe in expressing suspicions to facility administrators.

### Topics for staff orientation and in-service training about financial exploitation

- Provider’s commitment to preventing and responding to financial exploitation
- Definitions and warning signs
- Residents’ rights
- Risks of permitting financial exploitation to escalate
- When and how to make reports to Adult Protective Services, the Office of Inspector General, and law enforcement
- Overview of financial crimes as defined by Kentucky’s laws
- Consequences for perpetrators of financial exploitation under Kentucky’s laws
- Provider’s policies prohibiting accepting money and loans from residents
- Provider’s policies and internal processes for documenting and reporting suspected financial exploitation

- The role of the compliance officer
- Applicable state laws and facility policy for releasing money from personal accounts
- Protecting residents from unsuitable or deceptive sales presentations
- How to balance residents' rights to have visitors with measures to protect residents from unwanted intruders
- Financial powers of attorney and health care advance directives
- Role of the Long-Term Care Ombudsman Program

Train everyone on your staff who come in contact with potential victims of elder financial exploitation. This includes nursing staff, social service staff, housekeepers and maintenance workers. Those without direct care responsibilities may be the first to notice warning signs of trouble.

A facility employee suffering from “burnout” or a personal crisis can be more prone to misappropriating resident funds or property. Evaluate your personnel policies and staffing patterns. Make changes that reduce stress in the work environment. Develop ways to recognize and respond to staff burnout and personal crisis. Employee assistance programs provide a resource for addressing these challenges. Train managers and provide resources about signs of staff burnout or personal crisis so that they can be alert for risks to residents. Provide clear guidance to prevent behavior that may hurt the employee, the residents in his or her care, and the facility.

### **Building awareness among residents and their loved ones**

Programs for staff should be coupled with programs for residents, family members, and groups such as resident and family councils. For these meetings, too, invite a police officer, ombudsman, Adult Protective Service representative or social service provider to assist with training and answer questions. These sessions can begin an ongoing education process and dialogue.

### **Topics for resident and family programs about financial exploitation**

These sessions should include topics listed above for staff training, with a few additions:

- Whom to contact when residents or family members have a concern
- Safeguarding private documents and valuables
- Applicable federal and state laws and facility policy on releasing money from residents' personal accounts
- Managing someone else's money
- Revisiting facility policies and admission paperwork. Many families may have been overwhelmed and unable to retain information shared upon admission.

One way to start the conversation is by discussing a financial exploitation case from a newspaper story. The case vignettes in this manual may be a starting point. These opportunities can also encourage a resident or family member to confide concerns about financial exploitation to staff and initiate steps to prevent a situation from worsening.

If your facility has a newsletter, use a resident or family program as an occasion to write an article about preventing financial exploitation. For even wider impact, a resident or family council can sponsor a community forum on preventing, recognizing, and reporting financial exploitation at the facility or elsewhere. For example, a “shred-a-thon” event to target identity theft may spur both heightened awareness and local recognition for your resident or family council.

### **Help for friends and family managing someone else’s money**

Millions of Americans are managing money or property for a family member or friend who is unable to pay bills or make financial decisions. This can be overwhelming. You can provide resources to help them manage money for residents.

The Consumer Financial Protection Bureau Office for Older Americans released four easy-to-understand booklets to help financial caregivers. The *Managing Someone Else’s Money* guides are for fiduciaries—people named to manage money for someone else. There are separate guides for agents under powers of attorney, court-appointed guardians, trustees, and government benefit fiduciaries, such as Social Security representative payees and VA fiduciaries.

The guides help people acting as fiduciaries in three ways:

- They walk them through their duties.
- They tell them how to watch out for scams and financial exploitation, and what to do if their loved one is a victim.
- They tell them where to go for help.

The guides are available to download on the Consumer Financial Protection Bureau website at [www.consumerfinance.gov/managing-someone-elses-money](http://www.consumerfinance.gov/managing-someone-elses-money).

Free bulk orders are available through <http://promotions.usa.gov/cfpbpubs.html#special>. Consider distributing the guides at a family or resident program at your facility.

## Prevention from Day One: Facility Financial Policies and Practices

### Admission to Facility

The time of admission can be confusing and emotional for new residents, families and surrogates. It's important to provide tools for financial protection of residents at the outset. Give the resident or someone acting on the resident's behalf the following information written in plain language:

- The name and contact information for the staff person who answers billing and coverage questions.
- The facility's process for responding to late or missed payments
- Information on serving as a fiduciary, such as the CFPB's *Managing Someone Else's Money* guides, when appropriate
- Policies and procedures for receiving and handling cash from residents or families
- Facility policies regarding theft of personal property and systems for reporting and responding to allegations
- Recommendations for safeguarding checkbooks, ATM cards, and federal benefit debit cards.

If the resident has a fiduciary, the facility should obtain and keep on file documentation of the fiduciary's authority. Examples include power of attorney instruments, court documents naming a guardian, Social Security representative payee authorization, VA fiduciary appointments, and trust documents.

Unless you expect the resident's stay to be short, the resident or resident's representative should file a change of address notice with the Social Security Administration and any other entities that send benefits through the mail.

Recommend that residents safely destroy ATM cards they no longer use and that they change the Personal Identification Number (PIN) on a card they intend to use.

Recipients of Social Security and other federal benefits are required to receive their benefits electronically, either by direct deposit to a bank or credit union account or to a Direct Express Debit MasterCard card account, with certain exceptions. For information on electronic payments and how to protect people in your care, visit the Department of the Treasury and the Social Security Administration websites.<sup>3</sup>

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<sup>3</sup> For example, see <https://fiscal.treasury.gov/GoDirect/partners/nursing-facilities/index.html>. This link includes a federal government webinar that was developed in conjunction with the American Health Care Association.



## **Monitoring Residents' Payments to the Facility for Room and Board and Other Services**

Unpaid bills may be a result of financial exploitation of the resident, so monitoring payments to the facility is crucial. Early detection and intervention are keys to preventing the worst-case scenarios of depleted resources and imminent discharge. Sometimes non-payment has another cause, such as confusion, inaction on an application for public benefits, or a glitch in a third-party payment. Stay on top of all cases where payment is behind, regardless of the cause, so residents' needs are met.

A few weeks after move in, review the information discussed at admission with the resident or the resident's fiduciary when the resident cannot engage in meaningful conversation about financial matters. Answer questions and identify any problems to address.

Maintain and update documents to track residents' payments in the business office. Delinquent account tracking documents will be important support for reports of financial abuse to Adult Protective Services and law enforcement.

Establish a process for examining all accounts that are delinquent for 60 days/two payment cycles. Be alert for warning signs of exploitation and intervene, even if you don't spot red flags.

### **Exploitation or confusion?**

Unpaid bills may be a result of financial exploitation; they also may be a sign that families are caught in a maze of rules and paperwork.

You can minimize confusion—and avoid overdue payments—by working with family members and other non-professionals who are assisting the resident. People who are confused or uncertain may be more likely to work with you than those who may be misappropriating a resident's funds.

Support and encourage at admission and follow-up people who seem overwhelmed and bewildered by their situation or their fiduciary duties. Family members and other authorized representatives often have little knowledge about programs that affect the resident's financial well-being, such as Medicare, its limitations, the Medicaid program, and the Medicaid application process. Also, they may not understand their duties when managing someone else's money and may benefit from reading the Consumer Financial Protection Bureau's guides. Those guides and other resources are on pages 31-35.

### **Monitoring Residents' Funds**

Establish and follow policies for releasing funds from residents' personal needs (trust) accounts. Policies should clarify when funds may be released to someone other than the resident.

Perform periodic quality control reviews on a sample of withdrawals from personal funds or personal needs allowance accounts maintained by the facility.

Be alert to depleted accounts of residents who are without basic necessities, such as undergarments, or who say they cannot participate in special facility outings, such as baseball games, because they cannot afford a ticket or fee.

### **Resident Gifts to Staff or Volunteers**

Communicate policies that prohibit gifts from residents to staff, with exception of small tokens of gratitude or holiday gifts.

Have systems to monitor gifts to staff and volunteers to ensure compliance. Explain these monitoring procedures to staff and volunteers.

### **Sales Calls and Presentations to Residents**

Establish and follow policies that provide a welcoming "open door" to the community, while being alert for salespeople who may pose threats to residents.

Prohibit or develop vigilant screening processes for sales events, including those described by the outside entity as "informational." Beware of retirement or senior seminars promoted as "educational" or as a "workshop." The true goal may be to sell investments, insurance, or financial products at the seminar or in follow-up calls. The Consumer Financial Protection Bureau's consumer brochure, *Know your financial adviser*, may be helpful to residents and is available to download at [http://files.consumerfinance.gov/f/201311\\_cfpb\\_flyer\\_senior-financial-advisors.pdf](http://files.consumerfinance.gov/f/201311_cfpb_flyer_senior-financial-advisors.pdf).

Suggest that residents and families share concerns with you about telephone calls or visits from salespeople. Encourage them to say "NO" whenever they feel pressured to make a decision or a purchase.

### **Hiring Policies**


Criminal background checks are one tool for determining whether an applicant for a staff or volunteer position may pose a risk of financial exploitation. When orienting and training new employees, communicate your policies on abuse prevention. Emphasize that each resident's person and property will be protected in your facility.



## Responding as a Community

Addressing elder financial exploitation would be considerably more straightforward if communities, counties, and states shared universal protocols and resources. The reality is that procedures and sources of help vary widely. Providers and agencies at the local level should come together to understand one another's mandates and limitations. These conversations can serve as a springboard to creating effective local methods for responding to cases of financial exploitation in residential care.

Many of Kentucky's Area Development Districts and counties have a Local Coordinating Council on Elder Abuse. To view a map of the councils and contact information, visit <https://chfs.ky.gov/agencies/dcbs/dpp/apb/Pages/elder-abuse.aspx> and click the link on the right for "Local Coordinating Councils on Elder Abuse Map."



## Fraud and Scams that Target Older People

*Mrs. N began receiving sweepstakes offers in the mail shortly after her husband entered the nursing home. “They’d tell me I won and that all I had to do was send in \$50 and I’d get free prizes, so I kept playing,” she said. “They’d call me, too, and they were very nice on the phone.” Pretty soon, Mrs. N was getting two or three calls a day and a grocery sack full of mail each week—news of “prizes” she had “won,” but could collect only by sending anywhere from \$50 to \$2,000 by overnight mail. One day she asked a bank employee how she could send a large amount of cash through the mail. When the clerk heard what it was for, she examined Mrs. N’s account transactions and found the elderly woman was writing as many as 90 checks a month to participate in sweepstakes games offering “free prizes.”*

### Senior Scam Alerts

To help stop con artists, Kentucky’s Attorney General launched Scam Alerts – a messaging service to immediately alert Kentuckians when con artists are on the attack. To receive alerts via text, text KYOAG Scam to 468311. To receive alerts via email, visit [ag.ky.gov/scams](http://ag.ky.gov/scams). The Federal Trade Commission has a “scam alert” page with information about the ever-changing ways that scam artists target consumers, at <http://www.consumer.ftc.gov/scam-alerts>.

Scams and fraud by strangers arise even in protected settings like personal care homes and nursing facilities. Predators with a convincing story are as near as the telephone and the mailbox. Residents who use a computer to remain connected with family and friends may be vulnerable to fraud as well.

Scams are always changing. This year’s romance scam or grandparent fraud will be replaced by a new and creative scheme next year. The table on page 29 describes common consumer scams. Keep your eyes open for new ones.

Residents of long-term care facilities may be targets of predators who take advantage of victims’ memory loss or their fear of a failing memory. For example, scammers may claim to be following up on a bogus order with a “payment” due. This is a double whammy. The victim is demeaned for “forgetting” and then robbed.

Here are some warning signs that scammers are victimizing a resident.

- The resident receives news about a prize or other windfall that requires payment of fees or taxes up front.
- The resident is pressured to keep good news a secret until a transaction is complete or risk losing out on this one-time opportunity.
- A caller constantly seeks more information and pressures the resident to comply.
- A third party claims to be from a government agency, financial institution or other entity and asks for information they should already have.
- A resident receives a lot of mail or email for sweepstakes, contests, or other sources suggesting that he or she has already been scammed.

Preventing predatory crimes requires our best efforts to raise awareness and ensure prompt response. To avoid identity theft, add safety features, such as antivirus software and password protection, to all facility-owned computers that are available to residents for personal use. Don't confiscate mail or monitor phone calls—those activities violate residents' rights. Use other strategies. Distribute alerts, bulletins, pamphlets, and other resources to warn seniors and their families about scams. These resources may be available from the Kentucky Attorney General's office, senior centers, ombudsman programs, national organizations, and federal agencies. Conduct in-person programs for residents and families.

If you believe specific residents are the target of a telephone, mail, or computer scam, consider talking with the resident about your concerns and offer support and help to the resident in sorting the mail and discarding deceptive "offers." However, if a resident refuses your help, do not violate their rights to phone privacy and unopened mail.

## Common Consumer Scams

<b>Relative in need</b>	Someone who pretends to be a family member or friend calls or e-mails you to say they are in trouble and need you to wire money right away.
<b>Charity appeals</b>	You get a call or letter from someone asking for money for a fake charity—either the charity does not exist or the charity did not call or write to you.
<b>Lottery or sweepstakes</b>	You get a call or e-mail that you have a chance to win a lot of money through a foreign country’s sweepstakes or lottery. The caller will offer tips about how to win if you pay a fee or buy something. Or the caller or e-mail says you already have won. You must give your bank account information or pay a fee to collect your “winnings.”
<b>Home improvement</b>	Scammers take money for repairs and then they never return to do the work or they do bad work. Sometimes they break something to create more work or they say that things need work when they don’t.
<b>Free lunch</b>	Scammers invite you to a free lunch and seminar, and then pressure you to give them information about your money and to invest the money with them. They offer you “tips” or “guaranteed returns.”
<b>Free trip</b>	Scammers say you’ve won a free trip and they ask for a credit card number or cash to hold the reservation.
<b>Government money</b>	You get a call or letter that seems to be from a government agency. Scammers say that if you give a credit card number or send a money order, you can apply for government help with housing, home repairs, utilities, or taxes.
<b>Drug plans</b>	Scammers pretend they are with Medicare prescription drug plans and try to sell Medicare discount drug cards that are not valid. Companies with Medicare drug plans are not allowed to send unsolicited mail, emails, or phone calls.
<b>Identity theft</b>	Scammers steal personal information, such as name, date of birth, Social Security number, account number, and mother’s maiden name, and use the information to open credit cards or get a mortgage in someone else’s name.
<b>Fake “official” mail</b>	Scammers send letters or e-mails that look like they are from a legitimate bank, business, or agency to try to get your personal information or bank account number.

# Review

**Together, we can work to combat financial exploitation of vulnerable adults, wherever they live.**

Here are the keys to success in congregate facilities.

- Understand the warning signs of elder abuse.
- Provide practical information about prevention and response to suspected exploitation to staff, residents, their families and others involved in the individual's care.
- Respond quickly to delinquent accounts and unauthorized use of funds intended for the benefit of the resident, such as personal needs allowance accounts.
- Establish and maintain a well-coordinated team approach to financial security.
- Become skilled at recording and organizing information about suspected exploitation.
- Understand the responsibilities of mandated reporters, how to make a report, and how to follow up on reports.
- Learn to spot scams that can target any vulnerable people, especially those in care facilities.
- Know the roles of the long-term care ombudsmen, legal services programs and other service providers in your area.
- Have resources and contact numbers close at hand—and use them to prevent, recognize, record and report.

## Resources for facilities, residents and families

### Area Agencies on Aging & Independent Living (AAAILs) Area Disability Resource Centers (ADRCs)

These local agencies offer information about aging and disability services and resources for caregivers.

#### **Barren River**

Serving Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson and Warren counties  
ADRC: 1-800-395-7654

#### **Bluegrass**

Serving Anderson, Boyle, Bourbon, Clark, Estill, Fayette, Franklin, Garrard, Harrison, Jessamine, Lincoln, Madison, Mercer, Nicholas, Powell, Scott, and Woodford, counties  
ADRC: 866-665-7921

#### **Cumberland Valley**

Serving Bell, Clay, Harlan, Jackson, Knox, Laurel, Rockcastle and Whitley counties  
ADRC: 1-844-213-9676 606-877-5763

#### **Gateway**

Serving Bath, Menifee, Montgomery, Morgan and Rowan counties  
ADRC: 1-855-882-5307

#### **Kentucky River**

Serving Knott, Leslie, Letcher, Perry, Breathitt, Lee, Owsley and Wolfe counties  
ADRC: 1-800-928-5723

#### **Lake Cumberland**

Serving Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor and Wayne counties  
ADRC: 270-866-7092

#### **Northern Kentucky**

Serving Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen and Pendleton counties  
ADRC: 866-766-2372

#### **Purchase**

Serving Ballard, Calloway, Carlisle, Fulton, Hickman, Graves, Marshall and McCracken counties  
ADRC: 1-800-866-4213

#### **Big Sandy**

Serving Floyd, Johnson, Magoffin, Martin and Pike counties  
ADRC: 1-800-737-2723

#### **Buffalo Trace**

Serving Bracken, Fleming, Lewis, Mason and Robertson counties  
ADRC: 1-800-998-4347

#### **FIVCO**

Serving Boyd, Carter, Greenup, Elliott, and Lawrence counties  
ADRC: 1-800-491-5191

#### **Green River**

Serving Daviess, Hancock, Henderson, Mclean, Ohio, Union, and Webster counties  
ADRC: 1-800-928-9094

#### **KIPDA**

Serving Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer, and Trimble counties  
ADRC: 1-888-737-3363

#### **Lincoln Trail**

Serving Breckinridge, Grayson, Hardin, Larue, Marion, Meade, Nelson, and Washington counties  
ADRC: 1-800-264-0393

#### **Pennyrile**

Serving Caldwell, Christian, Crittenden, Hopkins, Livingston, Lyon, Muhlenberg, Todd and Trigg counties  
ADRC: 1-866-844-4396



## **Adult Protective Services (APS)**

Any suspected abuse, neglect or exploitation, whether against loved ones or other residents, must be reported to Adult Protective Services. This agency investigates complaints of abuse, neglect and exploitation. If you suspect abuse, neglect or exploitation, make a record of the incident and ALERT authorities. A report may be written or called into 1-800-752-6200.

## **County attorney**

The county attorney's office is responsible for the prosecution of all violations of criminal law within the jurisdiction of the district court. Find your county attorney on the Kentucky County Attorneys Association website.

[kycaa.com/directory/](http://kycaa.com/directory/)

## **Kentucky Attorney General**

The Kentucky Attorney General is an elected official and serves as the chief legal advisor and law enforcement officer for the state. The Attorney General has many different responsibilities, including protecting consumers from fraud.

[ag.ky.gov/](http://ag.ky.gov/)

## **Police or Sheriff**

Find your local law enforcement agency by checking the directories below.

[www.usacops.com/ky/](http://www.usacops.com/ky/)

[kentuckystatepolice.org/](http://kentuckystatepolice.org/)

## **Kentucky State Long-term Care Ombudsman Program**

Services of the state Long-Term Care Ombudsman program are coordinated through the Office of the State Long Term Care Ombudsman which is housed at the Nursing Home Ombudsman Agency. The Kentucky Office of the State Ombudsman program oversees 15 district programs affiliated with Area Agencies on Aging and Independent Living. See the directory on page 2 for the ombudsman in your area.

1-800-372-2991

[www.ombuddy.org](http://www.ombuddy.org)

## Legal Services

### **Legal Aid of the Bluegrass**

Anderson, Bath, Boone, Bourbon, Boyd, Boyle, Bracken, Campbell, Carroll, Carter, Elliott, Fayette, Fleming, Franklin, Gallatin, Grant, Greenup, Harrison, Jessamine, Kenton, Lewis, Mason, Menifee, Mercer, Montgomery, Morgan, Nicholas, Owen, Pendleton, Robertson, Rowan, Scott, and Woodford Counties.

1-859-431-8200

[lablaw.org](http://lablaw.org)

### **Legal Aid Society of Louisville**

Jefferson County

1-800-292-1862

[www.laslou.org](http://www.laslou.org)

### **Appalachian Research and Defense Fund of Kentucky, Inc.**

Bell, Clay, Harlan, Knox, Laurel, McCreary & Whitley, Breathitt, Lee, Leslie, Letcher, Owsley, Perry, and Wolfe, Pike, Floyd, Johnson, Knott, Lawrence, Magoffin, Martin, Clark, Estill, Garrard, Jackson, Madison, and Powell, Adair, Casey, Clinton, Cumberland, Lincoln, McCreary, Monroe, Pulaski, Rockcastle, Russell, and Wayne Counties

[www.ardfky.org](http://www.ardfky.org)

1-866-277-5733

### **Kentucky Legal Aid**

Allen, Ballard, Barren, Butler, Caldwell, Calloway, Carlisle, Christian, Crittenden, Daviess, Edmonson, Fulton, Graves, Green, Hancock, Hart, Henderson, Hickman, Hopkins, Livingston, Logan, Lyon, Marshall, McCracken, McLean, Metcalfe, Muhlenberg, Ohio, Simpson, Taylor, Todd, Trigg, Union, Warren, and Webster Counties

1-800-782-1924

[www.klaid.org](http://www.klaid.org)

### **Fee-for-service lawyers**

Find an attorney with the Kentucky Bar Association's Lawyer Locator.

[www.kybar.org/](http://www.kybar.org/)

### **Information on legal issues affecting residents**

The National Legal Resource Center has information on financial security, guardianship, capacity and related topics.

<https://nlrc.acl.gov/index.aspx>

## Benefits

### **State Health Insurance Assistance Program (SHIP)**

Call Kentucky's SHIP hotline for information about Medicaid, Medicare, and Medicare Advantage Plans.

1-866-516-3051

### **Benefits Check-up**

BenefitsCheckUp, a free service of the National Council on Aging, helps adults age 55 and over identify benefits that could save them money and cover the cost of everyday expenses.

[www.benefitscheckup.org](http://www.benefitscheckup.org)

### **Medicaid/Medical Assistance**

Find a listing of state agencies that provide Medicaid/Medical Assistance on the federal Benefits.gov website.

[www.benefits.gov/benefits/browse-by-category/category/MED](http://www.benefits.gov/benefits/browse-by-category/category/MED)

### **Social Security**

Find information about Social Security benefits, appeals, and representative payees.

[www.socialsecurity.gov](http://www.socialsecurity.gov)

### **Veterans Benefits**

The Department of Veterans Affairs provides information about eligibility, health and long-term care benefits, and in-home care.

[www.benefits.va.gov/benefits/](http://www.benefits.va.gov/benefits/)

[www.va.gov/opa/publications/benefits\\_book.asp](http://www.va.gov/opa/publications/benefits_book.asp)

## **Resources for Protecting Residents against Scams**

### **Do Not Call Registry**

The National Do Not Call Registry gives people a choice about whether to receive telemarketing calls, although scam artists may ignore the rules.

[www.donotcall.gov](http://www.donotcall.gov)

1-888-382-1222

### **Kentucky Scam Alerts**

Sign up for scam alerts from Kentucky's Office of the Attorney General.

[ag.ky.gov/](http://ag.ky.gov/)

## Resources for Health Care Professionals

### **The North American Securities Administrators Association**

The NASAA provides links to information and resources to help identify elder fraud and financial exploitation—including a screening tool for clinicians.

<http://www.nasaa.org/1733/eiffe/>

### **Consumer Financial Protection Bureau**

The CFPB takes complaints about consumer financial products and services, including credit cards, bank accounts and services, credit reporting and debt collection.

[www.consumerfinance.gov/complaint/](http://www.consumerfinance.gov/complaint/)

(855) 411-2372

### **Stolen Social Security numbers**

Report them to the Social Security Administration Fraud Hotline.

1-800-269-0271

### **Identifying and responding to scams**

The Federal Trade Commission (FTC) website is a plentiful source of information for identifying and responding to scams, including those that target older people.

[www.consumer.ftc.gov](http://www.consumer.ftc.gov)

### **Internet crimes**

The FBI's Internet Crime Complaint Center has a two-page tip sheet on international internet scams and accepts complaints about internet crime.

[www.ic3.gov](http://www.ic3.gov)

### **Scams by mail**

Contact the United States Postal Inspection Service about any scams that use the US mail service.

[postalinspectors.uspis.gov/contactUs/filecomplaint.aspx](http://postalinspectors.uspis.gov/contactUs/filecomplaint.aspx)

1-877-876-2455

## Residents' Rights

Residents' rights are part of the Nursing Home Reform Law enacted in 1987 by the U.S. Congress. Residents' rights were also incorporated into Kentucky Regulatory Statutes (KRS 216.515). The law requires nursing homes to promote and protect the rights of each resident and places a strong emphasis on individual dignity and self-determination. Nursing homes must meet residents' rights requirements to participate in Medicare or Medicaid.

### Quality of Life

The Nursing Home Reform Act requires each nursing home to care for its residents in such a manner and in such an environment as will promote maintenance or enhancement of the quality of life of each resident. This statement highlights an emphasis on dignity, choice, and self-determination for nursing home residents.

### Providing Services and Activities

Each nursing home is required to provide services and activities to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident in accordance with a written plan of care which is initially prepared with participation (to the extent practicable) of the resident, the resident's family, or legal representative. This means that a resident should not decline as a direct result of the nursing facility's care.

### Specific Rights

The Nursing Home Reform Act also grants nursing home residents these specific rights:

- **The Right to Be Fully Informed**, including...
  - the right to be informed of all services available as well as the charge for each service
  - the right to have a copy of the nursing home's rules and regulations, including a written copy of their rights
  - the right to be informed of the address and telephone number of the State Ombudsman, State licensure office, and other advocacy groups
  - the right to see the State survey reports of the nursing home and the home's plan of correction
  - the right to be notified in advance of any plans to change their room or roommate
  - the right to daily communication in their language
  - the right to assistance if they have a sensory impairment.
- **The Right to Participate in Their Own Care**, including...
  - the right to receive adequate or appropriate care
  - the right to be informed of any changes in their medical condition
  - the right to participate in planning their treatment, care, and discharge
  - the right to refuse medication and treatment
  - the right to refuse chemical and physical restraints
  - the right to review their medical record.

- **The Right to Make Independent Choices**, including...
  - the right to make independent personal decisions, such as what to wear and how to spend free time
  - the right to reasonable accommodation of their needs and preferences by the nursing home
  - the right to choose their own physician
  - the right to participate in community activities, both inside and outside the nursing home
  - the right to organize and participate in a Resident Council
  
- **The Right to Privacy and Confidentiality**, including...
  - the right to private and unrestricted communication with any person of their choice
  - the right to privacy in treatment and in the care of their personal needs
  - the right to confidentiality regarding their medical, personal, or financial affairs
  
- **The Right to Dignity, Respect, and Freedom**, including...
  - the right to be treated with the fullest measure of consideration, respect, and dignity
  - the right to be free from mental and physical abuse, corporal punishment, involuntary seclusion, and physical and chemical restraints
  - the right to self-determination
  
- **The Right to Security of Possessions**, including...
  - the right to manage their own financial affairs
  - the right to file a complaint with the State survey and certification agency for abuse, neglect, or misappropriation of their property if the nursing home is handling their financial affairs
  - the right to be free from charge for services covered by Medicaid or Medicare
  
- **Rights During Transfers and Discharges**, including...
  - the right to remain in the nursing facility unless a transfer or discharge...
    - is necessary to meet the resident's welfare
    - is appropriate because the resident's health has improved and the resident no longer requires nursing home care
    - is needed to protect the health and safety of other residents or staff
    - is required because the resident has failed, after reasonable notice, to pay the facility charge for an item or service provided at the resident's request
  - the right to receive notice of transfer or discharge
    - a thirty-day notice is required
    - the notice must include the reason for transfer or discharge, the effective date, the location to which the resident is transferred or discharged, a statement of the right to appeal, and the name, address, and telephone number of the state long-term care ombudsman
  - the right to a safe transfer or discharge through sufficient preparation by the nursing home

- **The Right to Complain, including....**
  - The right to present grievances to the staff of the nursing home, or to any other person, without fear of reprisal
  - the right to prompt efforts by the nursing home to resolve grievances
- **The Right to Visits, including...**
  - the right to immediate access by a resident's personal physician and representatives from the health department and ombudsman programs
  - the right to immediate access by their relatives and for others subject to reasonable restriction with the resident's permission
  - the right to reasonable visits by organizations or individuals providing health, social, legal, or other services

If you suspect a residents' rights are being violated, contact your local ombudsman program.