

Local Evaluation of a Program to Train Clinicians in Primary Care Clinics to Identify Elder Abuse, Exploitation, and Neglect

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Texas APS/WellMed Elder Abuse Intervention

- Selected goals
 1. Train clinicians to identify, screen for & report abuse in their patients
 2. Embed 2 Adult Protective Services (APS) workers in WellMed clinics for the duration of the project
- Target population for prevention
 - WellMed Patients
 - Older, largely Hispanic, largely Medicare/Medicaid eligible
- Target population for training
 - WellMed Clinicians

Methods

- IRB approved protocols
- Consent forms and pre- & post-training surveys distributed in 63 clinics
- BRIA received sign-in sheets from clinics
- Matched sign-in sheets with names on pre-post training surveys
- Assigned unique identification numbers

Clinicians Trained

- 826 clinicians were trained
 - Select clinicians pilot-tested the surveys and training
 - They were excluded from our analysis
- 711 were invited to participate in analysis
 - 532 agreed to participate
 - 75% response rate
 - Completed pre- and post-tests before/after the training

Clinician Demographics

Age

- Range 19-78
- Median: 40

Education Level

- 44% “some college”

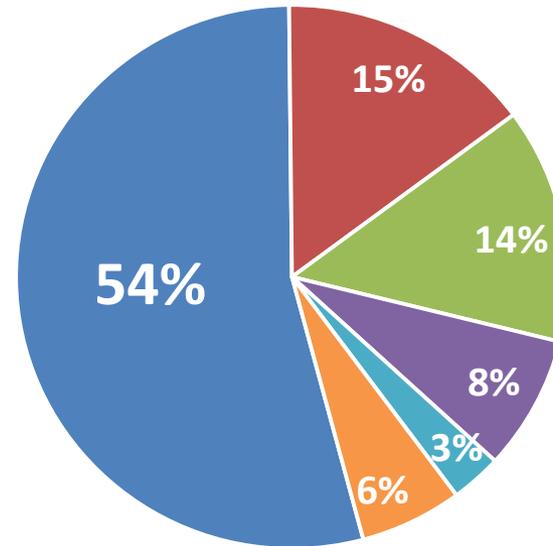
Gender

- 85% female

Ethnicity

- 67% Hispanic

OCCUPATION



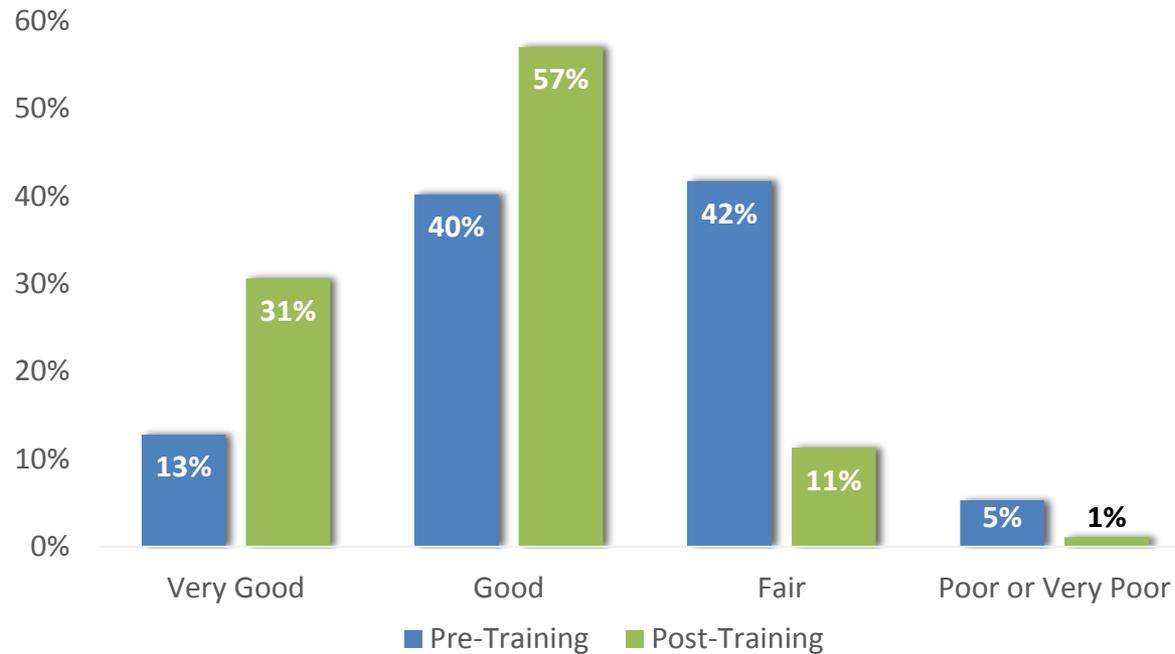
- Medical Assists, Pt. Services Reps
- Physicians, PAs, NPs
- Nurses, Health Coaches
- Admin. Staff
- SWs, Case Managers
- Techs, Support Staff

Analysis of Change: Pre- to Post-Training

- Tests of statistically significant change over time
- Paired t-tests for interval level measures
- Related samples Cochran's Q for categorical variables
 - Examines change in the proportion of correct answers from pre- to post-training
 - To compensate for the large number of questions asked, a significance level of .01 was used

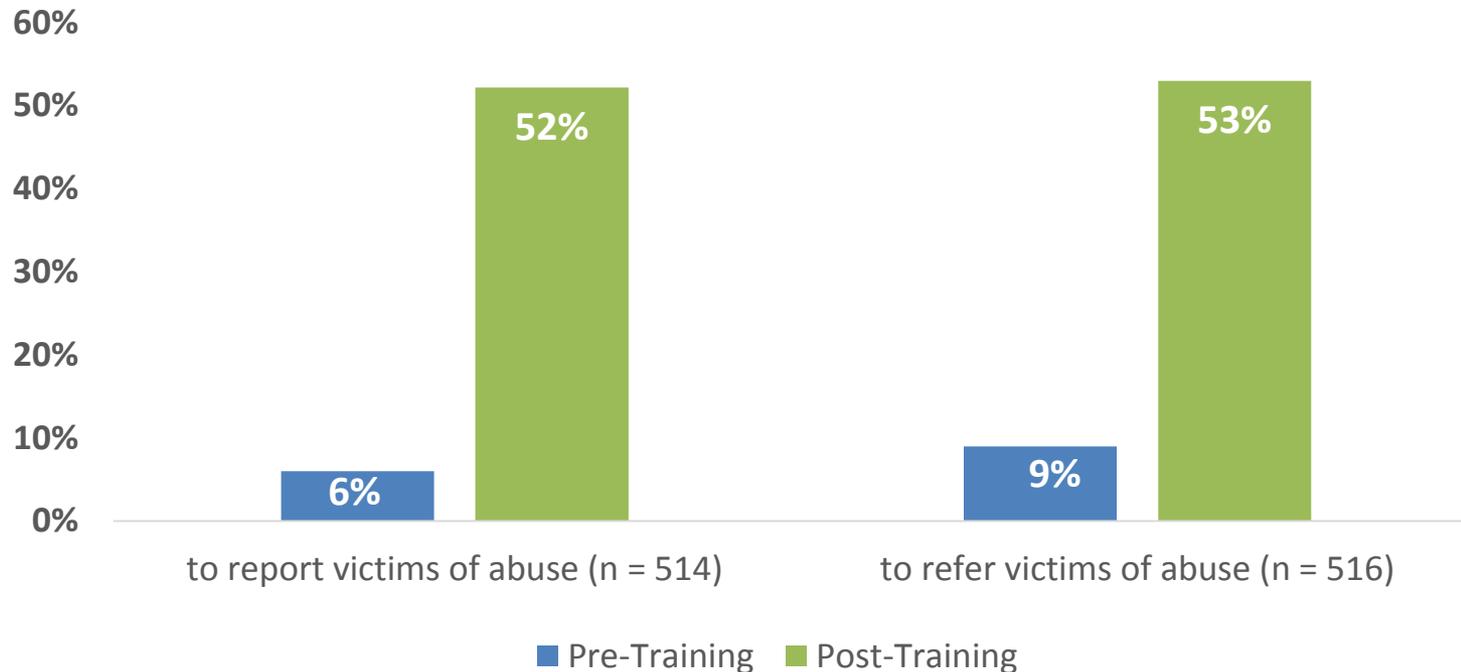
Recognizing Indicators of Abuse

(n = 527)



(Pre-training \bar{x} = 3.6, Post-training \bar{x} = 4.2, t = -17.56, p < .001).

Increased Familiarity with Clinical Protocols



Report: test statistic = 228.15, $p < .001$

Refer: test statistic = 219.42, $p < .001$

Other Significant Improvements in Clinicians' Knowledge from Pre- to Post-Training

1. Perpetrators of abuse can be an unpaid caretaker, a family member, any person who has ongoing relationship with victims
(test statistic = 7.35, $p < .01$)
2. APS provides all the following services:
 - legal interventions, case management, guardianship referrals, referral to a nursing home, referral to home- and community-based services
(test statistic = 24.24, $p < .001$)
3. The **most** likely perpetrator of financial exploitation is a family member, or known individual
(test statistic = 9.00, $p < .01$)

Interviews with APS staff

- Method

- Semi-Structured, telephone interviews conducted with the 2 APS workers individually
- Ten open-ended questions focusing on the role played by the APS staff
- Two project assistants independently organized the responses by question and overall comments for each APS worker
- The assistants then met to compare their summarized documents and collaborated to create 1 summary document for both APS workers

Some Themes of APS Interviews

- Multifaceted roles
 - Educator
 - Resource Person
 - Consultant
 - Trainer
- Types of Reported Cases
 - Self Neglect
 - Capacity in question
 - Hoarding
 - Nursing home admission/discharges
 - Physical abuse
 - Financial exploitation

Conclusions

- One of the first projects to train clinicians working in primary care clinics on abuse identification and reporting
 - Large health care system at 63 clinics
 - Across a large state such as Texas
- Findings thus far indicate that training clinicians is an effective mechanism for increasing knowledge of abuse and reporting protocols
- Embedding APS workers in the healthcare system is useful to help identify abuse
- Likely to save health care costs because abuse victims often experience negative and costly health outcomes

Questions



Resources

- Administration on Aging:
<http://aoa.gov>
- Consumer Financial Protection Bureau:
www.consumerfinance.gov/older-americans
- National Center on Elder Abuse:
www.ncea.aoa.gov
- Ageless Alliance:
www.agelessalliance.org
- Center of Excellence on Elder Abuse and Neglect:
www.centeronelderabuse.org
- National Committee for the Prevention of Elder Abuse:
www.preventelderabuse.org
- Texas Adult Protective Services:
https://www.dfps.state.tx.us/adult_protection/

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