Riverside County’s
C.A.R.E. TEAM
Curtailing Abuse Related to the Elderly

New Member Packet

A Multi-Disciplinary Team
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The mission of the Riverside County C.A.R.E. Team is to uphold the dignity and independence of our clients by:

1. Maintaining clients safely in their homes
2. Improving quality of life
3. Empowering clients to make their own decisions when mentally competent to do so
4. Supporting clients with the least disruptive and least restrictive care
5. Maintaining careful client confidentiality
6. Supporting local policy and legislative efforts that will bring positive change to the elder care system and more aggressive prosecution to elder abuse offenders
Benefits of Membership

1. Increased support and respect for senior service providers and public safety organizations
2. Broader knowledge of elder abuse issues and resources
3. Broader range of strategies, solutions, and perspectives for elder abuse cases
4. Improved cooperation and coordination between agencies
5. Improved understanding of each agency’s mandates, limitations, staffing and workloads
6. Less duplication of services and fewer gaps in service
7. Improved collaboration for training and funding opportunities
8. Larger power base to affect change and open doors of opportunity
9. Increased opportunity to educate the public about elder abuse prevention, recognition and reporting
10. Stronger foundation and network to serve victims of elder abuse and their families
C.A.R.E. Team Policies

✓ New members are nominated by current members who are familiar with their work and their standing in the community

✓ One dissenting vote denies membership to the Team; a reason for the dissenting vote is not required

✓ Membership is decided with the preponderance of benefit to the Team rather than the member

✓ While the Team functions partially as an educational forum and members routinely have contact with seniors, the main criteria for membership is knowledge or expertise that will assist other members in combating elder abuse and solving cases toward protection and prosecution

✓ Membership extends to the agency and not the individual member

✓ Volunteers are exempt from membership and/or Team attendance

✓ Members can not benefit financially from their membership or approach clients for services whose cases are discussed by the Team

✓ Private fiduciaries are exempt from membership

WHO DOES THE C.A.R.E. PROGRAM SERVE?  The C.A.R.E. Program serves the elder population (65+) and dependent adults (ages 18-64) of Riverside County. The program was implemented as a Supervisory District 3 pilot project in July, 1997 through the Office on Aging with support from the District 3 County Supervisor, Jim Venable.

HOW IS IT FUNDED?  The C.A.R.E. Program is funded and administered by the Riverside County Department of Public Social Services, Adult Protective Services Division. Additional funding for community events and trainings is provided by grants and community fund raising.

WHAT ARE THE COMPONENTS OF THE PROGRAM?

**C.A.R.E. Team:**  The C.A.R.E. Team improves service coordination and cooperation among human service providers and public safety organizations in combating elder abuse. Representatives from the organizations consult with one another and plan comprehensive services to elderly victims of abuse, self neglect and fraud. The three C.A.R.E. Teams, which meet monthly in east, west and mid-county, share best practices to combat elder abuse, and promote increased awareness and prosecution of abuses under Penal Code 368, the “elder abuse law.”

**Gatekeeper Trainings:**  Gatekeeper is an outreach program that provides community trainings to people who experience close regular contact with seniors, helping them recognize the signs of seniors at risk of abuse or of another crisis that will threaten their independence. Examples of those in the community who experience close regular contact with seniors include banking professionals, law enforcement, clergy, mobile home park and apartment managers, code enforcement officers, hospice and health workers, and senior service providers and volunteers.

**Community Education:**  Anti-fraud presentations are conducted in each community in partnership with law enforcement, FBI, investment experts, utility companies and others. The presentations teach seniors how to recognize, report and prevent telemarketing, caregiver, contractor, car repair/sales, investment, insurance, and other types of fraud. The C.A.R.E. Program Regional Manager and District Coordinators make elder abuse education presentations to service groups and interested agencies across the county as requested.

**Advocacy:**  The C.A.R.E. Program District Coordinators provide support and assistance to victims of consumer fraud by working with the regulatory agencies and court system. The goal of this advocacy is to guard or regain seniors’ assets, preserve their dignity, and protect their privacy.

For more information contact:
The C.A.R.E. Program  (800-476-7506)
(h) Failure to report physical abuse, as defined in Section 15610.63 of the Welfare and Institutions Code, abandonment, abduction, isolation, financial abuse, or neglect of an elder or dependent adult, in violation of this section, is a misdemeanor, punishable by not more than six months in the county jail, by a fine of not more than one thousand dollars ($1,000), or by both that fine and imprisonment. Any mandated reporter who willfully fails to report physical abuse, as defined in Section 15610.63 of the Welfare and Institutions Code, abandonment, abduction, isolation, financial abuse, or neglect of an elder or dependent adult, in violation of this section, where that abuse results in death or great bodily injury, shall be punished by not more than one year in a county jail, by a fine of not more than five thousand dollars ($5,000), or by both that fine and imprisonment. If a mandated reporter intentionally conceals his or her failure to report an incident known by the mandated reporter to be abuse or severe neglect under this section, the failure to report is a continuing offense until a law enforcement agency specified in paragraph (1) of subdivision (b) of Section 15630 of the Welfare and Institutions Code discovers the offense.
15634. (a) No care custodian, clergy member, health practitioner, or employee of an adult protective service agency or a local law enforcement agency who reports a known or suspected instance of elder or dependent adult abuse shall be civilly or criminally liable for any report required or authorized by this article. Any other person reporting a known or suspected instance of elder or dependent adult abuse shall not incur civil or criminal liability as a result of any report authorized by this article, unless it can be proven that a false report was made and the person knew that the report was false. No person required to make a report pursuant to this article, or any person taking photographs at his or her discretion, shall incur any civil or criminal liability for taking photographs of a suspected victim of elder or dependent adult abuse or causing photographs to be taken of such a suspected victim or for disseminating the photographs with the reports required by this article. However, this section shall not be construed to grant immunity from this liability with respect to any other use of the photographs.

(b) No care custodian, clergy member, health practitioner, or employee of an adult protective services agency or a local law enforcement agency who, pursuant to a request from an adult protective services agency or a local law enforcement agency investigating a report of known or suspected elder or dependent adult abuse, provides the requesting agency with access to the victim of a known or suspected instance of elder or dependent adult abuse, shall incur civil or criminal liability as a result of providing that access.

(c) The Legislature finds that, even though it has provided immunity from liability to persons required to report elder or dependent adult abuse, immunity does not eliminate the possibility that actions may be brought against those persons based upon required reports of abuse. In order to further limit the financial hardship that those persons may incur as a result of fulfilling their legal responsibilities, it is necessary that they not be unfairly burdened by legal fees incurred in defending those actions. Therefore, a care custodian, clergy member, health practitioner, or an employee of an adult protective services agency or a local law enforcement agency may present to the State Board of Control a claim for reasonable attorneys' fees incurred in any action against that person on the basis of making a report required or authorized by this article if the court has dismissed the action upon a demurrer or motion for summary judgment made by that person, or if he or she prevails in the action. The State Board of Control shall allow that claim if the requirements of this subdivision are met, and the claim shall be paid from an appropriation to be made for that purpose. Attorneys' fees awarded pursuant to this section shall not exceed an hourly rate greater than the rate charged by the Attorney General at the time the award is made and shall not exceed an aggregate amount of fifty thousand dollars ($50,000). This subdivision shall not apply if a public entity has provided for the defense of the action pursuant to Section 995 of the Government Code.
California State Penal Code 368 (a-k)

(a) The Legislature finds and declares that crimes against elders and dependent adults are deserving of special consideration and protection, not unlike the special protections provided for minor children, because elders and dependent adults may be confused, on various medications, mentally or physically impaired, or incompetent, and therefore less able to protect themselves, to understand or report criminal conduct, or to testify in court proceedings on their own behalf.

(b) (1) Any person who knows or reasonably should know that a person is an elder or dependent adult and who, under circumstances or conditions likely to produce great bodily harm or death, willfully causes or permits any elder or dependent adult to suffer, or inflicts thereon unjustifiable physical pain or mental suffering, or having the care or custody of any elder or dependent adult, willfully causes or permits the person or health of the elder or dependent adult to be injured, or willfully causes or permits the elder or dependent adult to be placed in a situation in which his or her person or health is endangered, is punishable by imprisonment in a county jail not exceeding one year, or by a fine not to exceed six thousand dollars ($6,000), or by both that fine and imprisonment, or by imprisonment in the state prison for two, three, or four years.

(2) If in the commission of an offense described in paragraph (1), the victim suffers great bodily injury, as defined in Section 12022.7, the defendant shall receive an additional term in the state prison as follows:

(A) Three years if the victim is under 70 years of age.
(B) Five years if the victim is 70 years of age or older.

(3) If in the commission of an offense described in paragraph (1), the defendant proximately causes the death of the victim, the defendant shall receive an additional term in the state prison as follows:

(A) Five years if the victim is under 70 years of age.
(B) Seven years if the victim is 70 years of age or older.

(c) Any person who knows or reasonably should know that a person is an elder or dependent adult and who, under circumstances or conditions other than those likely to produce great bodily harm or death, willfully causes or permits any elder or dependent adult to suffer, or inflicts thereon unjustifiable physical pain or mental suffering, or having the care or custody of any elder or dependent adult, willfully causes or permits the person or health of the elder or dependent adult to be injured, or willfully causes or permits the elder or dependent adult to be placed in a situation in which his or her person or health may be endangered, is guilty of a misdemeanor. A second or subsequent violation of this subdivision is punishable by a fine not to exceed two thousand dollars ($2,000), or by imprisonment in a county jail not to exceed one year, or by both that fine and imprisonment.

(d) Any person who is not a caretaker who violates any provision of law proscribing theft, embezzlement, forgery, or fraud, or who violates Section 530.5 proscribing identity theft, with respect to the property or personal identifying information of an elder or a dependent adult, and who knows or reasonably should know that the victim is an elder or a dependent adult, is punishable by imprisonment in a county jail not exceeding one year, or in the state prison for two, three, or four years, when the moneys, labor, goods, services, or real or personal property taken or obtained is of a value exceeding nine hundred fifty dollars ($950); and by a fine not exceeding one thousand dollars ($1,000), by imprisonment in a county jail not exceeding one year, or by both that fine and imprisonment, when the moneys, labor, goods, services, or real or personal property taken or obtained is of a value not exceeding nine hundred fifty dollars ($950).
(e) Any caretaker of an elder or a dependent adult who violates any provision of law proscribing theft, embezzlement, forgery, or fraud, or who violates Section 530.5 proscribing identity theft, with respect to the property or personal identifying information of that elder or dependent adult, is punishable by imprisonment in a county jail not exceeding one year, or in the state prison for two, three, or four years when the moneys, labor, goods, services, or real or personal property taken or obtained is of a value exceeding nine hundred fifty dollars ($950), and by a fine not exceeding one thousand dollars ($1,000), by imprisonment in a county jail not exceeding one year, or by both that fine and imprisonment, when the moneys, labor, goods, services, or real or personal property taken or obtained is of a value not exceeding nine hundred fifty dollars ($950).

(f) Any person who commits the false imprisonment of an elder or a dependent adult by the use of violence, menace, fraud, or deceit is punishable by imprisonment in the state prison for two, three, or four years.

(g) As used in this section, "elder" means any person who is 65 years of age or older.

(h) As used in this section, "dependent adult" means any person who is between the ages of 18 and 64, who has physical or mental limitations which restrict his or her ability to carry out normal activities or to protect his or her rights, including, but not limited to, persons who have physical or developmental disabilities or whose physical or mental abilities have diminished because of age. "Dependent adult" includes any person between the ages of 18 and 64 who is admitted as an inpatient to a 24-hour health facility, as defined in Sections 1250, 1250.2, and 1250.3 of the Health and Safety Code.

(i) As used in this section, "caretaker" means any person who has the care, custody, or control of, or who stands in a position of trust with, an elder or a dependent adult.

(j) Nothing in this section shall preclude prosecution under both this section and Section 187 or 12022.7 or any other provision of law. However, a person shall not receive an additional term of imprisonment under both paragraphs (2) and (3) of subdivision (b) for any single offense, nor shall a person receive an additional term of imprisonment under both Section 12022.7 and paragraph (2) or (3) of subdivision (b) for any single offense.

(k) In any case in which a person is convicted of violating these provisions, the court may require him or her to receive appropriate counseling as a condition of probation. Any defendant ordered to be placed in a counseling program shall be responsible for paying the expense of his or her participation in the counseling program as determined by the court. The court shall take into consideration the ability of the defendant to pay, and no defendant shall be denied probation because of his or her inability to pay.

(Revised by Legislature 2010)
REPORT OF SUSPECTED DEPENDENT ADULT/ELDER ABUSE
GENERAL INSTRUCTIONS

PURPOSE OF FORM
This form, as adopted by the California Department of Social Services (CDSS), is required under Welfare and Institutions Code (WIC) Sections 15630 and 15658(a)(1). This form documents the information given by the reporting party on the suspected incident of abuse of an elder or dependent adult. "Elder" means any person residing in this state who is 65 years of age or older (WIC Section 15610.27). "Dependent Adult" means any person residing in this state, between the ages of 18 and 64, who has physical or mental limitations that restrict his or her ability to carry out normal activities or to protect his or her rights including, but not limited to, persons who have physical or developmental disabilities or whose physical or mental abilities have diminished because of age (WIC Section 15610.23). Dependent adult includes any person between the ages of 18 and 64 who is admitted as an inpatient to a 24-hour health facility (defined in the Health and Safety Code Sections 1250, 1250.2, and 1250.3).

COMPLETION OF THE FORM
1. This form may be used by the receiving agency to record information through a telephone report of suspected dependent adult/elder abuse. Complete items with an asterisk (*) when a telephone report of suspected abuse is received as required by statute and the California Department of Social Services.
2. If any item of information is unknown, enter "unknown."
3. Item A: Check box to indicate if the victim waived confidentiality. Please note that mandated reporters are required to disclose their names, however, non-mandated reporters may report anonymously.

REPORTING RESPONSIBILITIES
Mandated reporters (see definition below under "Reporting Party Definitions") shall complete this form for each report of a known or suspected instance of abuse: physical abuse, sexual abuse, financial abuse, abandonment, neglect, self-neglect, isolation, and abandonment (see definitions in WIC Section 15610) involving an elder or a dependent adult. The original of this report shall be submitted within two (2) working days of making the telephone report to the responsible agency as identified below:

- The county Adult Protective Services (APS) agency or the local law enforcement agency (if abuse occurred in a private residence, apartment, hotel or motel, or homeless shelter).
- Long-Term Care Ombudsman (LTCO) program or the local law enforcement agency (if abuse occurred in a nursing home, adult residential facility, adult day program, residential care facility for the elderly, or adult day health care center).
- The California Department of Mental Health or the local law enforcement agency (if abuse occurred in Metropolitan State Hospital, Atascadero State Hospital, Napa State Hospital, or Patton State Hospital).
- The California Department of Developmental Services or the local law enforcement agency (if abuse occurred in Sonoma Developmental Center, Lanterman Developmental Center, Porterville Developmental Center, Fairview Developmental Center, or Agnews Developmental Center).

WHAT TO REPORT
Any mandated reporter who, in his or her professional capacity, or within the scope of his or her employment has observed, suspects, or has knowledge of an incident that reasonably appears to be physical abuse (including sexual abuse), abandonment, isolation, financial abuse, abduction, or neglect (including self-neglect), or is told by an elder or a dependent adult that he or she has experienced behavior constituting physical abuse, abandonment, isolation, financial abuse, abduction, or neglect, shall report the known or suspected instance of abuse by telephone immediately or as soon as practicably possible, and by written report sent within two working days to the appropriate agency.

REPORTING PARTY DEFINITIONS
Mandated Reporters (WIC) "15630 (a) Any person who has assumed full or intermittent responsibility for care or custody of an elder or dependent adult, whether or not that person receives compensation, including administrators, supervisors, and any licensed staff of a public or private facility that provides care or services for elder or dependent adults, or any elder or dependent adult care custodian, health practitioner, clergy member, or employee of a county adult protective services agency or a local law enforcement agency, is a mandated reporter."

Care Custodian (WIC) "15610.17 'Care custodian' means an administrator or an employee of any of the following public or private facilities or agencies, or persons providing care or services for elders or dependent adults, including members of the support and maintenance staff: (a) Twenty-four-hour health facilities, as defined in Sections 1250, 1250.2, and 1250.3 of the Health and Safety Code. (b) Clinics. (c) Home health agencies. (d) Agencies providing publicly funded in-home supportive services, nutrition services, or other home and community-based support services. (e) Adult day health care centers and adult day care. (f) Secondary schools that serve 18- to 22-year-old dependent adults and postsecondary educational institutions that serve dependent adults or elders. (g) Independent living centers. (h) Camps. (i) Alzheimer's Disease Day Care Resource Centers. (j) Community care facilities, as defined in Section 1502 of the Health and Safety Code, and residential care facilities for the elderly, as defined in Section 1569.2 of the Health and Safety Code. (k) Respite care facilities. (l) Foster homes. (m) Vocational rehabilitation facilities and work activity centers. (n) Designated area agencies on aging. (o) Regional centers for persons with developmental disabilities. (p) State Department of Social Services and State Department of Health Services licensing divisions. (q) County welfare departments. (r) Offices of patients' rights advocates and clients' rights advocates, including attorneys. (s) The Office of the State Long-Term Care Ombudsman. (t) Offices of public conservators, public guardians, and court investigators. (u) Any protection or advocacy
agency or entity that is designated by the Governor to fulfill the requirements and assurances of the following: (1) The federal Developmental Disabilities Assistance and Bill of Rights Act of 2000, contained in Chapter 144 (commencing with Section 15001) of Title 42 of the United States Code, for protection and advocacy of the rights of persons with developmental disabilities. (2) The Protection and Advocacy for the Mentally Ill Individuals Act of 1986, as amended, contained in Chapter 114 (commencing with Section 10801) of Title 42 of the United States Code, for the protection and advocacy of the rights of persons with mental illness. (v) Humane societies and animal control agencies. (vi) Fire departments. (x) Offices of environmental health and building code enforcement. (y) Any other protective, public, sectarian, mental health, or private assistance or advocacy agency or person providing health services or social services to elders or dependent adults.9

Health Practitioner (WIC) “15610.3 Health practitioners” means a physician and surgeon, psychiatrist, psychologist, dentist, resident, intern, podiatrist, chiropractor, licensed nurse, dental hygienist, licensed clinical social worker or associate clinical social worker, marriage, family, and child counselor, or any other person who is currently licensed under Division 2 (commencing with Section 500) of the Business and Professions Code, any emergency medical technician I or II, paramedic, or person certified pursuant to Division 2.5 (commencing with Section 1797) of the Health and Safety Code, a psychological assistant registered pursuant to Section 2913 of the Business and Professions Code, a marriage, family, and child counselor trainee, as defined in subdivision (c) of Section 4980.03 of the Business and Professions Code, or an unlicensed marriage, family, and child counselor intern registered under Section 4980.44 of the Business and Professions Code, state or county public health or social service employee who treats an elder or a dependent adult for any condition or a coroner.”
GENERAL INSTRUCTIONS (Continued)

EXCEPTIONS TO REPORTING
Per WIC Section 15630(b)(3)(A), a mandated reporter who is a physician and surgeon, a registered nurse, or a psychotherapist, as defined in Section 1010 of the Evidence Code, shall not be required to report a suspected incident of abuse where all of the following conditions exist:

1. The mandated reporter has been told by an elder or a dependent adult that he or she has experienced behavior constituting physical abuse (including sexual abuse), abandonment, isolation, financial abuse, abduction, or neglect (including self-neglect).
2. The mandated reporter is not aware of any independent evidence that corroborates the statement that the abuse has occurred.
3. The elder or the dependent adult has been diagnosed with a mental illness or dementia, or the subject of a court-ordered conservatorship because of a mental illness or dementia.
4. In the exercise of clinical judgment, the physician and surgeon, the registered nurse, or the psychotherapist, as defined in Section 1010 of the Evidence Code, reasonably believes that the abuse did not occur.

Per WIC Section 15630(b)(4)(A), in a long-term care facility, a mandated reporter who the California Department of Health Services determines, upon approval by the Bureau of Medi-Cal Fraud and the Office of the State Long-Term Care Ombudsman (OSLTCO), has access to plans of care and has the training and experience to determine whether all the conditions specified below have been met, shall not be required to report the suspected incident of abuse:

1. The mandated reporter is aware that there is a proper plan of care.
2. The mandated reporter is aware that the plan of care was properly provided and executed.
3. A physical, mental, or medical injury occurred as a result of care pursuant to clause (1) or (2).
4. The mandated reporter reasonably believes that the injury was not the result of abuse.

DISTRIBUTION OF SOC 341 COPIES
Mandated reporter: After making the telephone report to the appropriate agency, the reporter shall send the original and one copy to the agency; keep one copy for the reporter’s file.

Receiving agency: Place the original copy in the case file. Send a copy to a cross-reporting agency, if applicable.

DO NOT SEND A COPY TO THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES ADULT PROGRAMS BUREAU.
Elder and Dependent Adult Abuse

*Red Flags*

Physical Abuse:
- Inadequately explained fractures, bruises, welts, cuts, sores and burns
- Pressure “Bed” sores
- Bruise or burn patterns like those found with child abuse/domestic abuse
- Medications used to restrain victim

Neglect (by self or others):
- Lack of basic body hygiene
- Lack of adequate food
- Lack of medical aids (glasses, walker, teeth, hearing aid, needed medications)
- Lack of clean, appropriate clothing
- Demented victim left unsupervised
- Bed bound victim left without care
- Home cluttered, filthy, in disrepair, or having fire and safety hazards
- Home lacking minimum equipment and facilities (stove, refrigerator, heat, cooling, working plumbing and electricity)
- Animal hoarding

Financial Abuse:
- Lack of amenities that victim could afford
- Victim “voluntarily” giving inappropriate financial reimbursement for needed care and companionship. (This is criminal when victim is under undue influence).
- Caretaker has control of victim’s money but is failing to provide for victim’s needs.
- Caretaker “living off” victim
- Victim has signed property transfers, Power of Attorney, new will, etc. when unable to comprehend the transaction.

In financial abuse cases it is important to get social security numbers and banking information to conduct a complete investigation.

Psychological Abuse:
- Caretaker isolates victim – restricts visits, phone calls (doesn’t want to let you into home or speak to victim)
- Caretaker is violent, aggressive, controlling, addicted or uncaring

How to Report Elder and Dependent Adult Abuse

If you observe, are verbally informed, or have knowledge that leads you to reasonably suspect that an older or dependent adult is being abused or neglected you must call:

Adult Protective Services
1-800-491-7123

If Abuse occurs in facility, Call Ombudsman at (800) 231-4024

Physical Abuse: The infliction of physical pain or bodily harm not limited to:
- Assault/Battery
- Constraint
- Abduction
- Sexual Abuse
- Isolation
- Abandonment

Neglect (by others): Refusal or failure to fulfill care taking obligations, such as abandonment or isolation, denial of food, shelter, clothing, medical assistance or personal needs, or the withholding of necessary medication or assertive devices. Neglect can be intentional or unintentional.

Financial (Material): The illegal or improper exploitation of funds or other resources (stealing or misusing possessions, property, or money).

Psychological/Emotional Abuse: The infliction of mental anguish (threatening, humiliating, intimidating, isolating behaviors or statements).

Self-Neglect: The failure of an older or dependent adult to adequately take care of themselves and meet the demands of daily living to eat, pay bills, meet personal hygiene needs and take medications.

The identity of the individual who reported the abuse to law enforcement is to be kept confidential, even from the victim.

W&L Code 15633

3.14.2007
The purpose of the CARE (Curtailing Abuse Related to the Elderly) Team is to improve the coordination and cooperation among human service and public safety organizations in fighting elder abuse. These organizations will consult with one another and plan comprehensive services to elderly persons who are victims of abuse. Furthermore, the CARE Team will address elder abuse issues by promoting increased awareness and prosecution of abuses.

As a participating member of the CARE Team, I agree to:

1. Commit the time to participate.
2. Be available to attend regular monthly meetings whenever possible.
3. Learn as much as possible about the problem of elder abuse and how to assist victims.
4. Receive Mandated Reporter Training and agree to abide by all mandated duties.
5. Provide professional opinion and advice on how to proceed with the cases presented and attempt to find the answers to questions within my field of expertise.
6. Engage in telephone consultations on an emergency basis.
7. To the extent possible, assist in educating the public and others in my profession about the problem of elder abuse.
8. Advocate for better alternatives and services for elderly persons in need of protection.
9. Respect and maintain the confidentiality of all clients whose cases are discussed.
10. Refrain from using the MDT to promote or advertise my agency or business.
11. Engage in self-monitoring for the purpose of eliminating and avoiding any conflict of interest, including the appearance of conflict of interest, in case discussions and resolution.
12. Exclude myself from any discussion or meeting as soon as I know or have reason to know of a potential conflict of interest in a personal or business relationship with either the victim or suspect in a case, i.e. employee/employer, family member and/or friend.

I understand that my membership on the CARE Team is primarily as a representative of an agency or organization and that this agreement will be null and void if I am no longer associated with that organization. I also understand that if I cease to be associated with my organization that they will be committed to fulfilling the terms and conditions of this agreement.

Print Name of Team Member

Print Name of Organization or Agency

Signature of Team Member

Signature of Agency Official

Revised: 2011/0920
# C.A.R.E. TEAM
AGENCY OUTLINE

1. Date: ___________________________

2. Name of Agency ___________________________

3. Name of CARE Team Contact: ___________________________

4. Phone #: ___________________________

5. Mandated responsibilities of your agency:

   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

6. Additional powers your agency may have which could be used to fast track an elder abuse case (i.e. - arranging a physical for an elder who does not want to leave his/her home or the ability to investigate certain cases without a warrant):

   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

7. Possible circumstances in which your agency might need to be involved in a case:

   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

8. Other comments or information:

   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
C.A.R.E. Team
Statement of Confidentiality

I understand and fully acknowledge that the information and/or documents I may receive or review as part of my affiliation with the C.A.R.E. Team are confidential. I understand and acknowledge the necessity of exercising discretion and maintaining confidentiality regarding all information to which I am exposed as a result of being affiliated with the C.A.R.E. Team.

In the regular course of my membership on the C.A.R.E. Team, I recognize that I will have access to client information which is personal, financial, medical, or other. I am fully aware that I am strictly forbidden to discuss, transmit or narrate such confidential information in any form, except in the routine procedures of case discussion within and between other C.A.R.E. Team members and our meetings, per the provisions of the California Welfare and Institutions Code, Section 15754, and the Health Insurance Portability and Accountability Act (HIPAA).

Welfare and institutions Code, Section 15754, provides as follows:

(a) Notwithstanding any provision of law governing the disclosure of information and records, persons who are trained and qualified to serve on multidisciplinary personnel teams may disclose to one another information and records which are relevant to the prevention, identification, or treatment of abuse of elderly or dependent persons.

(b) Except as provided in subdivision (a), any personnel of the multidisciplinary team that receives information pursuant to this chapter, shall be under the same obligations and subject to the same confidentiality penalties as the person disclosing or providing that information. The information obtained shall be maintained in a manner that ensures the maximum protection of privacy and confidentiality rights.

HIPAA (Health Insurance Portability and Accountability Act):
HIPAA, as applicable to information received as part of the C.A.R.E. Team, provides that the “protected health information” (PHI) of an individual, when disclosed, must be maintained as confidential information, and may not be further disclosed by the recipient of the information.

By signing below, I acknowledge that I have read the foregoing information, and that I will keep the information presented to me as a member of the C.A.R.E. Team as confidential information, not to be disclosed except as in my capacity as a C.A.R.E. Team member.

____________________________________  ______________________________
Signature of Team Member     Date

____________________________________      ______________________________
Print Name of Team Member     Print Name of Agency
C.A.R.E. TEAM

ELDER ABUSE REPORTING AGREEMENT
FOR MANDATED REPORTERS

I, ___________________________, as a C.A.R.E. Team member, hereby
(Name)

agrees to adhere to the elder and dependant adult abuse reporting requirements as defined
in Welfare and Institutions Codes 15630 (h) and 15634 (a-c). I understand that I am a
mandated reporter under these statutes, and that I must call the Adult Protective Services
24 hr. hotline immediately if I have suspicion of abuse, and that I must follow up with a
written SOC 341 within 48 hours after the called report, which must be faxed to Adult
Protective Services intake unit at 951-358-3969.

I have received a copy of W&I code 15630 (h) and 15634 (a-c). I understand and will
comply with the reporting requirements defined in those codes. I have also received a
(copy of the SOC 341 reporting form.

_______________________________________  ___________________________
(Printed Name)                          (Signature)

____________________________
(Date)
# C.A.R.E. Team Member Information

**Please Print**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency:</td>
<td>Department:</td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>Zip Code:</td>
</tr>
<tr>
<td>Office Phone:</td>
<td>Desk Phone:</td>
</tr>
<tr>
<td>Cell Phone:</td>
<td>Fax:</td>
</tr>
<tr>
<td>E-Mail Address:</td>
<td>Today’s Date:</td>
</tr>
</tbody>
</table>

*Please give completed form to a C.A.R.E. Program Member*

*Thank you.*

Revised 10/19/2010 JW
C.A.R.E. Team
Case Report Guideline

--------------- CONFIDENTIAL ---------------

Reporters Name: ________________ Date: ______________
Client Name: ________________ Age: ____ SS#: ______________
Referral Source: ________________ Phone #: ______________
General Description of Assistance Required: ________________

______________________________
Nature of Contact: Phone: ☐ Home Visit: ☐ Other: ________________
Referral to (specify name): APS: ______ Law Enf.: ______ Other: ________________
OoA: ______ P. G.: ______ Ombudsman: ________________
Area of Abuse: Physical ☐ Fiduciary ☐ Verbal ☐ Self Neglect ☐
Neglect ☐ Sexual ☐ Other
Where did crime occur: __________________ Location: __________________
Alleged Abuser: Name: __________________ Relationship: ________________
Phone: __________________ Address: __________________
Live with Client? Yes ☐ No ☐ Employed by Client? Yes ☐ No ☐
Relatives/Interested Parties: Name: __________________ Phone #: ______________
Address: __________________ How Related? ________________

Case History

Reporters Comments: __________________

____________________________________
____________________________________
____________________________________
Action to Date: __________________

____________________________________
____________________________________
____________________________________

(This report form must stay with the reporter to be destroyed as all information is CONFIDENTIAL.)