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FRANKIE SUE DEL PAPA  
Attorney General

THOMAS M. PATTON  
First Assistant Attorney General

April 16, 1999

Ms. Verla Davis  
Clark County Social Services  
3827 South Maryland Pkwy  
Las Vegas, NV 89119

Dear Ms. Davis,

Enclosed for your records is a copy of the signed *ELDER ABUSE, NEGLECT, EXPLOITATION and ISOLATION PROTOCOL*. It has come to my attention that everyone did not receive a signed copy and some agencies are incorporating the Protocols into their training.

Should you have any questions or comments, please feel free to contact me at 775-688-1870.

Sincerely,

FRANKIE SUE DEL PAPA  
Attorney General

By: *Pamela G. Roberts*  
Pamela G. Roberts  
Deputy Attorney General  
Medicaid Fraud Control Unit

PGR:laf/s/  
Encls.

**RECEIVED**

**APR 23 1999**

**SOCIAL SERVICE  
ADMINISTRATION**

## ELDER ABUSE, NEGLECT, EXPLOITATION AND ISOLATION PROTOCOL

Familiarity with this protocol outline, together with the Elder Abuse Statutes (NRS 200.5091 et.seq.) and the Guide for Mandated Reporters of Elder Abuse, is intended to assist those agencies designated by NRS 200.5091 et.seq., to effectively respond to reports of elder abuse, neglect, exploitation, and isolation of older persons, and hopefully will lead to successful prosecutions of the criminals who prey upon Nevada's elder citizens.

### A. DEFINITIONS

Older Person: A person sixty (60) years of age or older.

Protective Services: means those services intended to prevent and remedy the abuse, neglect, exploitation, or isolation of an older person including investigation, evaluation, counseling, arrangement and referral for other services and assistance.

Investigating Agency: One of the following agencies designated by NRS 200.5093 to which a person should report an incident of abuse, neglect, exploitation, or isolation: Division for Aging Services (DAS) or the Division of Health Care Financing and Policy (DHCFP) within the Department of Human Resources, police department or sheriff's office and county office for protective services, if one exists.

Long Term Care Ombudsman: A person working in the Division for Aging Services and assigned to investigate reports of abuse, neglect, exploitation, and isolation of older persons who are residents in nursing facilities and facilities for residential care (group homes).

Medicaid Fraud Control Unit (MFCU): A unit within the Attorney General's Office (comprised of investigators and prosecutors) which has statewide jurisdiction to review reports of patient abuse, neglect or misappropriation of funds occurring in medical facilities receiving Medicaid funds, and when appropriate, investigate and prosecute the person(s) responsible. NRS 228.410(3)

Law Enforcement Agency (LEA): Any police department, sheriff's office or the MFCU within its respective jurisdiction in the State of Nevada who would determine whether or not a criminal investigation is warranted, and if so, conduct such an investigation.

State Elder Protective Service Worker: A person working within the Division of Health Care Financing and Policy and assigned to investigate a report of abuse, neglect, exploitation, or isolation of an older person, and if the report is substantiated, provide protective services to the older person if he is able and willing to accept them.

County Protective Service Worker: A person working within the county office for protective services and assigned to investigate a report of abuse, neglect, isolation or exploitation of an older person and if the report is substantiated, provide protective services to the older person if he is able and willing to accept them.

As of July, 1997, only Clark County has such an office called Clark County Social Services Senior Citizens Protective Services (CCSS-SCPS). This office refers all reports involving Medicaid recipients to Division for Health Care Financing and Policy.

Bureau of Licensure and Certification (BLC): The BLC conducts annual, follow-up and complaint surveys and inspections of residential facilities for groups and medical facilities to ensure compliance with state and federal regulations. The BLC is not one of the agencies designated in NRS 200.5093 to receive or investigate reports of elder abuse, neglect, exploitation, and isolation. However, the BLC may impose one or more administrative sanctions to remedy situations involving violations of state and federal regulation.

## B. CASE PROCESSING SEQUENCE

1. Certain person(s) are specifically required by Nevada law to report if they have reason to believe an older person has been abused, neglected, exploited, or isolated. All others are encouraged to report elder abuse, neglect, exploitation, or isolation and are immune from civil or criminal liability if the report is made in good faith.

2. A person with reason to believe that an older person has been abused, neglected, exploited or isolated makes a report to the appropriate investigating agencies, i.e., DAS, DHCFP, LEA, CCSS-SCPS or the toll-free hotline designated by DAS. This report will hereinafter be referred to as the "initial intake report".

3. If the reporting person has reasonable cause to believe that the older person has died as a result of abuse or neglect, the person should report this belief to the appropriate medical examiner or coroner, who shall investigate the cause of death and submit his written findings to the local LEA, the appropriate prosecuting attorney and the Division for Aging Services. NRS 200.5093(4). The agency receiving the initial intake report should confirm that the reporting person has made such a report or make the referral itself.

4. The agency receiving the initial intake report must cause an investigation to be commenced within 3 working days. Therefore, the agency receiving the initial intake report should conduct a preliminary inquiry before commencing a full investigation or referring the report to another investigating agency to conduct a complete investigation. NRS 200.5093(1)(c).

5. In addition to providing services within the agency's jurisdiction, a copy of the initial intake report should be sent promptly to the local LEA or MFCU for its review if possible criminal conduct is involved. If the incident occurred in a facility which receives Medicaid funds, a copy of the initial intake report should be sent promptly to the MFCU for its review. The local LEA/MFCU should promptly notify the sending agency whether or not it intends to open a criminal investigation to avoid multiple investigations being commenced.

6. Once it is determined that a criminal investigation is appropriate, the LEA/MFCU and any involved state or county agency needing to provide protective services may need to coordinate their anticipated roles prior to contact with any possible suspects. The LEA/MFCU should determine if the BLC or any licensing board is conducting a parallel administrative complaint investigation involving the same incident.

7. If the incident occurred in a health care facility or a residential facility for groups and any residents may be exposed to a health or safety risk, the Bureau of Licensure and Certification (BLC) should be notified immediately. Otherwise, the BLC should be notified as soon as possible.

8. If the person who is alleged to have abused, neglected, exploited, or isolated the older person is the holder of a license or certificate issued pursuant to Nevada law, the investigating agency must provide information contained in the report to the board which issued the license. NRS 200.5095(4).

9. When appropriate, the investigating agency will refer the results of his/her investigation to the appropriate prosecuting attorney (local district attorney or MFCU deputy attorney general) for review and possible prosecution.

10. An agency which conducts an investigation must forward a copy of the final report of the investigation to the Division for Aging Services within 90 days of completing the final report. NRS 200.5093(5). This report could be either the form supplied by DAS or the agency's own report such as the agency's internal investigative report.

### C. SUGGESTIONS FOR PRELIMINARY INQUIRY

The preliminary inquiry is designed to verify the initial intake report, determine if the older person is competent to provide a history relating to the allegations, and determine the appropriate jurisdiction for conducting any further investigation and/or providing protective services, if necessary. Details to be obtained from the preliminary inquiry include:

1. Identification of a suspect(s);
2. The nature of the incident and when and where the incident occurred;
3. Assessment of the risk of further harm to the older person and the need for alternative housing, medical attention, counseling or other services;
4. Assessment of the risk to further financial loss if the allegation involves exploitation.

If the agency conducting the preliminary inquiry has reason to believe that the older person and/or his assets are at risk, a decision to place the older person in another care situation and/or to protect his remaining assets must be made with the aid of immediate family member(s) and the appropriate protective service agency, and/or private or public guardian or public administrator's office.

#### D. SUGGESTIONS FOR CONDUCTING A COMPLETE INVESTIGATION

A complete investigation involves collecting all relevant evidence which may vary depending upon whether the allegation constitutes "abuse", "neglect", "exploitation", or "isolation" as defined in NRS 200.5092 and punishable under NRS 200.5099 or an offense punishable under another criminal statute (i.e. patient neglect, robbery, rape, embezzlement). A preliminary inquiry may expand immediately into a complete investigation depending upon the situation. Obtain the following:

1. Any and all records of care provided to the older person, e.g., medical records from home health agency, nursing facility, doctor's offices or hospital; staffing schedules for group homes or nursing facility.
2. Names and addresses of all persons providing care for the older person.
3. Names and addresses of all witnesses to the alleged abuse, neglect, exploitation and/or isolation.
4. Statements from all witnesses with information about the care provided or the alleged abuse, neglect, isolation or exploitation.
5. Names and addresses of the older person's physicians and a list of any and all medications he/she may be currently taking. Also obtain information regarding any allergies or other medical conditions.
6. Names and addresses of any relatives, neighbors or friends involved with the care of the older person and familiar with his/her physical and/or mental condition.
7. If physical injuries appear to be the result of abuse or neglect, these injuries and/or the environment should be documented by photographs and video tape by the investigating agency. If a LEA/MFCU is conducting a criminal investigation, a complete photographic profile will include recent photographs of the victim before, immediately after and three days after the alleged incident, since bruises sometimes take two to three days to appear.
8. If the older person appears to have been abused or neglected, the investigator should contact a local hospital and arrange for an independent medical examination. If death results, the coroner or other forensic pathologist should be contacted to conduct an autopsy examination.
9. When there is an issue regarding the competency or frailty of the victim or a witness, the interview by the LEA/MFCU should be recorded or video-taped to memorialize the content of the interview.

**E. ADDITIONAL CHECKLIST FOR FINANCIAL EXPLOITATION CASES**

1. Identify sources of income, dollar amounts and payment dates.
2. Identify all bank accounts: where, what type and approximate balances. Anyone else listed on accounts? Is there a bank contact to be interviewed?
3. Any significant pattern changes involving withdrawals?
4. Obtain billing addresses and balances on credit or ATM cards? Are they ever used? Who else listed on the account(s) has access to the PIN? Do they have limited access or authorization?
5. Stocks/bonds? Where located? Brokerage account? Interview?
6. Identify any recent transfers of personal or real property and obtain the value of said property if transferred. Interview all persons involved.
7. Identify, if any, person(s) with power of attorney, conservator or guardian, lawyer or accountant, for the older person.
8. Locate if any, insurance policies, will, advanced directives.
9. How are bills paid? Amounts of monthly bills? Who writes and/or signs the checks? Other debts?
10. Has the older person signed any papers recently? Evaluate state of mind/competency at time of signing.
11. Is the older person receiving adequate food, clothing, etc.?
12. Have any loans or gifts been made recently?
13. Does the older person own his/her home? Any others listed as co-owner? Who has the deeds to property?
14. Is someone using older person's residence, utilities, car, etc. without permission?
15. Jewelry, valuable collections, art, others? Where kept?
16. Safety boxes or safes? Where and who has the keys? Does anyone else have access to them?

The following state and local agencies have reviewed the above-described Elder Abuse, Neglect, Isolation and Exploitation Protocols and recommend said protocols be utilized when receiving and responding to reports of elder abuse, neglect, isolation and exploitation:

Frankie Sue Del Papa  
Frankie Sue/Del Papa, Attorney General  
1-6-98  
date

Stewart Bell  
Stewart Bell, Clark County District Attorney  
2/11/98  
date

Richard Gammick  
Richard Gammick, Washoe County District Attorney  
1/6/98  
date

[Signature]  
Las Vegas Metropolitan Police Department  
2-12-98  
date

[Signature]  
Director, Department of Human Resources  
1/28/98  
date

Carla Stein  
Administrator, Division for Aging Services  
1/13/98  
date

Yvonne Sylva  
Administrator, Division of Health  
1/22/98  
date

[Signature]  
Administrator, Division of Health Care Financing and Policy  
1/26/98  
date

[Signature]  
Chief, Bureau of Licensure and Certification  
1/6/98  
date

Jessie Sue Davis  
Director, Clark County Social Services  
10 Feb '98  
date

[Signature]  
Director, Medicaid Fraud Control Unit  
1/6/98  
date