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Hi, just a reminder that you're receiving this email because you have expressed an interest in NYC Elder Abuse Center. Don't forget to add info@nyceac.com to your address book so we'll be sure to land in your inbox!

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**Achieving safety, dignity and respect
for all NYC's elders through
steadfast commitment to collaboration
and inspired solutions.**



NYC Elder Abuse Center's eNewsletter

November/December 2011

Greetings from the NYC Elder Abuse Center!

The [NYC Elder Abuse Center](#) (NYCEAC) is a highly collaborative initiative. It brings together government and nonprofit organizations to develop innovative responses to the problem of elder abuse and provide practitioners with pertinent and relevant information to make their interventions more efficient and effective.

NYCEAC's bimonthly eNewsletter provides concise, practical information and resources on topics related to elder justice to help providers better assist elder abuse victims. In this issue, we highlight the topic of:

NYC's Temporary Shelter Options for Elder Abuse Victims

We hope you find the information provided in this eNewsletter useful. We welcome your feedback and ideas for future editions. Please [email us](#) your thoughts and suggestions.

Together we can prevent elder abuse - and increase victim safety, reduce suffering and improve the quality-of-life of older New Yorkers.

Regards,
Mark Lachs, MD, MPH, Director
Risa Breckman, LCSW, Deputy Director
Robin Roberts, LMSW, Multidisciplinary Team Coordinator

Acknowledgments

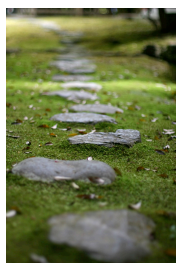
It takes a village to accomplish so many things in life. And so it goes with NYCEAC's eNewsletter. In

addition to the contributions from NYCEAC's staff, several others wrote this edition. Special thanks to our cherished colleagues and highly regarded staff at the Weinberg Center for their extensive contributions to this eNewsletter edition: Joy Solomon, Esq., Director and Managing Attorney, Linda Leveen, LMSW and Elder Abuse Specialist and Malya Kurzweil Levin, Brooklyn Law School Intern.

Thank you also to Marie B. Philip, Executive Director, New York City Human Resources Administration; Aurora Salamone, MS, Director of the Elderly Crime Victims Resource Center at the NYC Department for the Aging; and to Mary Olsen, NYCEAC's Social Work Intern, Silberman School of Social Work at Hunter College.

Assessing Temporary Shelter Needs for Elder Abuse Victims

Intake Pathways



Professionals encounter elder abuse victims every day. For example, an abused elder may have been referred by a neighbor to APS - or may have come to a physician's attention in a hospital's emergency room - or a physical therapist at a rehab facility may have noticed something wrong - or a social worker providing case management services may have seen signs - or maybe the victim called the police for protection. There are many ways victims are detected - too many to list them all here. But once a victim is

detected, the next step is for the professional to make a full assessment of the abuse situation. From this assessment, the worker will determine if shelter services are needed.

Assessing Shelter Needs

The shelter network for domestic violence victims is the cornerstone of the domestic violence movement. The same cannot be said for the elder abuse movement. Most localities in the United States do not have any shelter



options for elder abuse victims. And, unfortunately, for a variety of reasons, shelters designed for a younger cohort are often not suitable for many elder abuse victims. For example, many of the shelters, filled largely with mothers and children, require residents to participate in programs specially designed for them, e.g., life skills and parenting courses. Most of the domestic violence shelters in NYC are not designed for people

requiring a high level of medical care and assistance. And all of the safe havens in the NYC domestic violence network assume that the resident will be able to self-direct, thus they are not appropriate for people with significant cognitive impairments.

NYC is fortunate to have a few temporary shelter options for abused older adults which are described in this eNewsletter. Each resource is designed for a particular subset of victims - one size definitely does not fit all. Initially, when determining which, if any, of the shelter options are suitable for your client, consider the following questions:

- Are there interventions that can help the older person achieve safety in his/her own home, thereby preventing a need to leave?
- Will the older person agree to leave home? (Many victims do not want to leave, even temporarily, even if they are not safe at home.)

• Does the older person have the capacity to understand the risks

Shelter Assessment and Options

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Quick Links

Keep current about events in the elder justice field - [Click here!](#)

Visit the Weinberg Center for Elder Abuse Prevention at the Hebrew Home at Riverdale -- [Click here!](#)

- Does the older person have the capacity to understand the risks, consequences and benefits of the decision s/he is making about living arrangements? (Note: Most of the shelter services require the victim to self-direct care; one does not.)
- Has the older person been properly assessed for depression and anxiety? If the person has been diagnosed with one or both of these mental health concerns, has the person received treatment? (Elder abuse victims tend to experience depression more than their non-abused elder counterparts.) These mental health problems can interfere with a person's concentration and decision-making. Important decisions re: safety-planning are best made when a person is able to think clearly about the options.
- What is the person's financial ability to pay for housing? (Some of the options are only accessible to those with significant assets; other options are suitable for anyone.)
- Is there someone in the community able and willing to assist the older adult find permanent housing after the temporary shelter time lapses? Some of the resources are time-limited and thus have as an eligibility requirement that a plan for permanent housing be in place prior to acceptance into the shelter - and an organization actively working to put the plan in place. (One possibility is that the home can be made safer within the time period provided by the shelter; or maybe the older adult has other community options, like living with a friend or relative, or finding a new home. See *Temporary Shelter Options in NYC* below for possibilities.)
- Is the temporary shelter adequately staffed to handle the problems the victim is experiencing? Some of the options are staffed with elder abuse specialists knowledgeable about domestic violence - others offer no special services or protections for victims.

Assessing Risk and Safety Planning

When temporary shelter is being considered as part of an overall safety plan, it is usually because someone has determined that currently home is not a safe place. This determination assumes that a risk assessment estimating future harm has been conducted.



Unfortunately, there is a dearth of validated risk assessment instruments to utilize once abuse has been detected. Thus, risk assessment in elder abuse cases requires professionals to rely largely on their clinical judgment. For example, professionals might take into account the following when considering temporary shelter for an elder abuse victim: has harm already occurred and the circumstances creating this initial risk remain unchanged? Has the abuse increased in incidence and severity over time? If so, has anything occurred that would likely change the direction of this abuse trajectory? Is the older person in a perilous situation and with diminished decisional capacity rendering him/her unable to self-protect? Have previous reasonable interventions to create safety in the home proven to be ineffective? Has the older person requested shelter placement?

There is considerable research to be done in this critical area to help guide professionals assessing risk in elder abuse cases. The following links

provide more information about risk assessment:

The following two documents are written by the [National Council on Crime and Delinquency](#):

- [Developing an Actuarial Risk Assessment to Inform the Decisions Made by Adult Protective Service Workers](#)
- [Structuring Decisions in Adult Protective Services](#)

Validated lethality assessment instruments have not yet been developed for use in elder abuse cases. In the absence of these, Brandl, et al.(2007)* cite the following as potential key risk factors for professionals to consider when assessing for a high level of danger in elder abuse cases. These risk factors are in regards to the abuser:

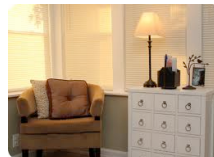
- Access to/ownership of guns
- Use of weapon in prior abusive incidents
- Threats with weapons
- Serious injury in prior abusive incidents
- Threats of suicide
- Drug or alcohol abuse
- Forced sex
- Obsessiveness/extreme jealousy/extreme dominance

The information in this section points to the importance of placing a high priority on safety planning when assisting all elder abuse victims and must be considered when helping to place an elder abuse victim in shelter. For more information about safety planning, [click here](#).

* Brandl, B., et. al., Elder Abuse Detection and Intervention: A Collaborative Approach. New York: Springer, 2007; pp.199-200.

Temporary Shelter Options in NYC

Despite a scarcity of appropriate shelters for elder abuse victims in NYC, especially shelter with staff trained in domestic violence, there are options. Appropriateness of fit is largely determined by the victim's cognitive capacity and economic resources.



The temporary shelter options in NYC are:

1) [The Weinberg Center for Elder Abuse Prevention](#) at the Hebrew Home at Riverdale: A pioneer in the field, the Weinberg Center engages in community outreach, conducts professional trainings and develops screening tools designed to streamline detection of elder abuse. This is the nation's first comprehensive regional shelter for victims of elder abuse. Housed within a long-term care facility, the Weinberg Center is able to cater to its clients' diverse medical and psychological needs while maintaining a specialized interdisciplinary team that works together on each case.

2) The [Human Resources Administration's Office of Domestic Violence and Emergency Intervention Services](#) launched the Elder Abuse Domestic Violence Shelter Placement Pilot Project that began in October 2011. The pilot is aimed at providing elder victims of domestic violence with a safe placement in a specialized domestic violence shelter. The pilot is based in a shelter setting that is structurally and programmatically sensitive to the particular needs of elder domestic violence victims. For more information about this pilot initiative, please contact: [Marie Philip](#), Executive Director, Office of Domestic Violence, NYC Human Resources Administration at 212

Office of Domestic Violence, NYC Human Resources Administration at 212-331-4535 or [Dianne Thomas](#), Program Assistant, Office of Domestic Violence, NYC Human Resources Administration at 212-331-4547.

3) The following residence offers housing - temporary and long-term - for adults with means and the ability to self-direct. **IMPORTANT NOTE:** The following option does not emphasize protection of adults in the instance of domestic violence. Their staff does not necessarily receive training on elder abuse and neglect issues, nor is the facility designed to protect older adults from ongoing abusive situations. This option also does not have staff who can help implement a safety plan or assist victims with finding permanent housing. Professionals are encouraged to think carefully about the suitability of the placement, carefully evaluating safety of all parties involved (victim as well as other residents).

[West86](#) is an enriched housing community. In addition to long-term residency, short-term respite stays of 30-42 days are available. Respite stay apartments come completely furnished and equipped with telephone service and cable television. West86 provides a full array of services and amenities, as well as care staff available 24 hours/day to offer assistance with activities of daily living for an additional fee. Currently, studios apartments start at \$4,995/month; one-bedroom apartments start at \$6,495/month and two bedrooms start at \$9,995/month. For more information, call 212-712-0200.

Alternatives to Temporary Shelter

Many of the traditional destinations for an older person seeking temporary shelter are not appropriate for abuse victims. Some options often considered are:

- *Returning Home* - For victims being discharged from hospitals and rehab centers, going back to the environment where the abuse occurred may not be a viable option unless that environment can be significantly altered. Doing so effectively is often complicated. For example, many victims are often conflicted about involving law enforcement in trying to compel the abuser to move out, particularly when the abuser is a family member. Or the victim might not have the cognitive or physical ability to live at home without help, yet because the abuser is so disruptive or menacing, the aides required would be unable to effectively function in the home.
- *Family Members and Friends* - Relatives and other community resources can be helpful if they are willing to take on significant responsibility vis a vis the abuse victim. However, long-term abuse victims often have little or no family who fit this criterion other than their abusers. Additionally, abusers will often isolate the victim, such that when they finally do need to ask someone for help, no one is left.
- *Relocation within the Community* - Recent victims of elder abuse often are not physically or mentally healthy enough to immediately begin living on their own. Financial issues can be barriers as well. Older people are often financially fragile, and this can be exacerbated in some cases, where financial abuse often accompanies elder abuse in its more "obvious" forms. Elder abuse has a clear link to poverty in many other cases.
- *Long-term Care Facilities* - Nursing homes and assisted living facilities are able to provide appropriate physical and mental healthcare, and are also often the best option for a positive peer environment. However, they may not have the security necessary to

environment. However, they may not have the security necessary to protect elder abuse victims, or the resources to take legal action so that the abusive situation is permanently resolved. In many cases, although victims are sometimes disoriented, they also express a clear wish to ultimately return to the community, another reason that a long-term care facility might not be appropriate.

About the Weinberg Center for Elder Abuse Prevention

The [Weinberg Center for Elder Abuse Prevention at the Hebrew Home at Riverdale](#) is the nation's first comprehensive regional shelter for victims of elder abuse. Housed within a long-term care facility, the Weinberg Center is able to cater to its clients' diverse medical and psychological needs while maintaining a specialized interdisciplinary team that works together on each case. A pioneer in the field, the Weinberg Center engages in community outreach, conducts professional trainings and develops screening tools designed to streamline detection of elder abuse. The Weinberg Center is a successful model that has been replicated in eight locations and has also produced many research studies and academic articles. The David Berg Center for Law and Aging, a program of the Weinberg Center, has also assumed a leadership role in building and operating the [New York City Elder Abuse Network \(NYCEAN\)](#) and sponsors a legal internship program for students interested in entering the field of elder law. For more information on internship opportunities, contact [Deirdre Lok](#), Weinberg Center counsel.

Through tracking one Weinberg Center client's journey, this eNewsletter aims to provide a better understanding of the housing challenges that elder abuse victims face and how practitioners can address them successfully.



Jane Doe: A Case Study

Jane is a 70-year-old woman living in a small apartment with her forty year old son, Joe. Joe is mentally ill and has never maintained his own apartment or held a steady job. Joe's father left the family when Joe was a baby, and the two have no other known relatives. Jane has a history of severe depression, which has grown more acute as she ages, leading to repeated psychiatric hospitalizations. These hospital stays have caused her to take increasingly long leaves of absence, and eventually to quit, her secretarial job. As a result, her rent is in significant arrears. As Jane becomes less capable of coping with daily tasks, her apartment falls into disrepair and rarely contains enough food. She does not grasp the gravity of the repeated eviction notices she receives, and does not respond to them.

One day, Jane tells her therapist that she wants to kill herself. She has made similar statements before, but this plan seems more concrete. Jane eventually reveals that her suicidal thoughts are tied to the regular beatings she receives from her son. The beatings have gotten progressively worse and culminated with Joe pushing Jane down a flight of stairs several days before her therapy appointment. Jane's therapist convinces her to check herself into a psychiatric hospital

transfer into a psychiatric hospital.

After being stabilized, the psychiatric hospital considers all of the options previously outlined in this email:

Returning home: Jane feels intense guilt about her son's problems and does not want to use any protective orders to keep him from the home, nor will she cooperate with prosecuting him. Complicating matters, Jane has not paid her rent in months, and her landlord has commenced eviction proceedings.

Family Members and Friends: Jane's abuse has left her quite isolated and thus she does not have any friends or family with whom she can turn to for help.

Relocation into the Community: Jane's financial issues make renting another apartment in the community prohibitive.

Long Term Care Facilities: In Jane's case, though she is sometimes disoriented, she has also expressed a clear wish to ultimately return to the community.

After considering and rejecting each of these options, a social worker on the discharge team refers Jane to the Weinberg Center.

Weinberg Center: Admissions Process

The Weinberg Center receives referrals for potential clients through its hotline number, 1-800 56-SENIOR. To ensure the Weinberg Center receives confirmed and reliable information, the hotline accepts calls from professionals only. Referrals often come from hospitals, Adult Protective Services, visiting nurse services and local police. During the initial phone conversation, an intake form that solicits information about a victim's history and current situation is completed. The Weinberg Center team then meets to discuss whether a potential client meets the admission protocols they have jointly established. While no one criterion is dispositive, some of the factors considered include current medical status, whether abuse is ongoing, whether there are family members who could provide a suitable housing option and the victim's capacity to consent to admission. If necessary, the Weinberg Center staff investigates further to ensure that the team is fully informed. Crucially, no one is admitted without consideration of a discharge plan. Once these factors have been assessed, the team decides whether the Weinberg Center is the appropriate option for a particular individual. In this case, Jane is approved for admission. (A PRI - Patient Review Instrument - must be completed prior to each admission.)



The Harry & Jeanette Weinberg
CENTER FOR ELDER ABUSE PREVENTION
AT THE HEBREW HOME AT RIVERDALE

Weinberg Center: Plan of Action

Once Jane arrives at the Weinberg Center, the multi-disciplinary staff works together to create a plan addressing the different elements of Jane's situation:

1. *Physical Health/Security* - Jane is given a thorough physical examination and placed in the neighborhood of the Hebrew Home that is most appropriate for her health needs. Additionally, the Hebrew Home's security team is provided with



information about Jane's admission, any law enforcement issues regarding Joe, and an emergency protocol is developed should he attempt to enter the facility.

2. *Mental Health* - If appropriate, as it is in Jane's case, The Hebrew Home or a consulting psychiatrist obtains a client's records and conducts his/her own evaluation. Jane also immediately begins regular therapeutic sessions with the Weinberg Center's social worker. In this case, the psychiatrist determines that Jane lacks the capacity to make decisions on her own behalf and will need a guardian appointed to her for the purposes of legal decision-making. (See [NYCEAC's eNewsletter on Guardianship and Alternatives to Guardianship](#).) Jane will be closely monitored in the initial days following her admission to the Weinberg Center to help the team ascertain what legal remedies are available and should be pursued.

3. *Pressing Legal Issues* - Though the team agrees that time in a safe and therapeutic environment may have significant restorative effects on Jane's legal capacity, it is clear that the eviction proceedings against her must be dealt with immediately. The Weinberg Center initiates an application for a guardian ad litem to be appointed to represent Jane in housing court. The guardian is ultimately able to reach a settlement agreement with her landlord, through which Jane will be able to slowly pay off her debts and retain her apartment.

4. *Long-Term Care Plan* - Joe is still living in Jane's apartment, and Jane remains adamant that Weinberg staff not "get Joe in trouble." Had Jane been willing, the Weinberg Center could have represented her in Family Court in applying for an order of protection against Joe. The Bronx County Family Court, in partnership with the Weinberg Center, the NYC Urban Justice Center and Safe Horizon, has implemented a process to allow victims of elder abuse to file for a temporary order of protection against an abuser from an off-site location. The hardship of traveling to court, as well as the fear of rehashing painful events in front of strangers, often deters elderly victims from seeking judicial remedies. The goal of this program is to make that option more accessible. For more information, contact [Deirdre Lok](#), Weinberg Center counsel.

Instead, as Jane's treating psychiatrist has determined that she lacks capacity, the Weinberg Center applies for a legal guardian for Jane. The Weinberg Center team will then work with the guardian to decide on appropriate next steps.

After Weinberg

The Weinberg staff's experience has taught them that elder abuse cases are rarely resolved simply and quickly. In Jane's case, she may continue to show psychological improvement and decide to seek legal redress to compel Joe to leave her apartment. Relatives or other community resources may surface that will make a return to the community more feasible. Alternatively, a long-term care facility like the Hebrew Home may be the best permanent option. The Weinberg Center team has laid the groundwork for all of these possibilities, ensuring that Jane has as many options as possible as she continues on her journey towards health, dignity and empowerment.

A view of the majestic Hudson River from the grounds of the Weinberg Center





In The Spotlight

The NYC Elder Abuse Center's staff receives guidance from its Steering Committee, comprised of representatives from government agencies and non-profit organizations. With considerable contributions of time, talent and expertise from these dedicated Steering Committee members, NYCEAC is able to improve the lives of older victims and make substantial contributions to the field of elder justice. Each month the eNewsletter will spotlight a couple of members of its Steering Committee. To these wonderful people: Thank you.

Aurora Salamone, MS
Director of the Elderly Crime Victims
Resource Center
NYC Department for the Aging



Aurora Salamone was raised in a household with her parents, two older siblings and her paternal grandparents. Since both of her parents worked, her grandparents were very involved in the care of the whole family, especially the children. Aurora's grandparents lived into their nineties, and Aurora's memory of them is very dear to her. Her close relationship with them motivated her to work with older adults. Her career path in gerontology is 27 years long and continuing strong.

Aurora has many professional accomplishments, but the one she is most proud of is her role in facilitating the creation of community-based programs to support elder abuse victims. Under Aurora's leadership, in 2002, the NYC Department for the Aging (DFTA) allocated city funds to contract out elder abuse services to nine community-based contractors. She also developed and implemented citywide elder abuse training for community-based DFTA contractors on issues of elder abuse; created informational brochures on the topic; developed subway/bus outreach campaigns; and planned, designed and coordinated citywide elder abuse conferences. Under a grant from the U.S. Department of Justice, [DFTA's Elderly Crime Victims Resource Center](#) developed training manuals on elder abuse for the NYC law enforcement community.

Aurora is grateful to DFTA's past and present commissioners who have provided opportunities to move this elder justice work forward. She acknowledges there is much more to do but does see momentum building due to the collective efforts of so many colleagues across the city working together to prevent elder abuse.

Aurora holds a Master of Professional Studies from The New School of Social Research. She is the Director of DFTA's Elderly Crime Victims Resource Center, established in 1981 to provide direct services to victims of

Resource Center, established in 1987 to provide direct services to victims of crime and elder abuse citywide. Through the years, Aurora has held a number of positions at DFTA, as a Program Officer, Deputy Director, Special Advisor and Director. In these positions, she has contributed to the elder justice field as a practitioner, administrator, trainer and author. Before coming to DFTA, Aurora was a program director at a large senior center in Queens, when she first started out in the field of aging.



**Joy Solomon, Esq,
Director and Managing Attorney
The Harry and Jeanette Weinberg
Center for Elder Abuse Prevention**

Joy Solomon was raised in a family that emphasized personal responsibility for repairing the world. Joy's grandparents described this value to Joy and her sisters using the Hebrew phrase, Tikkun Olam. With this value as an anchor, being active in the community comes naturally to her. Joy's three sisters inspire her; each one of them is making unique contributions to humanitarian work. Joy considers the opening of the Weinberg Center to be the shining achievement of her career. She takes enormous pride in advocating for elders and early in her career she observed this need to be acute. Joy's dream for accelerating elder abuse prevention is to see the problem funded in a serious way to better mobilize the efforts of all her esteemed colleagues in the field. Taking part in the advocacy and healing process for victims motivates Joy.

Prior to founding the Weinberg Center, Joy was the Director of Elder Abuse Services at the Pace Women's Justice Center, a non profit legal advocacy and training center based at Pace University Law School in Westchester County, New York. Prior to joining the Women's Justice Center in 1999, Joy investigated and prosecuted a variety of crimes including child abuse, fraud, and elder abuse as an Assistant District Attorney in Manhattan, where she served for eight years. After obtaining her B.A. from Syracuse University in 1986, Joy received her law degree in 1989 from the National Law Center at George Washington University. Joy is a frequent speaker on the issue of elder abuse, including to the United States Senate, Special Commission on Aging. She received the Westchester Public/Private Partnership for Aging Services' Golden Harvest Leadership Award in September 2007. In 2010 Joy received The New York State Bar Association award for Excellence in Public Service. Joy is also a certified ISHTA yoga instructor.

Inspiration

**A Poem by
Langston Hughes**

This beautiful and hopeful poem, *In Time of Silver Rain*, about spring and renewal, was written by Langston Hughes. It has been sung by many, with music by Victor C. Johnson.

In time of silver rain
The earth

In the earth
Puts forth new life again,
Green grasses grow
And flowers lift their heads,
And over all the plain
The wonder spreads
Of life,
of life,
of life!

In time of silver rain
The butterflies
Lift silken wings
To catch a rainbow cry,
And trees put forth
New leaves to sing
In joy beneath the sky
As down the roadway
Passing boys and girls
Go singing, too,
In time of silver rain
When spring
And life
Are new.

Upcoming Events

Upcoming Multidisciplinary Team Meetings

Professionals throughout Brooklyn and Manhattan have an opportunity to present complex elder abuse cases to the NYCEAC's multidisciplinary teams in Manhattan and Brooklyn to receive recommendations on assessment and interventions from the teams. For more information, please refer to the individual sections of NYCEAC's website re: the MDTs: [EACCRT](#) and [Brooklyn MDT](#).

The following are the upcoming dates for these MDT meetings:

Elder Abuse Case Coordination and Review Team (EACCRT) Meeting

Next Meeting Dates: January 4, 2012
Time: 9:30 AM -11:00 AM
Place: Convenient Manhattan location
RSVP: Email [Robin Roberts](#) or call at 718-722-4839.

Brooklyn MDT Meeting

Date/Time: Wednesday mornings, 9:00-10:30 AM, 3 meetings/per month
Place: Downtown Brooklyn location
RSVP: Email [Robin Roberts](#) or call at 718-722-4839.

Contact Us

We want to hear from you! If you have ideas for articles or other suggestions about how this eNewsletter could be helpful to you in your work with elder abuse victims, please [email us](#) or call Risa Breckman at 212-746-1674.

Please forward this eNewsletter to anyone you think would benefit from it. *Thank you!*

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