

From: [National Sheriffs' Association](#)
To: [Edward Hutchison](#)
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National Sheriff's Association



March 2010

The [2010 NCVRW Online Resource Guide](#) contains everything you need to host and promote National Crime Victims' Rights Week in your community in a new, more eco-friendly package. This year's theme—Crime Victims' Rights: Fairness. Dignity. Respect.—reflects on victims and their families, the professionals who serve them, and on the struggle for victims to be treated fairly and with dignity and respect. With the 2010 NCVRW Online Resource Guide, you can—

- Find the latest [statistics](#) on crime victimization.
- Download helpful hints on how to [maximize communication and awareness](#) and review suggestions for [working with the media](#).
- Promote your event with [NCVRW public awareness posters](#) and [other campaign materials](#).
- Place [NCVRW Web ads](#) on your Web site or view the [2010 theme DVD and PSA](#).

Join OVC in our mission to help communities and victim assistance providers promote awareness of crime victim issues. Download the [complete guide](#) now or choose a [specific section](#).

<http://ovc.ncjrs.gov/ncvrw/>

How do I obtain an order of protection?

To obtain an order of protection, please contact your local district attorney or prosecutor's office. A restraining or stay-away order is a legal protection that prohibits the offender from contacting you or interfering with your activities or mobility. Additional information on orders of protection is available in the [Office for Victims of Crime \(OVC\)](#) report, [Enforcement of Protective Orders](#), and the [Crime: Domestic Violence](#) section of our site.

What can I do if I am a victim of stalking?

If you are a victim of stalking, call your local police department's emergency number (911) to report any incidents. In addition, you may wish to review the [National Center for Victims of Crime \(NCVC\)](#) publication, [Safety Plan Guidelines](#). For further assistance, please contact the [NCVC Stalking Resource Center](#) at 1-800-FYI-CALL (1-800-394-2255).

Ethnic Seniors Grapple with Depression--Alone

New America Media, News Feature, Paul Kleyman, Posted: Feb 18, 2010

Editor's Note: Serious depression is a growing problem for multicultural seniors. But unlike older whites, ethnic people 50-plus are blocked from treatment by poverty, limited or no insurance, lack of programs geared for them—and the stigma of mental problems that permeates many cultures. New America media senior editor Paul Kleyman begins his occasional series on mental challenges for ethnic seniors with this article on treatable depression. He wrote this story while participating in the California Endowment Health Journalism Fellowships, a program of the University of Southern California's Annenberg School for Communication and Journalism.

Managing her diabetes day-to-day is a constant struggle for Maria Carr. Like so many black elders, the 68-year-old San Franciscan must wrestle so much with the debilitating effects of chronic illness—the neuropathy that weakens her ability to walk or the continual pin pricks to test for blood sugar levels—that it gets her down.

It's in those low hours that Carr's thoughts often drift back to her "rotten childhood" on a farm in her native Jamaica and the constant verbal abuse she endured from her stepfather.

"People think about their past history," said Carr. "I'm prepared for the worst. I'm not in the best health, but my mind is still okay. When I get depressed, though, it's very difficult. Sometimes I wish I could die." Study: Ethnic Differences Suggest How Mental Health Services Can Better Serve Elders "Racial and ethnic minorities tend to receive lower overall mental health care," including less outpatient care and fewer visits to mental health specialists, said Daniel E. Jimenez, a research associate at Dartmouth Medical School.

But ending disparities in mental health care between ethnic elders and non-Latino Whites, Jimenez said, isn't a simple matter of improving access to care. At the Gerontological Society of America conference last fall, Jimenez and colleagues at Harvard Medical School's Center for Multicultural Mental Health Research showed that mental health care providers need to better understand differences among various groups to realize how to treat each more effectively.

Their analysis of data on almost 3,000 people ages 50 and older reveals patterns that can help mental health professionals reach out to ethnic seniors better. For example, although many Latinos generally have access to mental health care similar to that of non-Latino whites, older Hispanics are more apt to discuss mental health issues with their doctor than seek psychological counseling .

Asian seniors in the study also had good access to mental health services but were deterred from seeking help by intense social stigma, which "carries with it a high level of shame and embarrassment."

Furthermore, Jimenez and his co-researchers found, "The American health care system focuses on individual ailments, rather than taking a holistic approach." Asian elders are frequently wary of Western medicine, and only use it as a last resort, when traditional folk remedies are not working," the added.

The study did expose access disparities between older whites and Africa Americans, but

Jimenez and colleagues noted that many blacks refrain from seeking mental health services because of significant distrust of health and mental health professionals, due to widespread discrimination over the years.

Jimenez and his co-researchers added, "Cultural differences may go unaddressed, which can lead to African American patients feeling underappreciated, misunderstood and less engaged in treatment."

In another recent study in the January 2010 issue of the Archives of General Psychiatry, Hector Gonzalez and colleagues at Wayne State University in Detroit found that mental health researchers need to end the common practice of lumping people together as Asians, African Americans and so on, and do more to differentiate, say, between, Puerto Ricans and Mexicans or African Americans and black Caribbean. Carr is among the four in 10 black older women who live alone in the United States. She is philosophical about her condition and knows that chronic illness can set off bouts with depression.

According to the Centers for Disease Control and Prevention (CDC), depression is the most prevalent mental health problem among older adults.

Although groups of ethnic elders experience percentages of serious depression similar to that of older whites (about one in six people ages 50 or older at some point) mental health experts say that African-American, Latino, Asian and Native-American seniors are less apt to get treated. That's because of their higher levels of poverty, lack of insurance or access to treatment and the pervasive stigma of mental illness in many cultures.

Left untreated, depression, anxiety disorder and related conditions can result in debilitating physical ailments, as people eat and sleep more poorly and become less physically active.

And untreated depression can lead to suicide. Older adults have the highest suicide rate in the United States. Although seniors make up 12 percent of the population, they accounted for 17 percent of suicides in 2005, according to the Suicide Prevention Action Network.

For those who might resist getting mental health assistance, Maria Carr advised her fellow ethnic seniors, "Depression can lead to terrible consequences. You cannot overcome depression on your own. If people are feeling depressed, they should start by asking their doctors about it."

Patricia Arean, a professor of psychiatry at the University of California, San Francisco, emphasized, "One of the big issues for ethnic elders is the stigma attached to mental illness."

Arean explained that ethnic seniors might sink into depression because of the loss of a spouse or in response to chronic illness. Many delay seeking professional help because they fear being considered "crazy," she said, and "by the time many get to mental health services they are very ill, often enough to be hospitalized."

The health care system also erects barriers to mental health care, she said. For instance, Medicare's toll-free 1-800 number is very difficult to navigate for people with low English proficiency. In addition, compounding the lack of accessible services is a low reimbursement rate for mental health services by Medicare and other insurers, which discourages even providers interested in working with elders from entering geriatrics.

Arean, who is Cuban American, noted that among immigrants, the hurdles to seeking help can go beyond language difficulties in trying to relate their mental distress. Those from politically oppressed countries, she said, may avoid any mention of their state of mind. "In dictatorships, mental health problems can be a reason for imprisonment," she observed.

Even when mental health services are available, she went on, the setup at local mental health services are commonly unfriendly to people open to using them. A 20-minute appointment can turn into a three-hour ordeal for a working son or daughter needed to pick up and deliver an elderly parent, return home and go back to work.

In recent years, Arean said, geriatric mental health experts have developed new approaches to screening for treatable depression among elders in health care clinics and doctors' offices.

The Impact program, developed at the University of Washington, Seattle, for example, has physicians around the United States working with consulting psychologists and care managers, who can help depressed patients so effectively that their symptoms diminish by half or better within a year. What's more, Impact programs were found to reduce total health care costs for each older patient by \$3,300 over four years, a potential savings of billions of dollars for Medicare and Medicaid.

"The professional literature on mental-health challenges for ethnic seniors shows lots of research, but few interventions targeted to them around the country," said Margarita Alegria, director of the Center for Multicultural Mental Health Research at Harvard Medical School

"We get a lot of requests to help elders, especially older Latinos, but also Haitian and Asian seniors. Many find themselves marginalized and isolated, and that places them at risk," she said.

Many ethnic seniors face a range of social factors blocking them from seeking needed care, Alegria stressed, such as living in high-crime neighborhoods and lack of safe, affordable housing.

"These are people behind closed doors, so they have no easy access to social safety nets," Alegria observed. "In their old countries, the elders could sit with their neighbors in a park or in a café and talk to people. But that's not possible where there is a high level of violence and gangs." Also, she said, older immigrants may be undocumented and fear being exposed, if they seek help.

In San Francisco, Carr knows she's lucky. Unlike most of the growing ranks of ethnic elders and older immigrants in the United States, she has access to programs each day that not only tend to her physical health, but also monitor her mental well being.

Carr, who is covered both by Medicare and Medi-Cal (California's Medicaid program for low-income people), attends the local Institute on Aging's adult day care center several times a week. The program offers social activities for frail seniors and comprehensive health care, including a psychiatrist on staff, who referred her for daily calls from the Institute's Friendship Line, a suicide prevention and counseling service.

The Friendship Line staff call Carr every afternoon to make sure she's all right and remind her to take her prescriptions. "If I'm out, they'll even call me as late as 10 o'clock at night to check on me," she said.

Daniel E. Jimenez, a research associate at Dartmouth Medical School, said that while mental health professionals should be more aware of multicultural perceptions about mental illness, they also need to remain flexible and creative in their work with elders, who don't take easily to some established practices of psychotherapy.

He recalled an older Latina he worked with in California. As a participant in a therapy group for

people providing care to frail older family members, she was the only one to resist using techniques Jimenez was teaching to reduce the enormous stress that can come with family caregiving.

Jimenez recalled, "When I asked her why she wouldn't engage in the stress reduction, she told me, 'Because I'd let the devil in.'" Even though the scientific strictures of psychotherapy prohibit any involvement with religion, Jimenez decided to ask the woman to discuss the stress-reduction with her pastor, who agreed that the meditation could help her.

Going further, Jimenez persuaded the woman to close her eyes during the stress-reduction meditation and imagine Jesus waiting for her in the room. Eventually, he agreed that she'd be fine substituting prayer in church for the psychological technique. "She did great," he said, when he followed up with her later.

"Clinicians need to understand that the person coming in the door often has a vastly different idea of what they are going through," Jimenez stressed. Especially with multicultural patients, he added, "It's the duty of every clinician to follow the lead of the patient. You'd be surprised what a powerful clinical tool listening can be."

BLOG Articles by California Nursing Home Attorneys Traffic Safety and the Elderly

In 2007, (the latest date such information is available for) 13 percent of the total United States resident population were people age 65 and older.

There were 30 million older licensed drivers in 2006—an 18-percent increase from 1996. In contrast, the total number of licensed drivers increased by only 13 percent from 1996-2006. Older drivers made up 15 percent of all licensed drivers in 2006, compared with 14 percent in 1996.

In 2007, 196,000 older individuals were injured in traffic crashes, accounting for 8 percent of all the people injured in traffic crashes during the year. These older individuals made up 14 percent of all traffic fatalities, 14 percent of all vehicle occupant fatalities, and 19 percent of all pedestrian fatalities.

Most traffic fatalities involving older drivers in 2007 occurred during the daytime (79%), occurred on weekdays (72%), and involved other vehicles (71%).

Of all adult drivers, older drivers involved in fatal crashes had the lowest proportion of total drivers with blood alcohol concentration (BAC) of .08 grams per deciliter (g/dL) or higher. Among all fatally injured adult pedestrians, older pedestrians also had the lowest proportion of total pedestrians with BAC of .08 g/dL or higher.

Over three-fourths (77%) of all older occupants of passenger vehicles involved in fatal crashes were using restraints at the time of the crash, compared to 63 percent for other adult occupants.

For older people, 60 percent of pedestrian fatalities in 2007 occurred at non-intersection locations. For other pedestrians, 81 percent of fatalities occurred at non-intersection locations. In two-vehicle fatal crashes involving an older driver and a younger driver, the vehicle driven by the older person was nearly twice as likely to be the one that was struck. In 46 percent of these crashes, both vehicles were proceeding straight at the time of the collision. In 25 percent, the older driver was turning left—5 times more often than the younger driver.

To speak with a nursing home attorney today, call Berman & Riedel, LLP at (858) 350-8855. Our attorneys will happily provide you and your family with an initial free consultation to discuss with you any questions or concerns you may have regarding the care an elderly loved one is receiving in a San Diego nursing home or other type of Southern California elder care facility. To learn more about the firm, visit www.preventelderabuse.com.

This entry was written by [bermanstaff](#), posted on February 16, 2010 at 10:00 pm, filed under [Elder Neglect](#). Bookmark the [permalink](#).

Bank Worker Charged with Swindling 96-Year-Old

SAN FRANCISCO, CALIFORNIA - A former Bank of America employee is being held on suspicion of grand theft and felony elder abuse after prosecutors say he swindled an elderly woman out of \$61,000. Prosecutors say Saul Cornejo was able to swindle the money from a 96-year-old woman by persuading her to allow him access to her accounts while he worked as a customer service representative with a San Francisco branch of the bank.

Prosecutors say from July 2008 through August 2009, Cornejo opened new accounts in the woman's name and withdrew money.

The 25-year-old Daly City man was arrested last Wednesday when the woman's niece became suspicious and found the money missing.

Cornejo is being held on \$50,000 bail after pleading not guilty Thursday to the charges. With its main offices located in San Diego, Berman & Riedel, LLP represents victims of elder abuse and neglect throughout Southern California and the state. The firm has successfully represented many residents of California's elder care facilities that were the victims of horrific examples of abuse and neglect often leading to significant settlements and monetary awards.

Are Seniors Driving Safely in Ocean County, New Jersey?

by [Darlene Bosco](#)

[Send Feedback](#) to Darlene Bosco

Home Care Ocean County NJ

According to the AAA Foundation for Traffic Safety, about one-fourth of all Americans will be considered elderly by 2025. And Census projections tell us that by 2010 there will be about 39 million Americans aged 65 or older. The elderly population is growing at an amazingly fast pace--and this means that the numbers of senior drivers on the road at any given time is also growing. Many seniors have completely safe driving habits; however, it is a known fact that aging and environmental factors can cause seniors to be at risk for hazardous driving.

Driving safely requires careful coordination of many different tasks, as all drivers are aware. But as people age, they lose some of their skills at these tasks. Their abilities tend to diminish in several key areas:

- Seniors have a slowdown in the time it takes them to respond physically to a stimulus. This can affect, for example, how quickly they can step on the brake pedal after seeing that the vehicle ahead of them has stopped.
- Seniors experience losses in both hearing and vision as they age. In relation to driving, this could cause seniors to not notice children running behind their car in a parking lot or signs on a roadway.

Aging also causes seniors to undergo a loss of muscle flexibility and strength. One possible issue this could cause is that a senior could have trouble switching from the gas pedal to the brake pedal while driving.

- As seniors get older, they also deal with a decrease in their ability to concentrate or focus. When driving, this could cause seniors to get lost or easily confused about directions.

There are also other factors that can cause issues with seniors driving. For instance, certain medications that seniors take may cause drowsiness; often these drugs have warnings on the labels to avoid driving while taking the medicine. Environmental aspects can also affect driving. Examples include complicated dashboard panels, driving an unfamiliar car, confusing road intersections, unreadable road signs, and driving through a detour. While environmental factors can affect any driver, the effects of the issues are typically intensified with senior drivers.

All of these issues could be taken to mean that seniors should not drive; however, that would be a rather drastic conclusion to derive. Instead, seniors should take steps to ensure that when they do drive, they are driving safely. Additionally, caregivers for seniors should watch their driving and take note of any possible issues. Here are some tips that seniors can use to improve the safety of their driving:

- Have an eye exam every year. Wear glasses or contact lenses with the current prescription whenever driving.
- Get a hearing check each year. If necessary, wear hearing aids when driving.
- If mobility is limited in any way, see an occupational therapist for equipment to assist in steering or operating the foot pedals.
- Consider limiting driving to daytime only if seeing in reduced light is a problem.
- Plan a route before leaving to feel more confident and avoid getting lost.

More Hawaii seniors financially exploited
Lawmakers considering ways to guard against exploitation

[Couple helping exploited widower pick up the pieces](#)

By [Christie Wilson](#)

Advertiser Staff Writer

A trusting 82-year-old 'Aiea man is struggling to restore his financial footing after giving away his durable power of attorney to a female acquaintance who used it to raid his bank account and obtain credit cards and a reverse mortgage that plunged him into staggering debt.

Friends who are helping the elderly man said cash losses and new debt from years of financial exploitation could top \$750,000, with no guarantee of getting any of it back.

The 'Aiea man's predicament, now under investigation by the state Department of Human Services Adult Protective Services, is an example of how powers of attorney — used since ancient times to allow individuals to act on behalf of others in business transactions and other affairs — have become a license to steal from the elderly.

Most often the thieves are relatives or caregivers who take advantage of a senior's poor health or diminished mental capacity to gain control of bank accounts, homes and other assets for their own benefit, according to elder law experts and other advocates for the elderly.

"It's a huge problem," said Bruce Bottorff, associate state director of AARP. "We continue to do education and outreach because it is so prevalent and, frankly, underreported. People need to be vigilant as the population grows older."

The ease at which powers of attorney can be drawn up — blank forms can be downloaded

from the Internet, and no witnesses are required — and the significant potential for misuse have led some banks to stop accepting the documents, according to James Pietsch, director of the University of Hawai'i Elder Law Program.

The program offers basic legal assistance, advice and information to needy people 60 and older, and caregivers.

Many elderly residents are unaware of the risks of relinquishing their powers of attorney, and unless the documents are drafted with care, they can be readily abused because they grant broad decision-making authority, fail to explain clear standards of conduct, and lack monitoring mechanisms to detect problems early on or provisions for holding abusers accountable.

"It's very easy to abuse, especially with the increasing number of folks who are going to be suffering from diminished capacity or undue influence due to physical or mental frailty where they are turning over their things to other people," Pietsch said.

"You can't be as trusting as you used to be when there are people lurking out there at Zippy's and other places who know the ropes."

The Legislature is considering a measure that would establish additional protections for individuals giving away control over their personal and financial decisions. House Bill 2979 requires that a power of attorney be witnessed by two people who are not related to the "attorney of fact" — the "agent" who is receiving the power of attorney — and acknowledged by a notary public.

"Right now, you can get a notary, and that's good enough to go with, and we just feel there are not enough safeguards in place when working with our elderly," said Rep. John Mizuno, D-30th (Kamehameha Heights, Kalihi Valley, Fort Shafter), who introduced HB 2979.

Mizuno noted Census Bureau predictions that Ha-wai'i's 65-and-older population will double by 2030, making up nearly 1 in 4 residents. "We anticipate that financial exploitation will get worse and worse, so this is a way we can address this. It's a major consumer protection issue," he said.

nationwide problem

Nationally, adult protection and law enforcement agencies report an explosion in all types of financial exploitation, including investment scams, identity theft, forgery of Social Security checks, and coercion in naming beneficiaries or signing over the deed to a home.

A quarter of the 630 cases investigated by Adult Protective Services in fiscal year 2009 involved some form of financial exploitation of adults who, because of mental or physical impairment, are dependent on others for their health, safety or welfare.

Only 15 of the exploitation reports were confirmed, underscoring the difficulty in proving financial abuse.

"It is important to remember that competent adults have the right to make decisions for themselves, even when other people disagree with those decisions, and even when those decisions are unwise," Department of Human Services spokeswoman Toni Schwartz, said in an e-mail to The Advertiser.

She said state law is very specific about what constitutes financial exploitation, which is defined as the "wrongful taking, withholding, appropriation or use" of money or property. "If the alleged victim is competent and gave consent, then a law is not broken and (Adult Protective Services) cannot confirm abuse," Schwartz said.

"Adults are presumed to be competent when making decisions. If it appears the person has become incompetent, (Adult Protective Services) can take the matter to Family Court and seek a temporary guardianship or an order for immediate protection. Judges will then require a

physician evaluation to determine if the alleged victim is competent or incompetent to make decisions."

Schwartz said the number of financial exploitation reports has increased since the state enacted laws in 2007 requiring financial institutions to report suspected financial abuse committed against anyone 62 or older. The new laws also set severe penalties for mortgage and securities brokers who defraud seniors.

Recent local cases

Although data on how many of the reports involve misuse of powers of attorney are not available, Ha-wai'i has seen its share of cases in recent years:

- In 2006, a caregiver was charged with abusing her power of attorney to steal \$86,000 from a 91-year-old Hawai'i Kai man to pay off credit cards and take vacations to the Mainland.
- A woman was convicted of theft and forgery in 2005 after stealing thousands of dollars from her 60-year-old boyfriend by obtaining a fraudulent power of attorney while he was incapacitated from a severe stroke.
- The state sued a self-employed insurance agent in 2004 for financially exploiting an elderly couple he befriended by taking control of their million-dollar estate. After the husband died, the agent had the widow, who was suffering from dementia, assign full power of attorney to him and created a revocable living trust that named him as the trustee.

Pietsch said such crimes may happen more frequently in a recession, when family members with good intentions may be tempted to dip into an elderly relative's bank accounts.

"The tough part of bad economic times is that some children and other people are just desperate, and you could have a child who runs into trouble and abuses the privilege, and then you have outright criminals who prey upon older people," he said.

Reducing risk

Durable powers of attorney still have value as a low-cost, flexible and private form of surrogate decision-making that serve as an alternative to court-appointed guardianship or conservatorship.

And even though some financial institutions have lost confidence in the documents, Pietsch said, powers of attorney remain useful for other purposes, such as applying for benefits or entering into a nursing home contract.

He supports the safeguards proposed in HB 2979.

"Something needs to happen, because otherwise why have these powers of attorney anymore if everybody is afraid of getting involved in a lawsuit? If two witnesses are signing in front of a notary and they are not related to the individual (gaining power of attorney), then it's a little harder to get a conspiracy together," he said.

To lessen the risk of abuse, Pietsch recommends including provisions requiring that regular financial accounting be provided to family members or an adviser, and approval from more than one person for major transactions.

A check-off list for each power that is being granted to the agent is another safeguard, he said. "What we recommend is that individuals plan for the worst and think of every possible bad thing that can happen, and go to a family lawyer to chart out how the family would best handle the situation," Pietsch said.

For anyone with more than \$100,000 in assets — essentially, anyone owning a home — he recommends a living revocable trust in place of a durable power of attorney.

The arrangement, which can cost several thousand dollars in attorney's fees to draw up,

transfers a person's assets into a living trust that the individual may control as trustee. The trust can be revoked or amended as the person wishes, and a successor trustee designated to follow the individual's directions upon incapacity or death.

"That's sort of where it's leading without reform to powers of attorney," Pietsch said. The Uniform Law Commission, which drafts and proposes model laws, devised the Uniform Power of Attorney Act in 2006 to guide states in legislating requirements for powers of attorneys.

The commission identified possible provisions that promote autonomy and protect against abuse. These include a clear statement of an agent's duties and specific language regarding "hot powers" such as disposing of property, making gifts, substantially altering an estate plan or changing beneficiary designations.

Powers of attorney also should spell out what to do if an agent resigns, and remedies and sanctions for abuse, such as restoring the value of mishandled assets and reimbursement of legal costs.

Reach Christie Wilson at cwilson@honoluluadvertiser.com.

Elder care class

By JULIE WEISBERG – Staff Reporter
February, 12, 2010

WINSTED — Northwestern Connecticut Community College has teamed up with the Winsted Health Center Foundation to create a new elder care class for area residents who may be the primary caregiver for an older family member or friend at home.

The class, which is part of the college's spring continuing education program, begins next month and has been split into two parts.

The first section of the program is a block of six afternoon classes held once a week that focus on topics such as age-related physical changes, common medical conditions, home safety and fall prevention and assisting with personal care. It begins March 10, and the fee for the six classes is \$60.

The second part of the program is a block of four afternoon classes that meet once a week beginning May 12. The topics discussed will include accessing available services, caring for the caregiver and planning for the future. The fee for all four classes is \$40.

Tuition assistance is available through the foundation.

Heather Cappabianca, the coordinator of NCCC's allied health continuing education program, said that this is the first time an elder care course for non-professionals has been offered through the college.

"We think it is an opportunity to be of service for those people who face the challenge of taking care of an elderly family member," Cappabianca said.

Cappabianca said the college began "brainstorming" with the foundation several months ago on the elder care course. It is the second time the two have come together to create a new program.

Last year, the foundation and school created an oral health program that provides dental screening to Winsted children.

"We're happy to be working in partnership with the foundation," Cappabianca said.

Winsted Health Center Executive Director Jonathon Blum agreed.

"We're excited," Blum said, adding that the center's foundation also felt it was important to keep the cost of the course affordable so as many people as possible can participate.

"It's important that dollars not be the barrier to coming to the class," he said.

Robert Pam, a consultant who worked with the foundation's strategic planning committee to help create the class, said while there are one-day elder care workshops and online programs, he is not aware of a similar course being offered for non-professionals in the Northwest Corner.

"No one else is doing this," Pam said.

For more information about the two-part course or to register, call 860-738-6446 or 860-738-6484. Scholarships are also available by calling the Winsted Health Center Foundation Executive Assistant Kris Griffin at 860-379-0888.

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THIRTEEN THINGS YOUR BURGLAR WON'T TELL YOU:

1. Of course I look familiar. I was here just last week cleaning your carpets, painting your shutters, or delivering your new refrigerator.
2. Hey, thanks for letting me use the bathroom when I was working in your yard last week. While I was in there, I unlatched the back window to make my return a little easier.
3. Love those flowers. That tells me you have taste... and taste means there are nice things inside. Those yard toys your kids leave out always make me wonder what type of gaming system they have.
4. Yes, I really do look for newspapers piled up on the driveway. And I might leave a pizza flyer in your front door to see how long it takes you to remove it..
5. If it snows while you're out of town, get a neighbor to create car and foot tracks into the house. Virgin drifts in the driveway are a dead giveaway.
6. If decorative glass is part of your front entrance, don't let your alarm company install the control pad where I can see if it's set. That makes it too easy.
7. A good security company alarms the window over the sink. And the windows on the second floor, which often access the master bedroom - and your jewelry. It's not a bad idea to put motion detectors up there too.
8. It's raining, you're fumbling with your umbrella, and you forget to lock your door - understandable. But understand this: I don't take a day off because of bad weather.
9. I always knock first. If you answer, I'll ask for directions somewhere or offer to clean your gutters. (Don't take me up on it.)
10. Do you really think I won't look in your sock drawer? I always check dresser drawers, the bedside table, and the medicine cabinet.
11. Here's a helpful hint: I almost never go into kids' rooms.
12. You're right: I won't have enough time to break into that safe where you keep your valuables. But if it's not bolted down, I'll take it with me.
13. A loud TV or radio can be a better deterrent than the best alarm system . If you're reluctant to leave your TV on while you're out of town, you can buy a \$35 device that works on a timer and simulates the flickering glow of a real television. (Find it at <http://www.faketv.com/>)

8 MORE THINGS A BURGLAR WON'T TELL YOU:

1. Sometimes, I carry a clipboard. Sometimes, I dress like a lawn guy and carry a rake. I do my best to never, ever look like a crook.
2. The two things I hate most: loud dogs and nosy neighbors.
3. I'll break a window to get in, even if it makes a little noise. If your neighbor hears one loud sound, he'll stop what he's doing and wait to hear it again.. If he doesn't hear it again, he'll just go back to what he was doing. It's human nature.
4. I'm not complaining, but why would you pay all that money for a fancy alarm system and leave your house without setting it?
5. I love looking in your windows. I'm looking for signs that you're home, and for flat screen TVs or gaming systems I'd like. I'll drive or walk through your neighborhood at night, before you close the blinds, just to pick my targets.
6. Avoid announcing your vacation on your Facebook page. It's easier than you think to look up your address.
7. To you, leaving that window open just a crack during the day is a way to let in a little fresh air. To me, it's an invitation.
8. If you don't answer when I knock, I try the door. Occasionally, I hit the jackpot and walk right in.

Spotlight back on crimes against the elderly

February 12, 2010

By [STEVEN ROSS JOHNSON](#)

For Elgin Police Department Elderly Service Officer Cherie Aschenbrenner, violent incidents such as last week's home invasion -- in which a 90-year-old man was battered -- are fortunately still a rare occurrence.

"To open the door and get assaulted -- it's just awful," she said. "It's unusual that it's this violent."

But Aschenbrenner said the manner in which the offender gained entry to the home -- disguised as a package handler -- is an all-too-common phenomenon for seniors.

"It's almost like the perfect crime," she said. "They let them in."

Known as "ruse burglaries," offenders posing as everything from utility workers to employees of the city's water department approach unsuspecting residents, claim to need access to fix a problem, then keep the victim distracted while a second person burglarizes the home.

Ruse burglaries are a serious enough problem that they inspired police officials to hold an upcoming informational fashion show for seniors featuring uniformed employees of at least a dozen companies and agencies. Those include ComEd, FedEx, United States Postal Service, U.S. Census Bureau, Nicor, city of Elgin, Comcast, AT&T and UPS, as well as members of the Kane County sheriff's, Elgin police and South Elgin police departments.

Aschenbrenner said she hopes the event -- called "Who's 'really' knocking at your door?" -- will encourage seniors to ask more questions when people come to their door.

"We want to make it a learning experience, but fun," she said.

The event is March 4 at the Centre of Elgin, 100 Symphony Way. For more information, call 847-741-2045.

The event is being conducted by Elgin Township Triad, a collaboration of Elgin and Kane County law enforcement and senior services providers that informs the elderly about ways to

keep themselves safe from crime.

Helping the elderly overcome the stigma of being a crime victim has been an ongoing challenge for Aschenbrenner, who along with Kane County sheriff's Lt. Kevin Williams are part of Elgin Township Triad.

Williams said both he and Aschenbrenner talked to more than 4,000 area seniors over the past year, holding more than 80 presentations about the latest reported scams.

"They're out there," he said of the scams. "And we just want" seniors "to be aware of it and teach them what's right and what's wrong."

Volunteers, SC business deliver 911-use cell phones to seniors
From Submitted Reports

Students from Geneva High School helped organize a cell phone drive recently for the elderly safety program, TRIAD of Central Kane County.

Advantax Group LLC of St. Charles connected with the organization's student volunteers and donated all the company's used cell phones. The donated phones were deprogrammed by the students to then be reloaded with a 911 emergency-use program and given to seniors living in the Tri-Cities.

"It was great to see local companies like Advantax team up with the students and TRIAD by donating their old phones," said Monica Negrete, of Geneva, an Advantax employee. "It takes everyone in our community -- businesses, residents, and students -- to come together and help keep the elderly safe."

"We are more than happy to help positively impact our community by donating our used cell phones," said David LeVan, CEO and founder of Advantax. "We're also thankful for organizations such as TRIAD for organizing events and making it possible for companies to become involved."

The Central Kane County TRIAD program is dedicated to reducing crime against the elderly and is locally sponsored by the Kane County Sheriff's Department; Geneva, Batavia, St. Charles and Elburn police departments; as well as Geneva Township, Delnor Hospital, and Senior Services Associates Inc. In addition to distributing 911 emergency cell phones, TRIAD holds many educational safety events, distributes informative articles, and also provides low-cost transportation services to serve and protect the elderly.

Advantax Group offers comprehensive property tax services across all 50 states. Advantax is headquartered in St. Charles. For more information, please visit www.advantax.com or call 630587-9700.

DIPOSKAN OLEH SAFETY BOOK

It is that time of year again to prepare for hurricane season. One area of hurricane preparedness that many people forget about is how to care for the elderly in the hurricane season.

Elderly are very uncertain of changes and last year during Hurricane Ike in 2008, many elderly were very confused during the power outages and the lack of services that were not available. One way to help you with caring for your elder during a storm is to be prepared.

Here are some helpful hints for you to consider:

1. Stock up on incontinent supplies such as adult diapers, baby wipes (you can use these for yourself too), gloves, and other personal care supplies.
2. Have a month's supply of your elder's medications on hand.
3. Be sure to have a lantern type light and batteries. These lights provide more room lighting like they are used to having and they don't have to carry them in their hands which may interfere with canes and walkers.
4. Buy some Ensure or other type of dietary supplement. These are great because they are non-perishable and provide a lot of vitamins which they may need due to the extra stress of the situation.
5. Register your elder with the local authorities. For example, in the Houston, TX area there is a Houston-Harris County 211 Special Needs Transportation Registry. Call the specified phone number to register your elder. This service is designed so the Officials know about the special needs of your elder and can provide assistance if needed. Many areas of the country have these types of registries.
6. Locate businesses your elder may need during an emergency (such as dialysis treatment centers, oxygen supply companies, etc) and find out their emergency plan if they have no power to serve your elder. You want to have a back up plan.
7. Remember that power scooters and wheelchairs need power to operate so you may want to get a back up regular wheelchair for your elder.
8. Don't forget some form of entertainment such as cards or board games. These are a great way to occupy your elder so they forget about the storm for a while.

Of course the items listed above are in addition to your regular hurricane supplies such as food, water, batteries, flashlights, battery operated radio or TV, cash, first aid kit, and other essential items that your family may need during a storm.

Always remember that your elder may be confused during times that are out of the ordinary. Hurricanes certainly can be classified as not normal. Be compassionate and understanding that they too are disoriented by not having any electricity and are confused by the raging storm. Be sure to include them in any updates that you have about the storm so they know what is happening. Keep in mind your elder is just as interested in the information that is coming out on the radio as you are.

With the proper planning, a hurricane can be a little easier for you and your elder. br />

Skit'tles a generational day for senior safety
by Wendy Elliott/The Advertiser
Kings County Advertiser

After two days of storm delay, a special day, Senior Safety Skit'tles, went off successfully Jan. 28 at Horton High School.

Kings Seniors Safety Coordinator Michelle Parker worked with police, paramedics, fire departments and Horton drama students to offer solid information for seniors - over 220 attended.

"It touched my heart that they were that interested," said Parker of the solid turn-out.

Drama students used the morning as their semester examination, presenting safety skits. The skits examined home emergencies, elder abuse, fraud and potential home invasions, Parker noted. They used humor to bring home reality.

"In addition to the skits," Parker said, "there were display booths on all kinds of safety-related topics highlighting home security products, home health aides, crime prevention programs, the

Vial of Life and many, many more.”

The seniors' day was not a new idea, Parker said, but mixing generations was unique. Gaspereau senior Sandra Gertridge, who watched her grand daughter, Cleo Forsythe-Gertridge, perform; said she was pleased to be there.

Parker said she had met approximately 40 per cent of those who turned out. There were seniors from as far away as Ontario; the oldest was 96.

Community policing officer Cst. Blair MacMurtery said the seniors particularly enjoyed the information that came out of the question and answer period.

“That kind of open dialogue will probably come up again when we hold our community coffee clubs in the coming summer,” he said.

Insp. David Brown welcomed the seniors, saying the Valley is one of the few sectors of the province with a growing population - many are seniors.

“We want to ensure that you are informed,” he said. “Seniors' safety is a huge undertaking for us.”

R U OK? Safety System

With the winter months upon us, Chief of Police Scott P. Livingstone would like to remind our citizens, especially the elderly and the housebound, of an important service offered by the Amherst Police Department and the Amherst SALT Council (Seniors and Law Enforcement Together) - the “R U OK?” Program.

The R U OK? Program is a computerized telephone reassurance program for at-risk seniors that assists elders or disabled individuals who may be housebound, live alone, or need the assurance of a daily phone call to feel safe and secure.

The program utilizes a computer housed at the Amherst Police Department to place a daily call, at a fixed time each day, to its subscribers. The specific time of the automated telephone call is predetermined by the individual enrolled in the service. If the subscriber is "OK," he or she simply hangs up the telephone after hearing the pre-recorded message. If the call is unanswered, or if the telephone line is busy, two or more additional attempts at contact are made before the computer puts out an “Alert Report.” At this time, either a contact person or an Amherst Police Officer is dispatched to the home to check on the well-being of the subscriber.

To enroll in the "R U OK?" Program please contact SALT Representative Robert Joy at (413) 253-7059. For additional information concerning this service or any elder program please contact [Officer Jamie Reardon](#) at 413-259-3000.

TRIAD program helps ensure Maricopa seniors' safety

With the signing of a Maricopa TRIAD agreement last week, senior citizens can feel safer in their own homes.

TRIAD is about seniors helping seniors, working in conjunction with the Maricopa Police Department and the Pinal County Sheriff's Office, as well as the Pinal County Attorney's Office to identify the needs of seniors and improve their quality of life.

What services does TRIAD provide?

Home Alone kit: A home pendant system, which can be activated for emergencies if the senior is unable to reach the telephone. The pendant is a necklace worn by the senior, which is connected to a box attached to a landline phone with a 50-foot radius. There is a one-time cost of \$50 for the system, and financial help is available for those in need.

Telephone reassurance: Volunteers call seniors who live alone or have health concerns between 7 and 9 a.m. each morning to chat for a few minutes and check on their welfare. If no one answers by the third call, MPD officers or sheriff's deputies (outside the city limits) will respond.

9-1-1 cell phones: Free cell phones, donated and with all personal information removed, giving the senior access to 9-1-1 service.

Emergency medical cards: Medical conditions and current prescriptions are entered on a card, which is then posted on the senior's refrigerator. In emergency situations, paramedics or first responders have immediate access to that information.

On Feb. 4 Maricopa Seniors president Therese Starkey, Maricopa Police Chief Kirk Fitch and Jim Stevens, a volunteer representing the PCSO, signed the TRIAD agreement in front of a large audience of seniors, who gathered at the Maricopa Public Library for the event. District 3 Supervisor David Snider and Maricopa Councilmen Marvin Brown and Edward Farrell were also present.

Starkey thanked everyone for making the project, four years in the planning, come to fruition. She also acknowledged the help of Maricopa Seniors officers Helen Brown and Marge Kavanaugh and MPD Sgt. Stephen Judd.

"Without volunteers, the TRIAD program would never happen," said Starkey, who already has 20 volunteers. "We've had an unbelievable response."

The Pinal County Attorney's office oversees TRIAD, and there are seven other TRIADs in the county. Shannon Ortiz said their office was pleased to have such a strong foundation established in Maricopa "to make Maricopa seniors safe."

"This is a great day in Maricopa," said Snider. "As my dear friend Dorothy Powell used to say, 'If you don't think these issues are important, just wait!'"

Brown echoed those sentiments. "You see the commercials—'I've fallen, and I can't get up,' but it happens all the time."

Fitch noted that TRIAD "kicks off another phase of our volunteer program." Judd added that, as a first responder himself for 16 years, he knew officers would be excited to have more information available when they are called to a senior's home.

To enroll in the TRIAD program seniors must be 55 or older. Volunteers need to be fingerprinted and complete an application before they are trained for the program. If you are interested in enrolling or volunteering, contact Therese Starkey at 520-568-8945.

Pennsylvania Secretary of Aging: Help Older Neighbors During Severe Weather

HARRISBURG, Pa., PRNewswire-USNewswire/ -- Pennsylvanians are urged to check on older relatives and neighbors to help assure their safety during periods of severe weather, Secretary of Aging John Michael Hall said today.

"Older citizens, many of whom live alone, can use help in getting their medications or going to a doctor's office. Some may need items from the grocery store or help with shoveling a path to

their mail box," Hall said. "It's important to check on these neighbors and to provide assistance when possible."

While some seniors receive home-delivered meals that provide a frozen or shelf-stable backup meal for use when roads become impassable, many do not or may run out of those meals. A simple call or visit by a concerned neighbor could be a lifeline.

It is recommended to keep a flashlight, blankets, an adequate supply of prescription drugs and extra food in preparation for a storm.

As always, if elder abuse or neglect is suspected, call the statewide Elder Abuse Hotline at 1-800-490-8505 to be connected to the local Area Agency on Aging. This number is in operation 24 hours a day, seven days a week.

For more information on programs for older Pennsylvanians, visit www.aging.state.pa.us or call 717-783-1550.

Media contact: Jane Crawford, 717-783-1549
SOURCE Pennsylvania Department of Aging

Local ID thefts may be linked to ring
By Laura Elder The Daily News
Published February 21, 2010

State police are investigating whether 10 University of Texas Medical Branch patients are among the victims of a sophisticated criminal ring whose alleged leader is accused of using a stolen identity to land a job with access to thousands of confidential billing records.

The 10 patients, who are out thousands of dollars and likely hundreds of hours attempting to repair their finances and credit, were among hundreds whose sensitive information might have been compromised by a woman working for Georgia-based Med-Assets.

MedAssets has a contract to do billing and collections for the medical branch.

The patients are victims of technological heists that are among the nation's fastest-growing types of white collar crime and have the potential to ruin lives.

The medical branch last week sent letters notifying 1,200 patients their names, addresses, Social Security numbers, insurance information and other sensitive data could have been compromised from July through October.

New Victims Appear

The 10 medical branch patients reported someone had used their identities to create fraudulent credit card accounts and checks, and committed bank fraud by making purchases through fraudulent credit and debit card accounts, state police said.

But investigators say they haven't determined whether the 10 cases are the work of a MedAssets employee being detained in a federal facility in McLennan County.

"The method of operation is very similar to the suspect's past crimes," said Sgt. Jeff Buuck, in the criminal investigation division of the Texas Department of Public Safety.

Katina Rochelle Candrick, 33, and two others in December were charged with conspiracy, identity theft and bank fraud, DPS officials said.

Candrick, who has a long criminal résumé, is suspected of having used the stolen identity of a

Wisconsin woman to get a job with MedAssets.

Two suspected of having worked with Candrick, but not for MedAssets, also have been charged with conspiracy, bank fraud and identity theft.

Investigators suspect, but haven't proven, that Candrick obtained the MedAssets job for the sole purpose of getting access to sensitive information, DPS spokesman Tom Vinger said.

No Evidence

When the letters went out two weeks ago, the medical branch and MedAssets officials said they had no evidence Candrick had misused information about medical branch patients.

But after patients received the letters, which included information about how to contact Buuck, his phone started ringing.

Buuck said he expected to hear from more victims.

Almost all the patients who have contacted Buuck already had filed reports with their local law enforcement agencies, he said. If there's evidence the 10 medical branch cases can be linked to Candrick, Buuck will consolidate them into the federal conspiracy case against her, he said.

Probe Began In 2008

Buuck said he couldn't elaborate much about the investigation.

But he began the Candrick investigation in 2008, first encountering her name in a prescription drug fraud case in which a fraudulent driver's license was used.

He tracked down Candrick, and U.S. Marshals arrested her Dec. 15 in Dallas.

She is implicated in a widespread identity theft investigation involving at least 40 cases from Texas to Wisconsin and losses upward of \$1 million, officials said. None of those cases are linked to the 10 medical branch cases and predate her employment with MedAssets, officials said.

One-month Lag

When Candrick was arrested, police notified MedAssets, which notified the medical branch Jan. 21, more than a month later.

Medical branch officials said they would have liked MedAssets to have notified them sooner so they could notify patients sooner. But MedAssets said it needed time to gather information about patients whose information might have been exposed.

Candrick worked for MedAssets until her arrest, police said. But MedAssets said she had access to information about medical branch patients only from July to October.

MedAssets is offering to pay for identity theft protection measures for patients who received letters from the medical branch, officials said.

Also, MedAssets will give those patients information about how to obtain free copies of their credit reports and how to place a fraud alert on their credit files.

Millions Victimized

As medical branch patients began receiving letters two weeks ago, Pleasanton, Calif.-based Javelin Strategy & Research released a report asserting the number of U.S. identity fraud

victims jumped by 12 percent to 11.1 million adults, the highest increase since it began its survey in 2003.

According to the report, the total fraud amount increased by 12.5 percent to \$54 billion, compared with the year before.

“An increase in non-card frauds and computer-based crimes confirms recent trends of increasingly sophisticated criminal activity,” according to the report.

In extreme cases, identity theft can destroy lives.

The former medical branch patients who called Buuck have had a difficult time dealing with the theft, he said.

“They tell me it’s the most stressful thing,” Buuck said.

On average, it takes a victim 300 hours to clear his or her name or correct problems from identity theft, Buuck said.

Among protective steps consumers can take is to guard their information and closely monitor their accounts, Buuck said.

Along with information about medical branch patients, Candrick also had access to sensitive information at other medical centers, Buuck said.

“I anticipate further federal charges,” Buuck said.

Tehama County volunteers call seniors for safety, companionship
By JULIE ZEEB -DN Staff Writer

The TeleCare program, a reassurance phone system provided by Northern Valley Catholic Social Services, is in need of volunteers.

We're working on expanding our program and getting the word out about it, said Elaine Benwell- Abeyta, with Elder Services, who is heading up efforts to find volunteers.

The program started with a grant in June 2009 from the Corning Health Care District, which serves Corning, Los Molinos, Vina and Rancho Tehama, and was limited to that area, she said.

With the addition of a grant from St. Elizabeth Community Hospital, the free program now has the means to serve customers throughout Tehama County.

I know there's a need for this program in Tehama County, Benwell- Abeyta said. With cuts to In Home Services, I think it's going to get worse and increase the need for programs like TeleCare.

TeleCare started with a call from an elderly woman who lives on a ranch in a remote area asking for help. The woman told Benwell- Abeyta that she was worried about her animals.

She said I'm out here on my own and if something happened to me, my animals would starve and asked if someone could call and check on her, Benwell- Abeyta said.

The program, which will have volunteers partnered with between four and six clients, isn't just for those who are sick, Benwell- Abeyta said. Anyone 55 and older who lives alone is

eligible.

We don't do medical care, Benwell-Abeyta said. The program's just to provide emotional support and a friendly, caring voice. It gives them the confidence to stay living at home.

Benwell-Abeyta said it is harder for older people, especially those who have suffered the loss of a spouse, to make new friends and even if they can get out, they often may not want to.

Having someone call to check on them, which takes place at a scheduled time as often as the client wants it to, helps clients deal with being isolated, she said.

Some clients want to be called once a day while others prefer once a week.

If the client does not answer the call, the volunteer calls a back up number that has previously been arranged and asks that person to check on the client.

Backups can be anyone from a neighbor or family member to an apartment manager, Benwell-Abeyta said. If the person is OK, the backup person calls the volunteer. If the client is not the backup can call 9-1-1.

We're hoping we can get the word out to people who live in remote areas, but it can be apartment residents, too, Benwell- Abeyta said. You can live in a place like an apartment and be surrounded by people yet still be alone.

In order to become a client or volunteer, an application will need to be submitted to Benwell-Abeyta and volunteers will need to go through a screening process, she said.

It's rewarding for the operator as well to know they're doing something that's enhancing someone else's quality of life, Benwell- Abeyta said.

Another program offered by Elder Services is the Silver Surfers, a free computer class that offers hands-on instruction to people 50 and older who just need the basics, she said.

It's no pressure and we usually have a lot of fun, Benwell- Abeyta said. It's eight hours of free instruction and its offered both in Red Bluff and Corning at the Family Resource Centers.

Information on TeleCare of Silver Surfers is available by calling 530-528-7949.

Staff Writer Julie Zeeb can be reached at 527-2153, extension 115, or at jzeeb@redbluffdailynews.com

More Senior Safety related articles are located at www.nationaltriad.org; e-news section.

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