



CALHOUN COUNTY
MICHIGAN



Calhoun County Vulnerable Adult Protocol



THERE IS NO EXCUSE
FOR ELDER ABUSE

Calhoun County Vulnerable Adult Protocol

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Calhoun County Vulnerable Adult Protocol

For Joint Investigations of

Vulnerable Adult Abuse, Neglect and Exploitation

The Michigan Model Vulnerable Adult Protocol (MI-MVP) is a blueprint for communities to implement for the purpose of reducing harm and victimization of vulnerable adults through a coordinated team approach and applies to situations described in Section 400.11 (a-f) of the Social Welfare Act, as amended. This model protocol will aid in systemic changes and ensure reports are appropriately reviewed, investigated and prosecuted and will ensure victim are effectively referred to necessary social and health services.

The identity of any person filing an Adult Protective Services (APS) report with the Department of Human Services (DHS) is confidential and subject to disclosure only with consent from the source or by judicial process per MCL 400.11c(1).

DEFINITIONS

A vulnerable adult is someone 18 years of age or older that has a condition in which he or she is unable to protect him or herself from *abuse, neglect, or exploitation* because of a mental or physical impairment or because of advanced age. There are many forms of *abuse, neglect, or exploitation*.

Abuse: harm or threatened harm to an adult's health or welfare caused by another person, including, but not limited to, non-accidental physical or mental injury, sexual abuse or maltreatment. (1982 P.A. 519 Sec. 11(a))

1. Physical Abuse – non-accidental contact that results in physical harm.
2. Physical Harm – injury to a vulnerable adult's physical condition.
3. Sexual Abuse – non-consensual sexual contact of any kind.
4. Psychological Abuse – willful infliction of mental or emotional anguish by threat, humiliation or other verbal or nonverbal abusive conduct.

Neglect: harm to an adult's health or welfare caused by the inability of the adult to respond to a harmful situation or by the conduct of a person who assumes responsibility for a significant aspect of the adult's health or welfare. Neglect includes the failure to provide adequate food, clothing, shelter, or medical care. (1982 P.A. 519 Sec. 11 (e))

Exploitation: an action that involves the misuse of an adult's funds, property, or personal dignity by another person. (1982 P.A. 519 Sec. 11 (d))

MANDATORY REPORTERS

Although any individual may report to APS, the Social Welfare Act requires certain professionals to make an oral report of vulnerable adult abuse, neglect or exploitation to the Department of Human Services when they suspect or have reasonable cause to believe that an adult has been abused, neglected or exploited. Mandatory reporters must contact the state-wide Centralized Intake for Abuse and Neglect Hotline at **1-855-444-3911**.

List of persons who are required to report by their professional organizations:

1. Health Care Services such as physicians, nurses, aides, and other hospital staff

2. Educational Services such as teachers, administrators, and rehabilitation counselors
3. Social Welfare Services such as social workers, supervisors and caseworkers
4. Mental Health Services such as psychologists, counselors, agency administrators, supervisors, and caseworkers
5. Other Human Services such as those providing services to the disabled and aging such as information and referral and adult day care
6. Law Enforcement officers and employees of the Office of County Medical Examiner

Inter-Agency Agreement for the Provision of Adult Protective Services:

Mandatory agreements between Bureau of Children and Adult Licensing (BCAL), APS, and Summit Pointe have been established to coordinate investigative efforts of abuse/neglect/exploitation of adults in licensed Adult Foster Care (AFC) and Home for the Aged (HA) facilities. This is a signed agreement between the BCAL director, the local DHS director, and the local Community Mental Health Services Program (CMHSP) director which outlines the roles and responsibilities of each agency when investigating allegations of abuse, neglect and/or exploitation of CMHSP recipients of BCAL licensed settings.

Coordinated Investigative Team Approach

Every county or region should have a coordinated investigative team approach when responding to allegations of vulnerable adult abuse, neglect or exploitation. While each team will be structured and operated differently, based on needs of its county, the implementation of MI-MVP will drive each team's objectives.

PURPOSE

The primary purpose of an investigative team is to ensure the coordination of procedures and practices of the partner agencies.

DUTIES AND RESPONSIBILITIES

The duties and responsibilities of each team should include:

1. Regular meetings to increase team member communication.
2. Facilitation and support of each team member's role.
3. Coordination of information sharing.
4. Ensuring team members respect and comply with their respective agency and/or statutory rules regarding confidentiality.
5. Oversight to increase awareness of, and compliance with, the law and best practices outlined in MI-MVP.
6. All designated team members should be provided with a contact phone number list that includes after-hours emergency contacts. This list should be maintained and distributed by the team coordinator.
7. The local investigative team should strive to:
 - a. Coordinate investigations.

- b. Conduct thorough and objective investigations.
- c. Minimize trauma to the victim.
- d. Respect the rights of the alleged perpetrator.

TEAM INVESTIGATION OBJECTIVES

1. Interview the vulnerable adult, conducting joint interviews whenever possible.
2. Interview all witnesses, conducting joint interviews whenever possible.
3. Offer assistance in obtaining any necessary emergency services.
4. Collect and preserve evidence.
5. Interview the alleged perpetrator.
6. Obtain current and historical medical information.
7. Coordinate efforts with APS, law enforcement, the prosecutor, courts and service providers in offering available services to benefit the vulnerable adult.
8. Whenever the vulnerable adult refuses necessary services or chooses to remain in an unsafe or unstable situation, assess the vulnerable adult's capacity to make informed decisions.

CORE MEMBERS

The local prosecuting attorney (PA) or designee and the director of the county DHS or designee should lead the local coordinated investigative team. The Core Members are to include designee's from the following:

1. APS
2. Law Enforcement
3. Prosecuting Attorney

The following activities should be completed by the leaders of the Core Team:

1. Develop written protocols with team members outlining each member's roles. This should include a signature page signed by all members indicating their agreement with the written protocols.
2. Conduct periodic reviews of the local protocol with all members, making changes as needed. New signatures should be obtained whenever changes are made to the protocol.
3. Provide training on the local protocol, as necessary (for example: new team members, changes to the local protocol, etc.)

ADDITIONAL INVESTIGATIVE TEAM MEMBERS

Investigative teams should include, but not be limited to, the following professionals:

1. Medical professionals
2. Aging services providers
3. Community mental health providers
4. Emergency services providers
5. Educational providers

6. Long Term Care (LTC) providers
7. Probate Court
8. Financial Institutions
9. Bureau of Children and Adult Licensing (BCAL)

Not every case will require the participation of all team members. The roles of team members will be determined by the local Core Team.

ADULT PROTECTIVE SERVICES PROCESS

The following process takes place once a report has been made to APS:

1. Centralized Intake sends referrals to the local department
2. The case is reviewed to determine whether the details provided warrant APS intervention. If affirmative, the case is opened and a worker is assigned to investigate allegations.
3. If the reporter identified him or herself, a letter is sent to the reporter informing him or her whether the case is accepted and assigned. If assigned, the name of the worker and the worker's contact number is provided.
4. When assigned, a worker must begin an investigation within 24 hours and must make face-to-face contact within 72 hours.
5. Regarding residents of adult foster care homes, nursing homes and homes for the aged, the appropriate licensing agency is contact by local APS.
6. Depending upon the results of the investigation, the assigned worker intervenes as indicated.

OTHER CATEGORIES OF ADULT VICTIMIZATION

It is the best practice to report incidents to Centralized Intake to determine whether an investigation is warranted. In some cases, the need for APS intervention is not necessary, but follow up by law enforcement and a health care provider are important and highly recommended.

In the case of domestic abuse/assault, the victim should be given information about domestic abuse services. This information should be given in a strictly confidential manner. Domestic abuse is where a victim is physically, sexually, emotionally and/or verbally abused by an intimate partner. The 24 hour domestic abuse number is 888-664-9832 or 269-965-7233.

In the case of a sexual assault, the victim should be given information about sexual assault services. Sexual assault can be committed by a stranger, acquaintance, family member, caregiver, health care provider, spouse or partner; therefore, all information should be given in a strictly confidential manner. The sexual assault 24 hour crisis line is 888-383-2192 or the local business number is 269-245-3925. These numbers are for both the Sexual Assault Services and Sexual Assault Nurse Examiners (SANE) programs.

INTERVENTION POSSIBILITIES

Within Calhoun County there are a variety of services available to those individuals who have been victimized in some way. The following is a brief summary of some of those services:

A. Probate Court

1. Guardianship

A *guardian* is a person or agency appointed by Probate Court to act on behalf of an individual the Court has determined to be *legally incapacitated or developmentally disabled* and, thus, unable to manage his or her own affairs. APS, Community Mental Health, hospitals and nursing homes are sometimes involved in the petitioning process. Other interested parties, with or without the services of an attorney, may also petition. A *guardian's* responsibilities may be expansive or intentionally limited depending upon the decision of the Court and may involve such areas as consent for medical treatment and placement. If a petition alleges any emergency need, the Court may hold a hearing to appoint a temporary *guardian* with a full hearing scheduled within 28 days of issuing the temporary *guardianship*.

2. Conservatorship

A *conservator* is a person or agency appointed by the Court to act on behalf of a *legally incapacitated* individual in the area of finances. Adult Protective Services may assist in filing for conservatorships. Other interested parties may file as well. For immediate needs, a hearing will be held to issue a *preliminary protective order* to protect assets with a full hearing to follow.

3. Involuntary Commitment to a Psychiatric Institution

If a person is believed to be *mentally ill* and does not understand the need for treatment and/or is a potential danger to him or herself or others and/or is not meeting his or her basic needs, anyone concerned with the wellbeing of the person can complete a Petition for Involuntary Hospitalization. This might include family, friends, neighbors, Community Mental Health, Law Enforcement or others. A Supplemental Petition to have the person transported to an evaluation center can also be prepared if the person is refusing to cooperate. Once petitioned, Probate Court determines the need for involuntary placement for psychiatric care.

4. Patient Advocacy Conflicts

A *patient advocate* is an individual designated in writing to act on behalf of a person in the event he or she becomes unable to make his or her own medical and/or placement decisions. If a dispute arises whether a *patient advocate* is acting in the patient's best interests, a petition may be filed with the Court seeking determination as to continuation or removal of the advocate.

For questions, the Probate Court may be contacted at 1-269-969-6794 during normal business hours.

B. Medical and Psychiatric/Psychological Care

1. In an emergency situation for medical needs, call 911 or go to the local hospital's emergency department.

2. For non-emergency medical needs, refer to a primary care physician or other appropriate medical provider.
3. In case of a potential suicidal situation or other psychiatric emergencies, call 911 for assistance.
4. For non-emergency psychiatric/psychological services, contact Summit Pointe in Battle Creek at 269-966-1460 or in Albion at 517-629-5531 or Toll-Free at 1-800-649-3777 or Oaklawn Psychological Services in Marshall at 269-781-9119
5. For other community resources, call 269-965-SAFE.

C. Community Mental Health

Summit Pointe provides comprehensive public mental health services for children, teens, adults, and seniors. Services include:

1. Crisis intervention
2. Screening and referral for psychiatric hospitalization
3. Outpatient counseling
4. Psychiatry
5. Case management
6. Assertive community treatment

For emergencies, call toll free 24 hours per day at 1-800-649-3777. For non-emergencies, call 269-966-1460 or 517-629-5531 during normal business hours

D. Law Enforcement

Michigan law enforcement agencies are dedicated to quality law enforcement and public safety services and are an essential partner in the prevention of vulnerable adult abuse, neglect and exploitation.

1. Law enforcement receives information on vulnerable adult abuse crimes in several different ways:
 - a. Emergency: Law enforcement centralized intake for emergencies is 911. The 911 dispatch center takes the necessary information and dispatches law enforcement and emergency services accordingly.
 - b. Non –emergency: Citizens may report crimes that are not emergencies to the police agency where the crime was committed. For non-emergency situations, contact the Calhoun County Central Dispatch at 269-781-0911 or a specific police department as listed in the attached Resource List.
 - c. APS will report to law enforcement by contacting central dispatch or by an agreed upon manner by the local DHS and law enforcement.

2. Law enforcement's first concern is safety. Once the safety of the vulnerable adult is established, law enforcement will conduct an investigation.
3. When law enforcement encounters abuse, neglect, or exploitation of a vulnerable adult, it will contact APS. Law enforcement will make an oral report immediately to Centralized Intake **(1-855-444-3911)** and indicate if APS involvement is needed immediately.
4. In cases of abuse, neglect, and exploitation, law enforcement will coordinate with APS during the investigation.
5. Law enforcement will provide APS and the prosecuting attorney with relevant information and police reports necessary for APS to complete the State of Michigan reporting requirements
6. Law enforcement will inform APS and the prosecuting attorney when any case involving a vulnerable adult is referred to the Michigan attorney general or the United States attorney.
7. The Mozelle Senior or Vulnerable Adult Medical Alert Act, also known as the Silver Alert, took immediate effect June 19, 2012. This act provides an official response to reports of certain missing persons; allows for the broadcast of information related to those missing individuals; and provides civil immunity to broadcasters and newspapers that notify the public of such incidents.
 - a. When law enforcement receives a report that a vulnerable adult is missing, it shall prepare a report as soon as possible, including any and all identifying information that would help locate the individual.
 - b. Law enforcement may enter the "missing vulnerable adult" information in the Law Enforcement Information Network (LEIN).
 - c. Law enforcement will forward a "Be on the Lookout" (BOL) to all area law enforcement agencies. This report should be sent to any location requested by the reporting person, providing that the request is reasonable.
 - d. Law enforcement will forward the "missing vulnerable adult" information to one or more media broadcaster(s) in the area.

E. Adult Services

The Adult Services division of the Calhoun County Department of Human Services includes Adult Protective Services (APS), Independent Living Services, and Adult Community Placement. APS workers are able to assist in the following areas:

1. Protections including protective services investigations, social protection, and conservatorship/guardianship/civil commitment
2. Counseling

3. Health related medical referrals
4. Home help for those Medicaid eligible
5. Housing by interceding in delinquent property tax/foreclosure situations
6. Emergency shelter/relocation
7. Navigation of the Medicaid application process
8. Referral to other agencies such as Area Agency on Aging, Community Action, Disability Resource Center, Community Mental Health and home health agencies.
9. Linking veterans to appropriate Veteran Services

Please see the attached Resource List for APS contact numbers.

F. Prosecuting Attorney

Prosecuting attorneys are responsible for prosecuting crimes that occur within their jurisdiction as well as acting as advocates for victims of crimes. Because of their position, prosecuting attorneys have a critical role in preventing and prosecuting crimes against vulnerable adults.

1. The prosecuting attorney should take a leadership role with his or her local investigative team and:
 - a. Develop and implement a local protocol in coordination with other investigative agencies and partners.
 - b. Review investigations for best practices, as well as identify roadblocks that hinder investigations and prosecutions of vulnerable adult abuse/neglect and exploitation. Present appropriate recommendations when identified.
 - c. Assign a person for team members to contact with questions regarding criminal or legal issues relating to vulnerable adults.
 - d. Promote awareness of the local investigative protocol.
 - e. Meet with financial institutions, hospitals and other medical care/treatment entities to discuss methods for requesting, receiving and sharing information in compliance with privacy laws.
2. Determine if special accommodations are required based on the victim's needs throughout the criminal process.
3. Provide the victim or his /her responsible party with a copy of the crime victim's rights.
Note: If the legal guardian is the suspect, contact APS to discuss appropriate legal remedy.
4. Make efforts to reduce the number of court appearances for the vulnerable adult as allowed by law.

Investigative Responsibility Based on Client Setting

Suspected Abuse in licensed settings, including AFC, HA, and LTC facilities, may not fall under the jurisdiction of APS. MCL 400.11f(1-3) outlines the investigative entity based on the location, alleged perpetrator and allegations. Mandatory reporters should be aware that reporting to any of the agencies listed below may not relieve you of your responsibility to report to APS.

Note: Suspicion of criminal activity in any setting must be reported to law enforcement (Section 1150B of the Social Security Act, as established by sections 6703(b)(3) of the Patient Protection and Affordable Care Act of 2010; P.A. 368 of 1978, MCL 333.21771).

The following describes the reporting and investigative authority in licensed settings:

- A. Nursing Home
 - 1. Alleged perpetrator is facility staff/personnel:
 - a. LARA, BHCS
 - b. Attorney General HCFD
 - 2. Alleged perpetrator is not facility staff/personnel:
 - a. APS
 - b. Attorney General HCFD
 - c. LARA, BHCS

- B. AFC/HA
 - 1. AFC/HA with no specialized funding:
 - a. BCAL
 - b. APS
 - 2. Contracted Community Mental Health AFC/HA:
 - a. BCAL
 - b. APS
 - c. ORR

- C. Unlicensed Congregate Setting (Assisted Living, Room and Board home, etc)
 - 1. APS
 - 2. BCAL may investigate to determine if the setting requires a license

- D. County medical facilities, freestanding surgical outpatient facilities, hospitals
 - 1. LARA, BHCS

Glossary of Terms

Abuse – harm or threatened harm to an adult’s health or welfare caused by another person, including, but not limited to, non-accidental physical or mental injury, sexual abuse or maltreatment

1. **Physical Abuse** – non-accidental contact that results in physical harm.
2. **Physical Harm** – injury to a vulnerable adult’s physical condition.
3. **Sexual Abuse** – non-consensual sexual contact of any kind.
4. **Psychological Abuse** – willful infliction of mental or emotional anguish by threat, humiliation or other verbal or nonverbal abusive conduct

Complaint – an allegation, referral, report or other communication which contains information about known or suspected abuse, neglect, or exploitation of a vulnerable adult

Conservator – person appointed by a Court to act for a legally incapacitated person regarding financial decisions

Developmental disability- developmental disabilities occur before the age of 22 and affect physical and/or mental abilities. A developmental disability may result in limited functioning in the following areas: self-care, speech and language, learning, mobility, self-direction, ability to live independently and/or to support oneself financially

Domestic Violence – physical attack or the threat of a physical attack upon the victim who is related to the attacker in one or more of the following ways: spouse, former spouse or intimate partner, resident or former resident of the same household, a person with whom they have had a child in common

Elder – person who is 60 years of age and over

Exploitation – an action that involves the misuse of an adult’s funds, property, or personal dignity by another person

Fraud – an act of deceiving or misrepresenting a product, service, or identity in order to take advantage (financial or otherwise) of a person

Guardian - a person that is nominated or court appointed to make decisions about the care of another individual. Their powers and duties are delineated by court order and statutory authority

Legally incapacitated person – an individual who is impaired by reason of mental illness, mental deficiency, physical illness or disability, chronic use of drugs, chronic intoxication, or other cause, not including minority, to the extent of lacking sufficient understanding or capacity to make or communicate informed decisions

Mentally ill person – a substantial disorder of thought or mood that significantly impairs judgment, behavior, capacity to recognize reality, or ability to cope with the ordinary demands of life

Neglect – harm to an adult’s health or welfare caused by the inability of the adult to respond to a harmful situation or by the conduct of a person who assumes responsibility for a significant aspect of the adult’s health or welfare

Patient advocate – an individual 18 years of age or older who is of sound mind may delegate, in writing, powers concerning their care, custody and medical treatment to another individual who is 18 years of age or older

Protective order – an order authorizing, directing, or ratifying a transaction necessary or desirable to achieve security, service, or care arrangement meeting the protected individual's needs

Personal protective order – an order issued by the court in situations where there is a domestic or non-domestic relationship. The order protects an individual from harassment, assault, or stalking by another person

Protective services - Remedial, social, legal, health, mental health, and referral services provided in response to a report of alleged harm or threatened harm

Representative payee – the Social Security Administration (SSA) is responsible for designating a person as a representative payee to directly receive and manage SSA benefits of SSA recipients whom it has determined incapable of managing their own benefits received under the Title VI (SSA) or Title II of the Social Security Act

Substantiated Complaint – a situation in which an investigator determines the subject of the complaint is an adult who is actually threatened by harm due to abuse, neglect, or exploitation and also is vulnerable

Undue Influence – one person who takes unfair advantage of another and substituting the will of the victim with that of the perpetrator; a concerted, deliberate effort to assume control over another person's decision making

Unsubstantiated Complaint – a situation in which an investigator determines the subject of the complaint is an adult who is either not in danger of any harm or is not vulnerable or that the referral is one which is inappropriate for the APS program

Two Definitions of Vulnerable

The Social Welfare Act defines vulnerable as a condition in which an adult is unable to protect him or herself from abuse, neglect, exploitation because of a mental or physical impairment or because of advanced age.

Vulnerable Adult for criminal charges means one or more of the following:

- a. An individual age 18 or over that because of age, developmental disability, mental illness, or physical disability requires supervision or personal care or lacks the personal social skills required to live independently.
- b. An adult who is 18 years or older who is placed in an adult foster care family home or an adult foster care small group home
- c. An "adults in need of protective services" or "adult" means a vulnerable person not less than 18 years of age who is suspected of being or believed to be abused, neglected, or exploited.

Resource List

AGENCY / ORGANIZATION	PHONE NUMBER	Website
Adult Protective Services Centralized Intake	855-444-3911	www.michigan.gov/dhs
Calhoun County Adult Protective Services	269-966-1342	
Area Agency on Aging (Region 3B)	269-966-2450 or 800-626-6719	www.region3b.org
Healthcare Fraud Division – Attorney General	800-242-2873	www.michigan.gov/ag
Legal Hotline for Seniors	800-347-5297	www.elderlawofmi.org
Legal Services of South Central Michigan	269-965-3951 or 800-688-3951	www.lsscm.org
Long Term Care Ombudsman – Licensed Facilities	269-373-5161 or 866-485-9393	
MI Dept. of Community Health – Bureau of Health Systems – Nursing homes	800-882-6006	www.michigan.gov/lara
MDHS Office of Children and Adult Licensing – Adult Foster Care / Home for the Aged	866-856-0126	www.michigan.gov/dhs
Calhoun County Senior Services	269-781-0846 or 877-645-5243	www.calhouncountymi.gov/gov ernment/senior_services/
Sexual Assault Services	269-245-3925 or 888-383-2192	www.SASCC.net
SAFE Place Shelter – Domestic Violence Services	269-965-7233 or 888-664-9832	www.safeplaceshelter.org
Bronson Battle Creek Hospital	269-245-8000	www.bronsonhealth.com/locati ons/bronson-battle-creek- hospital
Oaklawn Hospital	269-781-4271	www.oaklawnhospital.org
Community Action Agency	269-965—7766 or 877-422- 2726	www.caascm.org
Summit Pointe	269-966-1460 or 517-629-5531 Toll-Free 800-649-3777	www.summitpointe.org
Hands On Battle Creek (211)	211	www.handsonbc.org

POLICE DEPARTMENTS	Emergency - 911
Non-Emergency Dispatch	269-781-0911
Albion	517-629-3933
Battle Creek	269-966-3322
Emmett	269-968-9303
Homer	517-568-4312
Huron Potawatomi	269-729-5751
Marshall	269-781-2884
Michigan State Police (Coldwater Post)	517-278-2373
Sheriff's Department	269-969-6442
Veterans Administration	269-660-3052
CALHOUN COUNTY COURTS	
Circuit Court Clerk (courthouse, 2 nd floor)	269-969-6518
District Court Clerk (courthouse, 2 nd floor)	269-969-6678
Probate Court (courthouse, 2 nd floor)	269-969-6794
Prosecuting Attorney (courthouse, 1 st floor)	269-969-6980

Glossary of Abbreviations

Adult Foster Care	AFC
Adult Protective Services	APS
Adult Services Comprehensive Assessment Program	ASCAP
Be on the Lookout	BOLO
Bureau of Children and Adult Licensing	BCAL
Bureau of Health Care Services / LARA	BHCS
Centralized Intake for Abuse and Neglect (CPS/APS)	CI
Community Mental Health Services Program	CMHSP
Emergency Medical Services	EMS
Home for the Aged	HA
Health Care Fraud Division – Attorney General Office	HCFD
Health Insurance Portability and Accountability Act of 1996	HIPAA
Long-term Care	LTC
Law Enforcement	LE
Law Enforcement Information Network	LEIN
Michigan Department of Attorney General	AG
Michigan Compiled Law	MCL
Michigan Department of Human Services	DHS
Michigan Office of Services to the Aging	OSA
Michigan State Police	MSP
Office of Recipient Rights	ORR
Prosecuting Attorney	PA

Statement of Commitment

Calhoun County Vulnerable Adult Protocol

December 20, 2013


Our intent with this protocol is to raise awareness, eliminate and prevent future abuse, neglect, and exploitation of vulnerable adults throughout Calhoun County. To demonstrate our dedication to the vulnerable adult citizens of this county, we sign below in support of utilizing the "Calhoun County Vulnerable Adult Protocol" within our agencies/organizations. We promise to utilize this document through continued examination throughout the years to come. This protocol may be amended as deemed necessary with the approval of the signing agencies.



Hon. Michael Jaconette
Chief Probate Court Judge



David Gilbert, Prosecuting Attorney
Prosecutor's Office



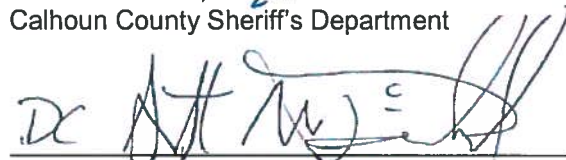
Shaun Culp, Director
Department of Human Services



Matthew Saxton, Sheriff
Calhoun County Sheriff's Department



Megan Reynolds, Managing Attorney
Legal Services of South Central Michigan



Scott McDonald, Deputy Chief of Police
City of Marshall



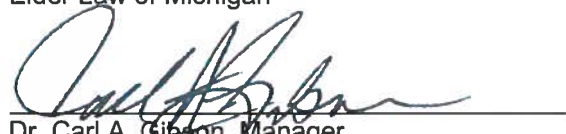
Jennifer Fopma, Director
SAFE Place Domestic Violence Shelter



Ron Tatro, Vice President
Elder Law of Michigan



Karla Ann Fales, Chief Executive Officer
Region 3B Area Agency on Aging



Dr. Carl A. Gibson, Manager
Calhoun County Senior Services