

**House Aging and Older Adult Services Committee**

**Public Hearing on House Bills 122 and 726**

**Regarding Senior/Silver Alert Systems**

**Testimony by Raymond Prushnok, Deputy Secretary**

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**March 10, 2010**

Chairs Mundy and Hennessey and honorable members of the committee, good morning. Thank you for the opportunity to speak with you about our department's views of proposed legislation to establish a "Senior" or "Silver" alert system in Pennsylvania. We have reviewed both pieces of legislation on your agenda today, House Bill 726 (Youngblood) and House Bill 122 (Casorio) and will provide our thoughts on the bills in a broad sense. I will speak to you about aspects we feel must be included in any legislation that becomes law, as well as areas where we would urge caution. If either of these bills move forward, while we do support the concept of an alert system, we believe it is important to amend the legislation to include the suggestions we present today.

I appreciated the opportunity to testify before you about Alzheimer's disease in the fall of 2009. As you recall, the topic of early-onset Alzheimer's was discussed at length at that hearing. While there are few national statistical studies that show its prevalence, the Alzheimer's Association estimates that between 220,000 and 640,000 Americans have early onset dementia. Additionally, each year, an estimated 1.5 million Americans sustain a traumatic brain injury. According to the Brain Injury Association of America, wandering is a characteristic of individuals who have experienced brain injury, both during the recovery period and potentially for the remainder of their lives. For these reasons and because the Office of Long-Term Living represents people who are between the ages of 18 to 59, we believe it is important for emergency alert legislation to encompass any adults with cognitive impairments, not only seniors with Alzheimer's disease or dementia. As such, we recommend that the system not be called the "Senior" or "Silver" alert system but instead be called the "Endangered Adult Alert System" or something similar that does not limit the breadth of the its coverage to age and diagnosis.

We play a dual role at the Department of Aging as does the Office of Long-Term Living. We believe in self-directed care and services and in the empowerment of consumers to make their own decisions. We support consumer independence and personal choice. We attempt to balance this, at the same time, as we advocate across the board for the health and safety of aging consumers and those with physical disabilities. The legislation we are discussing today illustrates well the challenge of that balancing act. Yes, we want the public to be aware when someone with dementia, brain injury or other cognitive impairments has wandered off or eloped. We want to do all we can to encourage that people who are lost and potentially at harm be found and safely returned to the place they call home. Yet, we need to weigh those desires against the desire to honor each person's decision-making abilities and each person's right to privacy and dignity. We also have to keep in mind that some of the people who wander may not have yet been diagnosed with dementia, brain injury or a cognitive illness. Therefore, if we use diagnoses-based systems we may exclude many vulnerable individuals from coverage.

For that reason, we believe part of this discussion must acknowledge that families often tend to err on the side of caution when noticing changes in their loved ones. It is not unusual for families to contact us frightened by the changes they see. For example, we may receive a call from a daughter who has noticed changes in her mother's behavior, her confusion, and her forgetfulness. The daughter is concerned for her mother's health and safety. We ask the local Area Agency on Aging (AAA) to assess the mother and the AAA concludes that, while there may be early signs of dementia, the mother is still capable of making her own decisions and caring for herself. While her condition may change down the road, we recognize that it is important to honor what the mother wants and is capable of in her current condition.

Now imagine this same case, where the daughter stops by the mother's home and finds that her mother is not there. The daughter is concerned that her mother has wandered away and there is an alert system in place. The alert system is activated and the local community looks for this woman. But, it turns out that the woman just went to the store and then out for lunch. In the meantime, her picture and the fact that she is cognitively impaired have been broadcast throughout the community. She returns home four hours later.

How do we balance our care and concern for loved ones with respect for their right to be independent? Worse yet, what if it was a case in which the mother liked to go on trips and spend money and the daughter disapproved? What if the mother decides to take a day trip or an overnight trip? We need to respect the mother's right to do so as long as she is cognitively fit. A family member's judgment of whether their loved one is cognitively fit may be quite different from that of an objective person assessing the individual.

These concerns – the limited breadth of individuals covered by a "Senior" or "Silver" alert system and how such a system might infringe of the independence, privacy and dignity of those who are still capable of decision-making, even if those abilities are slightly diminished – are our major concerns.

One way to address this dilemma would be the creation of an actual registry of endangered adults. A registry would allow for an assessment by an objective person or entity, such as an Area Agency on Aging, a physician or mental health agency, which could identify persons at risk of wandering. With that person's permission, or the permission of their legal decision-maker, their name would be placed on a registry. Should they elope, there would be no need for a law enforcement investigation into their condition, so valuable time would be saved. A registry would allow us to avoid situations like those above where a relative or neighbor, usually with honorable intentions, oversteps into the field of diagnosis.

We believe that the most efficient and effective way to administer a registry or any type of alert system is at the local level rather than at the state agency level. When a complaint comes into the local police department, that police department (having received appropriate training on this issue) would determine how broadly to disseminate information to the media. They would notify the appropriate local entity, such as the Area Agency on Aging who would assign their Protective Services person to work on the case.

While our preference is to have an alert system that is administered locally, if that is not possible, we could be supportive of incorporating an Endangered Adult Alert System into the Amber Alert statute (see Senator O'Pake's Senate Bill 976), if specific provisions are added to include wandering adults who have cognitive impairments. The Amber Alert system already exists and has an infrastructure in place that an additional alert system could be integrated into.

One thing we would want to see included in any legislation on this topic is the provision of immunity from civil liability for Good Samaritans or the media. This is a critical provision that would encourage both the reporting of missing individuals to law enforcement and the broadcasting of such information to the public.

Two items are absent from the legislation before this committee that we strongly suggest be included. One is a provision that would require that those who are found be put into contact with an appropriate social service agency so similar elopements can be avoided in the future. The second is a provision for data collection of missing person alerts and outcomes.

Finally, while we support the intentions of both pieces of legislation, we must acknowledge that the biggest obstacle to these proposals is tight economic times. If the Department of Aging is given additional responsibilities, we will be challenged to do an effective job of carrying out the statute. Neither of these bills contain a funding mechanism to support oversight and administration of an alert system and we are not capable of adding additional workload on staff at this time without additional funding. Thank you for the opportunity to be here today and for bringing the public's attention to this important matter. I look forward to your questions and discussion.