Explaination of the “Multidisciplinary Teams Authorizations or Mandates: Provisions and Citations in Adult Protective Services Laws, by State” Chart
(Laws current as of 12/31/06)
Prepared by Lori Stiegel and Ellen Klem of the American Bar Association Commission on Law and Aging for the National Center on Elder Abuse
Copyright © American Bar Association Commission on Law and Aging (2007)
Research conducted on Westlaw compliments of West Group

The chart addresses the adult protective services (APS) laws for each state, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands. This explanation and the chart refer to these jurisdictions generically as “state” or “states.”

Unless otherwise indicated, this explanation (1) uses the term “abuse” generally to include abuse, neglect, and exploitation, and (2) uses “elder abuse” to include elder abuse and adult abuse.

CAUTION: This chart is based only on the state APS laws; APS regulations were not reviewed. It is important to recognize that there may be other state laws or regulations or federal laws or regulations that address the issue covered by this chart. For example, several states, such as California, Maine, and Texas, have laws authorizing elder abuse fatality review teams, which are a type of multidisciplinary teams (MDT). Those laws are free-standing or the pertinent provisions are part of another law. Additionally, other types of teams or councils, such as a family violence coordinating council, may address elder abuse.

NOTE: A few states have multiple laws. Some of those states have separate elder protective services (EPS) laws and APS laws, and those laws are designated in the chart by following the state abbreviation with “EPS” or “APS.” Some states have more than one APS law, and those laws are designated in the chart by following the state abbreviation with #1 or #2. Unless otherwise indicated in this explanation or the chart, both APS and EPS laws will generally be referred to as APS laws.

I. Why We Developed This Chart

Elder abuse is a complex problem requiring a multidisciplinary approach to best protect and respond to victims. As a result, many states and communities have established collaborative interventions to elder abuse, many of which involve a formal or informal multidisciplinary team. There are different types of multidisciplinary teams, and many different names for these collaborative efforts, e.g. multidisciplinary teams, interdisciplinary teams, coordinating councils or coalitions, fatality review teams, financial/fiduciary abuse specialist teams, adult protection teams, and medical response teams. Their purposes may vary to some extent, but all involve representatives of multiple disciplines working together to improve the response to victims of elder abuse.
State and federal legislative staff, other policy makers, program administrators, practitioners, educators, researchers, reporters, and others often want to know how many states have laws on MDTs and what those laws say. The “Multidisciplinary Teams Authorizations or Mandates: Provisions and Citations in Adult Protective Services Laws, by State” chart offers that information.

CAUTION: It is not necessary to have a law mandating or authorizing an MDT in order to have a team. There are many states and communities that have teams even though there is no mandating or authorizing provision in the state APS law. A law, however, may (1) make it easier to recruit MDT members, (2) enable or enhance information-sharing among the members, or (3) provide MDT members with legal protections against voluntary or involuntary disclosure to third parties of confidential information or team deliberations and records.

II. Detailed Explanation of the “Multidisciplinary Teams Authorizations or Mandates: Provisions and Citations in Adult Protective Services Laws, by State” Chart

This chart contains the following three columns:

1. **State.** This chart only includes states that have provisions on multidisciplinary teams.

2. **Mandated or Authorized.** The chart’s second column indicates whether the state’s APS statutory provision mandates or simply authorizes an MDT.

3. **Statutory Provision(s) and Citation(s).** The pertinent statutory provision(s) and citation(s) governing the establishment and role of an MDT are presented in this column. They are copied verbatim from the state laws. If a state’s law contains multiple provisions, they are separated by a line and a citation is provided for each.

III. If You Find an Error

We strived to be consistent in our interpretation and categorization of the statutes. Despite our best efforts, we may have made errors. It is also possible that APS or other professionals interpret a statute differently than we did or there are state regulations or policies that lead to a different interpretation. Additionally, state laws may have changed since December 31, 2006. If you think we erred or your state has a regulation or policy that leads to a different interpretation, please contact Lori Stiegel of the American Bar Association Commission on Law and Aging at lstiegel@staff.abanet.org or 202-662-8692.

1 The views expressed herein have not been approved by the House of Delegates or the Board of Governors of the American Bar Association and, accordingly, should not be construed as representing the policy of the American Bar Association.

2 This document was completed for the National Center on Elder Abuse and supported in part by a grant, No. 90AM2792, from the Administration on Aging, U.S. Department of Health and Human Services. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Therefore, points of view or opinions do not necessarily represent official Administration on Aging policy.