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## STATE OF MARYLAND OFFICE OF THE ATTORNEY GENERAL

## ANTHONY G. BROWN

Attorney General

January 29, 2025

The Honorable Pamela Beidle Chair, Senate Finance Committee 3 East, Miller Senate Office Building Annapolis, Maryland 21401

Re: Senate Bill 465 – Health Care Facilities - Nursing Homes and Assisted Living Programs - Video Recordings

## Dear Chair Beidle:

The Office of the Attorney General (OAG) supports **Senate Bill 465** – Health Care Facilities - Nursing Homes and Assisted Living Programs - Video Recordings.

Since 1979, the Medicaid Fraud & Vulnerable Victims Unit in the OAG has investigated and prosecuted the abuse and neglect of vulnerable adults, including older adults and those with disabilities. Studies suggest that, before the COVID-19 pandemic, as many as 1 in 10 adults aged 60 and over would experience some form of elder abuse or neglect. That number rose to 1 in 5 during the pandemic. Notably, however, even those numbers may not be an accurate reflection of the problem's true scope due to underreporting by residents fearful of retribution.

Cases involving vulnerable victims are unique and challenging. These victims cannot advocate for themselves and are often non-verbal, have dementia, or suffer from memory

<sup>&</sup>lt;sup>1</sup> Rosay, A. B., & Mulford, C. F. (2016). Prevalence estimates and correlates of elder abuse in the United States: The National Intimate Partner and Sexual Violence Survey. *Journal of Elder Abuse & Neglect*, *29*(1), 1–14.

<sup>&</sup>lt;sup>2</sup> Chang, E. S. & Levy, B. R. (2021). High Prevalence of Elder Abuse During the COVID-19 Pandemic: Risk and Resilience Factors. *The American Journal of Geriatric Psychiatry*, 29(11), 1152–1159.

<sup>&</sup>lt;sup>3</sup> Storey, J. E. (2020). Risk factors for elder abuse and neglect: A review of the literature. *Aggression and Violent Behavior*, 50, 101339.

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problems. When these victims experience unexplained injuries, the OAG's ability to investigate/prosecute their cases is hindered by the victim's inability to communicate or testify. Many of OAG's most successful cases over the past two years have been based on video evidence that captured the events that led to the injuries. The use of video to monitor common areas of long-term care facilities can provide both direct and circumstantial evidence for abuse prosecutions. It can also assist in investigations by providing information on potential witnesses and the timeframe of events in question. **Senate Bill 465** would require skilled nursing facilities and assisted living facilities to install video recording equipment in common areas of their facilities and retain the footage for at least 120 days, subject to law enforcement inspection.

Below are a few examples of cases in which video played a crucial role in obtaining justice for our State's vulnerable populations:

<u>Case 1</u>: Defendant was a trained geriatric nursing assistant licensed by the State of Maryland to care for elderly adults. The victim was a 74-year-old male, who suffered from dementia and resided at a nursing home due to his inability to care for himself. During an altercation, Defendant pushed the victim to the ground fracturing his left hip. Complications from his injuries ultimately led to his death which was ruled a homicide. The entire incident was captured by a security camera in the hallway (a common area). It not only captured the unprovoked assault, but the Defendant's actions after the fact that indicated she had little concern for the victim who was lying on the ground in agony. Defendant was sentenced to 25 years of incarceration suspend all but 7 years.

<u>Case 2</u>: Defendant assaulted a developmentally disabled resident who was attempting to leave the facility. Defendant punched the resident repeatedly in the back of the head. The event was witnessed by another worker at the facility. While the assault-in-chief was not captured on video, the events leading up to it, as well as the rough handling and bullying that occurred in the aftermath were captured by cameras in the dayroom, hallway, and over the backdoor of the facility (common areas). This video evidence corroborated the testimony of the eyewitness. The Court placed the Defendant on three years supervised probation, precluded him from working for any care provider that is funded by either a Federal or State health care program, and precluded from providing care to any vulnerable adult or child

Case 3: A school nurse found a developmentally disabled victim to have extensive bruising on her body, abrasion wounds on her abdomen, buttocks, and knees, and her scalp was red missing a small patch of hair. When the nurse removed the victim's ponytail, chunks of hair fell out. A video recording from a camera in the living area of the victim's apartment captured a portion of the assault. In the video, the caretaker grabs the victim by her feet and drags her from the couch, saying "come on go in the room so I can beat your ---." The caretaker then drags the victim by her arm towards the bedroom and uses her foot to kick her in her buttock area while she is on her hands and knees crawling into her bedroom. While off camera in the bedroom, the provider yells expletives at the victim and berates her. Two large thumps are then heard, the bedroom door slams shut. After a trial, Defendant was found guilty and sentenced to five years of incarceration, suspending all but six months.

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<u>Case 4</u>: In April of 2024, a neighbor reviewed footage from a security camera mounted on the side of her home. The video depicted an intellectually disabled man emerging from the side door of the neighboring residence and tossing a small object, later found to be a chicken bone, over the fence into the neighbor's yard. As he tosses the object, Defendant, the victim's caregiver, comes up from behind, grabs him by the shirt and throws him inside. The footage depicted Defendant hitting the victim in the head and throwing punches at the victim as he backs out of the camera's view.

By limiting the scope of this requirement to only common areas, we are avoiding the privacy concerns that have plagued prior attempts to pass laws directed at this issue. Recording of private areas is expressly addressed and prohibited in this bill. The cameras required by this bill would be placed only in public areas of a facility where residents would otherwise be in full view of staff, visitors, and other residents.

Video recording has become ubiquitous in our communities. Members of the public appear on camera hundreds of times a day. These cameras often serve to protect the people of Maryland and bear silent witness to events as they unfold. In today's criminal cases video evidence such as street cameras, body-worn cameras and even citizens using their own cellphones has become commonplace and has proven invaluable in seeking justice for victims. Our State's most vulnerable residents deserve no less protection, and no less justice. This bill will ensure that the OAG and other law enforcement agencies can continue to protect those who cannot protect themselves.

For the foregoing reasons, the Office of the Attorney General urges a favorable report on **Senate Bill 465**.

Sincerely,

Anthony G. Brown