Testimony Before the Pennsylvania Senate Aging and

Youth Committee

Presented by:

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Good morning, Chair Langerholc, Chair Collett, and members of the Senate Aging and

Youth Committee. My name is Jessica Jones, and I am the Director of the Berks County

Area Agency on Aging. I have worked at the agency for 25 years, starting my career as

a Protective Services worker in Berks County. Over the years, my role has evolved, but

my passion for this work has remained unchanged. I have always been driven by a

commitment to protect the older adults in our community. This dedication led me to

serve as the chair of the Protective Services Committee for the Area Agency on aging

network the past several years. I am also the Vice President of the Pennsylvania

Association of Area Agencies on Aging board.

I was truly grateful when I was asked to testify. I saw this as my opportunity to engage

with all of you, the key decision-makers, and address the root of our problems. I do not

want to overwhelm you with statistics and facts today; instead, I want to focus on the

human aspect of our work.

I have worked in this field for almost 30 years, and I understand that data drives our

funding and that accountability is crucial. As a director for an Area Agency on Aging

(AAA) I hold my staff to those accountabilities every day. I understand that my staff

1 | Page

encounter challenging situations and work with fragile individuals that require us to make life-altering decisions daily. They consistently strive to respect the autonomy, dignity, and self-determination of the older adults we serve. The focus should be on prevention and education to tackle issues such as financial insecurity, scams, and caregiver support and strategies.

When considering a typical case example of an 84-year-old widow who has multiple medical issues, lives alone in her own home and struggles to pay her bills, what cannot be lost is that she is a PERSON—a unique individual. Although she may be neglecting her own needs, she is still capable of making decisions and identifying her priorities. Also, it is important to note that situations like this are happening every day, and while concerning, it does not meet the standard of imminent risk. That does not mean Protective Services will not help, but in situations like this we provide support and advocacy to allow individuals to remain in their home and receive services, if they are willing. Our workers create care plans tailored to specific needs and identified priorities. While our system may have its imperfections, we remain focused on the human aspect of our work. Our workers are trained to respect and uphold the autonomy of the older adults we serve while developing strategies to support them effectively.

In reading some of the articles from Spotlight PA, I have noticed a concerning trend: the concept of autonomy seems to be overlooked. These articles often highlight the perceived failures within the AAA system, but I want to emphasize that it's easy to critique decisions after the fact and when all the facts are not known.

In the cases highlighted that occurred in Philadelphia and Erie, my perspective as a director recognizes these outcomes are indeed tragic and unfortunate. However, I've

also witnessed situations similar to these, where older adults continue to make poor decisions, and at times, we have no choice but to step back and allow them to exercise their autonomy.

I want to share a personal experience from many years ago that still resonates with me. It involves an older adult who lived with her son, who had significant mental health issues. I worked closely with her, visiting and calling regularly, in an attempt to convince her to create a plan to leave the home or evict him due to her son's troubling behaviors. However, she steadfastly refused to consider those options.

At 72 years old, she showed no signs of dementia or cognitive impairment. Despite my repeated efforts to encourage her to seek help, she continued to refuse any interventions. Tragically, one night, her son violently attacked her, putting her life at significant risk and hospitalizing her. Thankfully, she survived the incident and eventually accepted support, including the involvement of law enforcement.

I share this story because, as a Director, I often wonder how such an incident might be portrayed in a news article. We cannot force individuals to make decisions when they do not have any physical or cognitive impairments. It is also important to mention how this case illustrates a key difference between Child Protective Services and Older Adult Protective Services. The child protection system is built around the principle of dependency, allowing intervention without consent. In contrast, the older adult system is built around autonomy—balancing protection with respect for individual rights. This distinction can make intervention far more complex, even when safety is clearly at stake. Our primary role in Older Adult Protective Services is that of an investigator; we also serve as educators, advocates, and coordinators.

Although I mentioned that I wouldn't present statistics, I do need to highlight the significant influx of reports and investigations that our system continues to experience. In Berks County, our spending increased from \$1,019,587.00 in fiscal year 2016/2017 to \$1,959,503.90 in FY 24/25. This represents an increase of nearly one million dollars over the course of just eight years. This increase is necessitated by the growing costs associated with staff and services to support our expanding system. While this additional funding is backed by our block grant, it often comes at the expense of shifting funds from other important programs to enhance protective services.

The larger issue here is that reducing funding for other important programs can exacerbate the need for protective services. Unfortunately, we have developed a reactive system rather than a proactive one. This statewide challenge may be influenced by the current levels of funding support for the Area Agencies on Aging (AAAs), highlighting an opportunity for further investment in our essential services.

In closing, I would like to emphasize the need for significant updates to our system, specifically regarding the Older Adult Protective Services Act, which was established in 1987. These updates would greatly assist the AAAs in managing our Protective Services programs and enable us to conduct more efficient and comprehensive investigations. While the recent changes to the guardianship statute demonstrate your recognition of some of these issues and need for reform, they only address a small part of our daily operations.

Thank you all for your time and attention today.