

# State of Adult Protective Services Baseline Assessment - 2012

Response ID: 174 Data

## 1. State of Adult Protection Services Baseline Assessment

### 1. Respondent Information

Name of person completing this assessment : Kelly Williams

Title of person completing this assessment : Administrator Senior and Long Term Care

State : Montana

Email Address : Kewilliams@mt.gov

Telephone Number : 406-444-4147

### 2. APS Administrator Information

Name : Vacant Currently

### 3. Where is your APS Program administratively located?

Is one program in a larger state agency

### 4. 3a) Please describe other, or add any clarifying comments on how your APS program fits within your state government:

APS is part of the Department of Public Health and Human Services in the Senior and Long Term Care Division

### 4. To whom does the APS Administrator report?

The above named agency director

### 5. How is APS administered in your state?

State administered (APS employees are all state employees)

### 7. 5a) If county-administered, which county agency administers APS?

### 8. 5b) If county or locally administered, does the State APS Office have oversight responsibility for local APS? For example, does the state set policy/ provided the training and/or monitor local APS services?

6. How many full-time state positions are in the APS program: (please provide full-time equivalents (FTEs), so if you have three half-time intake specialists who only accept reports for APS, you would state that you have 1.5 full-time intake positions). "Investigators/Caseworkers" refers to your APS field staff who work directly with clients; different states use different terms.

	Number of FTEs
State Administrative Staff	2
State Training Staff	
Supervisors	6
Investigators/Caseworkers	34.75
Intake Staff	
IT Staff	
Legal Staff	
Other	

### 7. Is this an increase or decrease from the past 5 years?

Increase

11. 7a) If increased, by what percentage (approximately):

1

12. 7b) If decreased, by what percentage (approximately):

8. Do the staff listed below work in APS only?

	Yes	No	N/A
State Administrative Staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State Training Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Investigators/Caseworkers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Case Workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intake Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IT Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. 8a) If no, what other programs do they work in?

9. What, if any, are the minimal education requirements for each position?

	Minimal Education Requirements
State Admin. Staff	College Degree
State Training Staff	
Supervisors	College Degree
Investigators/Caseworkers	College Degree
IT Staff	
Intake Staff	
Legal Staff	
Other	

10. If your system is state administered, do you provide APS field staff with the following:

	Yes	No
Smart phones (iPhone, Blackberry, Android)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cell phones (phone only)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Laptops or tablet PCs	<input type="checkbox"/>	<input type="checkbox"/>
State vehicles to use for work	<input checked="" type="checkbox"/>	<input type="checkbox"/>

17. 10a) If state vehicles are not provided, are workers reimbursed for work related mileage (or public transportation fares)?

18. 10b) If yes, what is the current mileage reimbursement rate? (\$/mi.)

**11. Does your APS Program have a case review quality assurance system in place?**

Yes

**20. 11a) If yes, are all cases reviewed (check all that apply)?**

Yes, by supervisor

Cases are reviewed at more than one level (e.g. supervisor & administrator)

**12. Please provide the contact person who can provide more information about the quality controls measures**

Name : Kelly Williams

Title : Administrator

Email : kewilliams@mt.gov

Phone : 406-444-4147

**13. Does APS have regular, case level access to expertise/consultation from:**

	Yes	No
Attorneys	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Physidians	<input type="checkbox"/>	<input type="checkbox"/>
Physician Assistants and/or Nurses	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Professionals	<input type="checkbox"/>	<input type="checkbox"/>
Forensics	<input type="checkbox"/>	<input type="checkbox"/>
Accountants	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

**14. If other, please specify:**

**15. Does your APS program track annual staff turnover rates?**

No

**25. 15a) If yes, please provide any additional information you can:**

**16. Does the Program have case performance measures (benchmarks/metrics) in place (e.g. timeliness of response; supervisor involvement; recidivism rates)?**

Yes

**2. Scope of APS**

**17. What is the age range for eligible clients?**

Other (describe): Elderly or Developmentally disabled over age 18

**28. 17a) For clients aged 60+ or 65+ only, must the alleged victim be defined as vulnerable before APS can open the case or is anyone 60 years and older eligible for APS?**

**18. Your APS Program is responsible for abuse investigations in (check all that apply):**

Nursing Homes

Community Settings

Assisted Living Settings

Care Homes/Board Homes

State Developmental Disability Facilities

State Mental Illness Facilities

19. Does APS petition for guardianship in your state?

Yes

20. Do APS employees serve as guardians?

Yes

21. Does your APS program serve as representative payee for Social Security/Railroad Retirement client benefits?

No

22. The following questions are about intake:

	Yes	No
Is your intake centralized?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you have a toll free number?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

34. 22a) If yes to either above, is the APS intake line combined with another program's intake (such as CPS or aging services)?

No

23. Do you accept reports 24 hours a day?

No

36. 23a) If available 24 hours, is the line (check all that apply):

37. 23b) If no, what happens to after-hours reports?

Reporters are given message to contact law enforcement

38. 23c) Do you respond (go out on) cases 24 hours a day?

24. What is the shortest timeframe in which APS must initiate a case?

2 business days

25. Are investigation time frames triaged depending on allegations?

If Yes, describe::

26. Must APS complete investigations within a certain timeframe?

27. Must APS close cases within a specific time frame?

Yes, 90 days

28. Is there required regular contact with the victim of an open case?

44. 28a) If yes, please check all that apply:

	Daily	Weekly	Monthly
In person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
By Phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

45. 28b) If other, describe:

29. Which of the following services does APS provide to victims: (Direct=via APS personnel; Indirect=via referral to outside services)

	Yes	Yes, Indirect	Yes, both	No
Developing a case plan	✓			
Counseling			✓	
Advocacy with other systems	✓			
Money Management			✓	
Legal Interventions			✓	
In-home services				✓
Home Delivered Meals				✓
Medical Services				✓
Placement			✓	
Environmental Cleanup				✓

47. 29a) If indirectly through referrals, does APS continue monitoring the case after the referrals are made?

Yes, all cases

### 3. Budget Information

30. From the most recent state fiscal year data, please describe how much money is allocated from each funding source (answer should be dollar amount):

	State Funds	SSBG	OAA	Medicaid (TCM)	County Funds	Department of Justice	Other Local	Other	Information not Available
State	2006540	300000						420592	
County*									
Other (describe)									
Other									
TOTAL									
Amount over or under previous year. Indicate under with a minus sign.	+							-	

31. Please provide any additional budgetary information:

### 4. Report Information - Statewide Report Totals

48. For the previous year, please provide the number of statewide report totals by age of vulnerable adult if possible; by total numbers if age breakdown is not available.

	Age 60+	Age 18-59	Total
Self-Neglect			
Physical Abuse			
Emotional Abuse			
Sexual Abuse			

Neglect by others			
Financial abuse			
Other abuse (describe below)			
Total			

49. If other, please describe:

50. Is the total number of statewide reports an increase or decrease from the past 5 years?

51. 34a) If increase, by what percentage (approximately):

52. 34b) If decrease, by what percentage (approximately):

53. Please provide the number of statewide substantiated report totals by age of vulnerable adult if possible; by total numbers if age breakdown is not available.

	Number Substantiated (60+)	Number Substantiated (18-59)	Total
Self-Neglect			
Physical Abuse			
Emotional Abuse			
Sexual Abuse			
Neglect by others			
Financial abuse			
Other abuse (describe below)			
Total			

54. If other, please describe:

55. Is the total the number of statewide substantiated report an increase or decrease from the past 5 years?

56. 37a) If increase, by what percentage (approximately):

57. 37b) If decrease, by what percentage (approximately):

58. What is the statewide average caseload (including new and ongoing cases) for Investigators/Caseworkers?

59. Is the statewide average caseload per caseworker/investigators an increase or decrease over the past 5 years?

60. 39a) If increase, by what percentage (approximately):

61. 39b) If decrease, by what percentage (approximately):

62. If the program is state-administered, what is the average ratio (e.g. 1:10) of:

63. Does your state law mandate reporting of suspected adult abuse to APS?

64. 41a) If yes, is reporting mandated for:

65. 41b) If yes, in your state, who is a mandated reporter?

## 5. Case Level APS Data Collected Statewide

66. Does your state have an automated (computerized) data system for APS?

67. Does county (or local) case level data feed into the state data system?

68. Which of the following pieces of data do you collect at the state level (check all that apply)?

69. Please check all assessment tools used: (check all that apply)

70. If automated, what type of data system does your state use?

71. 46a) If purchased, from what company?

72. Is the data system APS only or integrated with other systems

73. 47a) If integrated, is it with:

74. Does the system keep track of all reports/cases involving the same client over time?

75. How recently did you adopt your automated data system?

76. Is your automated data system web based?

77. Does your automated data system allow for case notes?

## 6. Training Information

78. APS-Specific training is required by:

	Investigator/Caseworker	Supervisor
Statute		
State Policy		
Local Policy		
Not Required		
Other (explain):		

79. How much pre-service (new worker) APS-specific training is provided for investigators/caseworkers?

80. What type of content is provided in APS-specific training (check all that apply)?

81. How much in-service (existing staff) training is provided for investigators/caseworkers per year?

82. 55a) What content does APS-specific In-services training include (check all that apply)?

83. Does your program provide training for APS supervisors?

84. 56a) If yes, What content does APS-specific supervisor training include (check all that apply)?

85. How is the majority of your APS training provided?

If more than one method is used to train, please check all the methods that apply (e.g. classroom and online)

	Investigator/Caseworker (Pre-Hire, pre-service)	Investigator/Caseworker (Ongoing, in-service)_	Supervisor
Directly by APS Program Staff			

Via contract with University or other entity*			
In a classroom			
Online (e-learning)			
On the Job			
Other**			

**86. Specify**

87. Do you have APS specific/dedicated trainers?

88. Is there a certification process?

89. 60a) If yes, is certification based on testing?

90. What is the annual training budget?

## 7. Multidisciplinary Teams

91. Does APS participate on multi-disciplinary teams?

92. 62a) How many multi-disciplinary teams within the state does APS participate in (estimated)?

93. 62b) Are multi-disciplinary teams required by:

94. 62c) How are multi-disciplinary teams funded?

95. 62d) If multi-disciplinary teams receive federal funding, please check all that apply:

96. 62e) What organizations/professionals regularly participate in multi-disciplinary teams?

97. 62f) What is the purpose of this multi-disciplinary work?

98. Are there elder fatality review teams in place in your state?

99. 63a) If yes, please provide the locations and contact information for the primary coordinator, if available.

100. Has your program executed agreements to facilitate cross-county, cross-state or interagency cooperation?

101. 64a) What form of agreements has your program entered into (check all that apply)?

102. How much of a barrier are confidentiality restrictions to multi-disciplinary and interagency work?

103. Is APS required to report cases to law enforcement?

104. 66a) If yes, in which cases do you report to law enforcement?

105. Does your state have an APS abuser registry?

106. 67a) If yes, is the abuser registry required by state statute?

107. 67b) If yes, is the abuser registry:

108. 67c) other registries

109. 67d) What is the annual budget for the registry?

110. 67e) Who can be contacted for more information about the registry?

111. 67f) What due process does APS afford the alleged perpetrator and victim?

	Perpetrators	Victims
Notification of allegations		
Notification of substantiation decision		
Right to appeal		
Hearing		
Other		

112. 67g) If other, please describe:

113. Has your APS program conducted any broad-based, multi-faceted public awareness campaigns (e.g., billboards, public service announcements, etc. – not just program brochures)?

114. 68a) If yes, do you have any World Elder Abuse Awareness Day (WEAAD) materials or activities developed?

115. 68b) If yes, please provide contact information for the person we can follow-up with to learn more information:

116. If your state published an annual APS report, please provide a link:

### 8. Open Ended

117. What are the three biggest improvements your APS program has implemented in the past five years?

118. What are the three biggest challenges facing APS in your state?

119. Is there anything you want to tell us about your APS Program which we failed to ask?

### Response Location

Region:	United States
Region:	MT
City:	Helena
Postal Code:	
Long & Lat:	Lat: 46.641102, Long:- 112.0681