Doing More with Less
Replicable, Innovative and Cost-Saving Measures in Adult Protective Services

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About NAPSA

- Goal of NAPSA is to provide adult protective services (APS) programs a forum for sharing information, solving problems, and improving the quality of services for victims of elder and vulnerable adult mistreatment.
- The national voice of vulnerable adults and APS programs and professionals
- 900+ members from every state
- Hosts the only national annual conference on elder and vulnerable adult abuse and APS
Membership at NAPSA

- Networking Opportunities
- Monthly Newsletter
- Annual Conference Registration Discount
- Member Listserv
- Periodic Member-Only Webinars
Annual Conference

27th Annual NAPSA Conference
PROTECT | PREVENT | EMPOWER
August 29 – 31, 2016
7th Annual Summit on Elder Financial Exploitation
September 1, 2016

Primary Conference Partner
Pennsylvania Department of Aging
Loews Hotel | Philadelphia, PA
WORLD ELDER ABUSE AWARENESS DAY
2ND GLOBAL Summit

KEYNOTE: SILVIA PEREL-LEVIN
International Longevity Centre Global Alliance and Chair, UN NGO Committee on Ageing-Geneva

LORI SCHOCK, Director, Office of Investor Education and Advocacy, SEC
ELAINE DRAPER, Director of Accessibility & Inclusion, Barclays UK
COREY CARLISLE, Senior Vice President, American Bankers Association
KATHY GREENLEE, Undersecretary for Aging, Administration for Community Living

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11th Anniversary | Thursday, June 16, 2016 | Washington, DC
Securities and Exchange Commission (SEC) Building | 100 F Street, NE
About the NAPSRC

- Two 2-year grants funded by the Administration for Community Living/Administration on Aging
  - Expired January 31, 2016
- NAPSRC has the first federal funding specifically designated for APS
- Goal was to enhance the quality, consistency, and effectiveness of elder abuse APS prevention by identifying APS secondary prevention best practices, and compiling and disseminating the lessons learned.

The National Adult Protective Services Resource Center (NAPSRC) is a project (No. 90ER0003) of the Administration for Community Living, U.S. Administration on Aging, U.S. Department of Health and Human Services (DHHS), administered by the National Adult Protective Services Association (NAPSA). Grantees carrying out 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 or DHHS policy.
New APS Resource Center

- Funded via subcontract under National Adult Maltreatment Reporting System - first national database of state adult protective services program data
- Formal programmatic technical assistance begins autumn 2016
About the Project/Report

- Project aim was to investigate cost-effective and promising practices in APS
- Since there has historically been no federal “home” for APS, peer support is very important
- Over 40 programs/practices were submitted from across the US
- Team of peers selected the programs to focus on
Programs Selected

Site Visits
- New York City Human Resources Administration
- Philadelphia Corporation for Aging
- Maryland Department of Human Resources
- Fairfax County (VA) Dept. of Family Services
- Sacramento (CA) County Senior and Adult Services

Phone Interviews
- Alaska Division of Seniors & Disabilities Services
- Massachusetts Disabled Persons Protection Commission
- Florida Department of Children & Families
- New York City Elder Abuse Center at Weill Cornell
Let’s Play…

True Or False?

Highlights from the 2012 Survey of State Adult Protective Services Programs

www.napsa-now.org/baselinesurvey
Most APS programs investigate cases of abuse involving individuals age 18+

True or False?

True

Only 14% of programs DO NOT investigate cases of abuse involving those 18-59 (n=51)
Half of APS Programs DO NOT investigate abuse in nursing homes.

TRUE

45% investigate in nursing homes
59% investigate in assisted livings
69% investigate in board/care homes
41% investigate in DD facilities
39% investigate in MH facilities
Most APS programs have centralized (state-level) intake/reporting.

False

Only half (50%) of APS programs have centralized intake (n=50)
Several states report average caseloads of over 100 clients per investigator.

10% of respondents reported average caseloads of over 100 clients.

TRUE
NYC Human Resources Administration

- Largest metropolitan APS office in the US
- Receives more than 1500 reports each month
- 220 Caseworkers in seven separate offices (North Manhattan, South Manhattan, North Brooklyn, South Brooklyn, Bronx, Queens, Staten Island)
- Averages 7,000 active APS cases at any given time
Prevention Services Program (PSP)

- Begun 10 years ago
- Enrolls clients whose cases have been investigated and stabilized with services
- Uses volunteer “Contact Person” for each client who reports to the caseworker on client status monthly
- PSP Caseworker visits client on a quarterly basis
- Each PSP caseworker maintains a caseload of up to 55 clients
- PSP caseworkers work exclusively with PSP consumers (i.e. do not investigate new cases) for an indefinite period
PSP Contact Person

- Most important part of the program
- Defined as “stable and involved family members, friends, or agency representatives who see the client (or receive reports from other agency staff) at least once a month.”
- Cannot be anyone alleged to have been involved in abuse, neglect or exploitation
- Typically staff at an agency working with consumer, a neighbor or a family member
Benefit of PSP

- Can stabilize cases known for coming back to the system repeatedly
- Less restrictive than guardianship
- Helps decrease incidence of eviction, which accounts for >50% of NYC cases
Philadelphia Corporation for Aging

PCA

PHILADELPHIA CORPORATION FOR AGING™
Philadelphia Corporation for Aging

- Area Agency on Aging based APS program
- Staff of 20 investigators with 2000 APS cases per year
- Only investigates cases of those age 60+
Philadelphia Corporation for Aging

Focused on enhancing response to financial exploitation

- Financial Exploitation Specialist
- Financial Exploitation Prevention Taskforce
Financial Exploitation Specialist

- Caseworker/Investigator position
- Only handles exploitation cases referred by other Philadelphia APS caseworkers
- Specialist has established relationships with local financial institutions (central access point)
Financial Exploitation Prevention Taskforce

- Private & public members
  - Local prosecutors
  - APS
  - Financial Institutions

- Education, awareness, collaboration and systemic issues (primary emphasis)

- Also engages some case review when necessary (secondary emphasis)
Financial Exploitation Prevention Taskforce

- Presentations by experts (example - “gypsy scams” presentation by law enforcement)
- Group discussed bank branch closure impact on older adults
- Establishes relationships among agencies
Sacramento County Department of Health and Human Services

- Private-Public partnership with area hospitals
  - Sutter Medical Center
  - Kaiser Permanente Medical Center
- Each hospital contributes $25,000 toward the APS budget
- Each hospital has a dedicated APS worker
Sacramento County Department of Health and Human Services

- All medical center personnel deal with their appointed APS staff person
- Cases that would have entered the system anyway (does not include change in intake criteria)
- Majority referred by the emergency departments
- Cases are followed for up to six months
Sacramento County Department of Health and Human Services

- 24 hour to 3 day response instead of statutory 10 day response for California
- 63% decrease in usage of hospital services in sample of 33 clients
- Stronger relationship between APS and hospitals
- Hospitals and APS both positive about the program
- Program discontinued due to lack of funding
Project Findings

- APS clients are remarkably similar in every location. Based on the home visits conducted, APS clients seem to be very much alike although in different parts of the country.

- APS services are also fundamentally similar, although they may be provided through different administrative structures with varying levels of resources.

- All rely on highly skilled social workers, are client-focused, resourceful in problem-solving, persistent, and trying to provide the most effective services in the most efficient manner possible.
Project Findings

- Multi-disciplinary cooperation is at the heart of APS work, whether it is accomplished formally through established multi-disciplinary teams, or done informally

- Faced with ever increasing caseloads as well as increased case complexity APS staff have worked to insure that services to clients are affected as minimally as possible

- APS must focus on helping their staff cope with the increased workloads and the difficult nature of APS work
Innovative Practices in APS

- Brand new report from 2\textsuperscript{nd} NAPSRC grant
- Practices collected through surveys, interviews and on-site business
- The practices were in 6 categories:
  1. Increasing efficiency and worker effectiveness through:
     - videoconferencing
     - making training more accessible
Innovative Practices

- Protecting worker safety
- Checklists, standardizations, resource specialists

2. Improving reporting capacity
   - Online reporting
   - Streamlined intake processes
   - App for reporting
Innovative Practices

3. Strengthening client services
   - Structured Decision Making (SDM)
   - Tool for Risk, Interventions and Outcomes (TRIO)
   - Improved capacity assessments
   - Emergency funds and services
   - Expert consultants
   - Coordinating plans for children aging out of foster care
Innovative Practices

4. Preventing abuse – NYC programs

5. Addressing financial exploitation:
   - Oregon Bankers Project updated
   - Philadelphia citywide taskforce/MDT
   - Specialized staffs and units

6. Working collaboratively:
   - Specialized MDTs
   - Co-location of various professionals
   - Age-friendly and dementia-friendly efforts
Recommendations

1. **Peer Support** - To enable APS programs throughout the country to grow and improve, they must be able to learn from one another; therefore, ongoing support to facilitate communications and peer support among APS programs is necessary.

2. **Multidisciplinary Approach** – Nearly all of the programs profiled in this report utilize a multidisciplinary approach, often in very unique ways.

3. **Specialization** - APS programs provide services to a very diverse population with even more diverse needs.
Recommendations

4. **Flexibility** – The use of technology and non-traditional work environments has served many of these programs well. Rethinking the way they work has paid off both from a budget and service standpoint.

5. **Data Collection** - Efforts must continue to expand the ability to collect data by and about APS programs
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Innovative APS Practices from the Field

available at www.napsa-now.org/promisingpractices
These Slides Available At

www.napsa-now.org/AiA16
Thank You!

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