State of Adult Protective Services Baseline Assessment - 2012

Response ID: 206 Data

1. State of Adult Protection Services Baseline Assessment

1. Respondent Information

Name of person completing this assessment: Doris Ball

Title of person completing this assessment: Director, Adult Protective Services, Dept. of Human Resources

State: Alabama

Email Address : doris.ball@dhr.alabama.gov

Telephone Number: 334 242-1350

2. APS Administrator Information

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 Human Resources which also administers child protective services, food assistance, public assistance and child support programs

4. To whom does the APS Administrator report?

Other (describe): Deputy Commissioner Dept of Human Resources

5. How is APS administered in your state?

Other (describe): State employees County Supervised

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 | 10 |
| State Training Staff | |
| Supervisors | 14.5 |
| Investigators/Caseworkers | 87 |
| Intake Staff | |
| IT Staff | unk |
| Legal Staff | unk |
| Other | |

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

Decrease

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

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

10

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

| | Yes | No | N/A |
|----------------------------|-----|----------|----------|
| State Administrative Staff | 0 | | |
| State Training Staff | | | Ø |
| Supervisors | | Ø | |
| Investigators/Caseworkers | | 0 | |
| Case Workers | | | |
| Intake Staff | | Ø | |
| IT Staff | | 0 | |
| Legal Staff | | 0 | |
| Other | | | |

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

CPS

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 | College Degree |
| 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) | | Ø |
| Cell phones (phone only) | | Ø |
| Laptops or tablet PCs | | 0 |
| State vehicles to use for work | | 0 |

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

Yes

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

\$55 a mile

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

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

Name : Tonia Bell Title : Program Manager

Email: tonia.bell@dhr.alabma.gov

Phone: 334 353-7640

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

| | Yes | No |
|------------------------------------|----------|----------|
| Attorneys | Ø | |
| Physicians | Ø | |
| Physician Assistants and/or Nurses | Ø | |
| Mental Health Professionals | Ø | |
| Forensics | | Ø |
| Accountants | | Ø |
| Other | | |

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?

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):

Community Settings

Assisted Living Settings

Care Homes/Board Homes

19. Does APS petition for guardianship in your state?

| Yes | | |
|--------------------------------------|-----------------------|--|
| 20. Do APS employees | s serve as guardiar | ns? |
| No | | |
| 21. Does your APS pro | ogram serve as rep | resentative payee for Social Security/Railroad Retirement client benefits? |
| 22. The following que | stions are about in | take: |
| | Yes | No |
| Is your intake central | lized? | |
| Do you have a toll fr | ee number? | |
| 34. 22a) If yes to eithe services)? | er above, is the APS | S intake line combined with another program's intake (such as CPS or aging |
| No | | |
| 00 December 1 | | • |
| 23. Do you accept repo | orts 24 nours a day | ? |
| 36. 23a) If available 24 | hours, is the line | (check all that apply): |
| Staffed | | |
| Leave message | | |
| 37. 23b) If no, what ha | appens to after-hou | rs reports? |
| 38. 23c) Do you respor Yes | nd (go out on) case | es 24 hours a day? |
| 24. What is the shorte | est timeframe in wh | nich APS must initiate a case? |
| Other (explain): imme | ediate when serious | threat to health and safety |
| 25. Are investigation | time frames triaged | d depending on allegations? |
| If Yes, describe:: imme | ediate or within 7 da | ys |
| 26. Must APS complet | te investigations w | vithin a certain timeframe? |
| Yes, 60 days | | |
| 27. Must APS close ca | ases within a speci | ific time frame? |
| No | | |
| 28. Is there required r | egular contact with | n the victim of an open case? |
| | | |
| 44. 28a) If yes, please | | y: |
| | Weekly Monthly | |
| In person | | |
| By Phone | | |
| Other | 0 | |
| 45, 28h) If other, descri | rihe: | |

face to face at least every 3 months but as often as requried by the circumstances

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 | 0 | | | |
| Counseling | | Ø | | |
| Advocacy with other systems | 0 | | | |
| Money Management | | Ø | | |
| Legal Interventions | 0 | | | |
| In-home services | | Ø | | |
| Home Delivered Meals | | Ø | | |
| Medical Services | | Ø | | |
| Placem ent | Ø | | | |
| Environmental Cleanup | | Ø | | |

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

Yes, some 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 | .49 million | 12.7 million | | 1.2 million | | | | | |
| County* | | | | | | | | | |
| Other (describe) | | | | | | | | | |
| Other | | | | | | | | | |
| TOTAL | | | | | | | | | |
| Amount over or under previous year. Indicate under with a minus sign. | | | | | | | | | |

31. Please provide any additional budgetary information:

Basically level funded from Fy 10

4. Report Information - Statewide Report Totals

32. 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 | | | |

| ~~ | | - 4 1 - | | | ease | | | |
|------|-----|-------------|----|----|-------------|-----|-----|----|
| -2-2 | IT. | α th | Ωr | nı | A2CA | MAG | cri | na |
| | | | | | | | | |

5851 total ANE reports and preventions

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

Increase

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

10

- 52. 34b) If decrease, by what percentage (approximately):
- 35. 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 | | | |

36. If other, please describe:

Not currently available

- 37. 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):
- 38. What is the statewide average caseload (including new and ongoing cases) for Investigators/Caseworkers?

33

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

Increase 60. 39a) If increase, by what percentage (approximately): 10 61. 39b) If decrease, by what percentage (approximately): 40. If the program is state-administered, what is the average ratio (e.g. 1:10) of: Supervisors to Investigators/Caseworkers: 1 to 6 41. Does your state law mandate reporting of suspected adult abuse to APS? Yes 64. 41a) If yes, is reporting mandated for: All vulnerable adults aged 18+ 65. 41b) If yes, in your state, who is a mandated reporter? Law Enforcement Health care professionals Other (describe): long term care ombudsman 5. Case Level APS Data Collected Statewide 42. Does your state have an automated (computerized) data system for APS? Yes 43. Does county (or local) case level data feed into the state data system? Yes 44. Which of the following pieces of data do you collect at the state level (check all that apply)? Number of reports Individual allegations Reporter type (family, neighbor, social worker, etc.) Victim age Victim gender Victim Ethnicity Victim's residence type (home; senior housing; assisted living; board and care; foster care; nursing home, etc.) Relationship of victim to abuser Abuser age Abuser gender Abuser relationship to victim Risk assessment Interventions offered/provided Days case remains open Reason for case closure Client Outcomes 45. Please check all assessment tools used: (check all that apply)

State specific tool

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

Purchased from outside vendor (may have been customized for your state)

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

| s the data sys | tem APS only or integrate | ed with other: | systems |
|--|-----------------------------------|----------------|---------------------------------|
| tegrated with oth | | | |
| . 47a) If integrat | ed, is it with: | | |
| Child Protective S | ervices | | |
| Does the syste | m keep track of all reports | s/cases involv | ving the same client over time? |
| /es | | | |
| How recently d | id you adopt your automat | ted data syste | em? |
| 2 years ago or few | ver | | |
| . Is your automa | ted data system web base | ed? | |
| | | | |
| /es | | | |
| | omated data system allow t | for case notes | s? |
| | omated data system allow t | for case notes | s? |
| . Does your auto | omated data system allow f | for case notes | s? |
| . Does your auto | | for case notes | s? |
| . Does your auto /es Training Infor | | for case notes | s? |
| . Does your auto /es Training Infor | mation | for case notes | s? |
| . Does your auto /es Training Infor | mation raining is required by: | | s? |
| . Does your auto /es Training Information APS-Specific to | mation raining is required by: | | s? |
| . Does your auto /es Training Inform . APS-Specific to | mation raining is required by: | | s? |
| . Does your auto /es Training Inform . APS-Specific to Statute State Policy | mation raining is required by: | | s? |

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

Policy

Intake

Investigations

Casework

Worker Safety

Communications/interviewing

Legal issues

Aging Process

Disabilities Information

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

Other (describe): not specified, varies each year

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

Policy

Legal issues

| Other (describe): varies each year | | | |
|---|---|--|------------|
| 56. Does your program provide tr | aining for APS supervisors? | | |
| Yes, APS supervisors attend supe | ervisor training that is not specific to APS | 5 | |
| 34. 56a) If yes, What content does | s APS-specific supervisor training in | nclude (check all that apply)? | |
| 57. How is the majority of your A f more than one method is used | PS training provided? to train, please check all the methods | that apply (e.g. classroom and onlin | ıe) |
| | Investigator/Caseworker (Pre-Hire, pre-service) | Investigator/Caseworker (Ongoing, in-service)_ | Supervisor |
| Directly by APS Program Staff | ⊘ | ⊘ | Ø |
| Via contract with University or other entity* | | | |
| In a dassroom | ⊘ | ⊘ | Ø |
| Online (e-learning) | ⊘ | ⊘ | Ø |
| On the Job | | Ø | Ø |
| Other** | | | |
| Yes, on staff | | | |
| 0. Is there a certification proces | s? | | |
| No | | | |
| 9. 60a) If yes, is certification bas | sed on testing? | | |
| 1. What is the annual training b | oudget? | | |
| 7. Multidisciplinary Teams | | | |
| 62. Does APS participate on mult | :i-disciplinary teams? | | |
| Yes | | | |
| 92. 62a) How many multi-discipli 40+ | nary teams within the state does APS | S participate in (estimated)? | |
| 3. 62b) Are multi-disciplinary to Not required | eams required by: | | |
| 94. 62c) How are multi-disciplina | ry teams funded? | | |

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

Law Enforcement

Domestic Violence

Legal/Courts/Criminal Justice

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

| | Medical | | | | | | |
|---|---|------------------|------------|--|--|--|--|
| | Mental Health | | | | | | |
| | Developmental Disabilities Financial | | | | | | |
| Varies according to the cases under review | | | | | | | |
| 97. 62f) What is the purpose of this multi-disciplinary work? | | | | | | | |
| | case reviews (financial abuse, for example) | | | | | | |
| | public awareness | | | | | | |
| | policy initiatives | | | | | | |
| | training | | | | | | |
| 63 | 3. Are there elder fatality review teams | in place in y | our state? | • | | | |
| | No | | | | | | |
| 99 | D. 63a) If yes, please provide the locati | ons and conta | act inform | ation for the primary coordinator, if available. | | | |
| 64 | 1. Has your program executed agreeme | ents to facilita | te cross-c | county, cross-state or interagency cooperation? | | | |
| | No | | | | | | |
| 10 | 01. 64a) What form of agreements has | your program | entered i | nto (check all that apply)? | | | |
| 65 | 5. How much of a barrier are confident | iality restricti | ons to mu | ılti-disciplinary and interagency work? | | | |
| | Not a barrier | | | | | | |
| 66 | 6. Is APS required to report cases to la | w enforcemen | it? | | | | |
| | Yes | | | | | | |
| 10 | 04. 66a) If yes, in which cases do you | report to law e | nforceme | nt? | | | |
| | Cases upon being reported where there | is indication of | criminal a | activity | | | |
| | Some cases based on type or severity of | f abuse | | | | | |
| 67 | 7. Does your state have an APS abuse | er registry? | | | | | |
| | No | | | | | | |
| 10 | 06. 67a) If yes, is the abuser registry i | required by st | ate statut | e? | | | |
| 10 | 07. 67b) If yes, is the abuser registry: | | | | | | |
| 10 | 08. 67c) other registries | | | | | | |
| 10 | 09. 67d) What is the annual budget for | the registry? | • | | | | |
| 11 | .0. 67e) Who can be contacted for more | information a | about the | registry? | | | |
| 11 | 1. 67f) What due process does APS af | ford the allege | ed perpetr | ator and victim? | | | |
| | , | Perpetrators | Victims | | | | |
| | Notification of allegations | | | | | | |
| | Notification of substantiation decision | | | | | | |
| | Right to appeal | | | | | | |
| | Hearing | | | | | | |
| | | | | | | | |

Other

| 112. 67q) If other, please de | scribe |
|-------------------------------|--------|
|-------------------------------|--------|

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

No

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:

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

8. Open Ended

- 70. What are the three biggest improvements your APS program has implemented in the past five years? case management system, program assessments, training
- **71.** What are the three biggest challenges facing APS in your state? staffing, budget, lack of direct services
- **72.** Is there anything you want to tell us about your APS Program which we failed to ask? This is a great beginning. Please share results.

Response Location

| Region: | United States |
|--------------|-------------------------------|
| Region: | AL |
| City: | Montgomery |
| Postal Code: | |
| Long & Lat: | Lat: 32.3573, Long:-86.272697 |