Response ID: 227 Data

# 1. State of Adult Protection Services Baseline Assessment

#### 1. Respondent Information

Name of person completing this assessment : Valarie Colmore Title of person completing this assessment : Program Specialist State : Maryland Email Address : vcolmore@dhr.state.md.us Telephone Number : 410.767.7475

#### 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:

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

A subordinate of 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	
State Training Staff	
Supervisors	
Investigators/Caseworkers	
Intake Staff	
IT Staff	
Legal Staff	
Other	457

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):

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

. Do the start instea below work in Ar 5 only:					
	Yes	No	N/A		
State Administrative Staff		0			
State Training Staff			0		
Supervisors		Ø			
Investigators/Caseworkers		Ø			
Case Workers					
Intake Staff		0			
IT Staff			0		
Legal Staff			0		
Other			0		

#### 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	MSW
State Training Staff	MSW
Supervisors	MSW
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)		0
Cell phones (phone only)		0
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)?

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

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

Name : Valarie Colmore Title : Program Specialist Email : vcolmore@dhr.state.md.us Phone : 410.767.7475

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

	Yes	No
Attorneys	Ø	
Physicians	Ø	
Physician Assistants and/or Nurses	0	
Mental Health Professionals	0	
Forensics	0	
Accountants		0
Other		Ø

#### 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

19. Does APS petition for guardianship in your state?

Yes

20. Do APS employees serve as guardians?

No

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?		0
Do you have a toll free number?	0	

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

23. Do you accept reports 24 hours a day?

Yes

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

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

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?

24 hours

#### 25. Are investigation time frames triaged depending on allegations?

If Yes, describe:: By use of a Risk Screening Tool.

#### 26. Must APS complete investigations within a certain timeframe?

Yes, 30 days

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

Yes, 30 days

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

Yes

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

	Daily	Weekly	Monthly
In person			
By Phone			
Other			

#### 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	0			
Counseling		0		
Advocacy with other systems		0		
Money Management		0		
Legal Interventions		0		
In-home services		0		

Home Delivered Meals	<b>Ø</b>	
Medical Services	0	
Placement	<b>Ø</b>	
Environmental Cleanup	0	

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

## 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	2,527,722	4,762,847		169,869					
County*	336,116								
Other (describe)									
Other	618,254							159,555	
TOTAL	2,863,838	4,762,847		169,869				159,555	
Amount over or under previous year. Indicate under with a minus sign.									

#### 31. Please provide any additional budgetary information:

Explanations for "Other": TANF \$159,555.00 Title IV-E \$618,254.00 Overall Total Budget for APS: \$8,574,363.00

## 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			6,579

#### 33. If other, please describe:

At time of this survey, data not available for breakdown of age categories. Data listed is total APS Investigations received for

#### 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):

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			6,579

#### 36. If other, please describe:

At time of this survey, data not available for breakdown of age categories. Data listed is total APS Investigations received for Fiscal Year 2011 - Sexual Abuse, Physical Abuse, Self-neglect, Neglect, Sexual & Financial Exploitation

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

Increase

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?

- 39. 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):

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

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

Yes

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

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

#### 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?

Not applicable

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

Number of reports Individual allegations Victim age Victim gender Victim Ethnicity Victim's residence type (home; senior housing; assisted living; board and care; foster care; nursing home, etc.) Days case remains open Reason for case closure

#### 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?

Built by state personnel

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

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

Integrated with other systems

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

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

Yes

#### 49. How recently did you adopt your automated data system?

more than 10 years ago

#### 50. Is your automated data system web based?

No

#### 51. Does your automated data system allow for case notes?

No

## 6. Training Information

#### 52. APS-Specific training is required by:

	Investigator/Caseworker	Supervisor
Statute		
State Policy	0	0
Local Policy		
Not Required		
Other (explain):		

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

Less than one week (number of hours): 12

#### 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): In-Service Training offered but not a requirement to attend a typical day of training is 6.0 Hours.

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

#### 56. Does your program provide training for APS supervisors?

#### No

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

#### 57. 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	0	0	0
Via contract with University or other entity*	0	0	0
In a dassroom	0	0	0
Online (e-learning)			
On the Job			
Other**			

#### 58. Specify

\*entity : University of Maryland, School of Social Work

#### 59. Do you have APS specific/dedicated trainers?

Yes, contractual trainers

#### 60. Is there a certification process?

No

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

#### 61. What is the annual training budget?

Total: \$78,558.00

# 7. Multidisciplinary Teams 62. Does APS participate on multi-disciplinary teams? Yes 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?

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

Yes

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

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

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

**65.** How much of a barrier are confidentiality restrictions to multi-disciplinary and interagency work? Not a barrier

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

Yes

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

67. Does your state have an APS abuser registry?

No

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		

112. 67g) If other, please describe:

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)?

Yes, campaign done with other agencies (e.g. an elder abuse coalition)

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?

The following improvements are applicable to all of Maryland's Adult Services programs including APS: 1) Adult Services Policy and Practice Initiative - an Office of Adult Services (OAS) initiative developed in conjunction with the University of MD School of Social Work, and project consultant Roger Friedman, PhD, with input from local Department administrators and supervisors. The initiative promotes a Caseload Priority Analysis approach to case management of vulnerable adult dients, in order to reduce long term dependency of these dients on the Department, hone the focus of the provision of Adult Services, and strengthen the effectiveness of our service delivery and use of staff. This practice model will: • Reduce the number of "chronic" Adult Services cases; • Reduce the duration of service intervention for Adult Services cases; and • Increase the engagement of other formal and informal community partners in meeting the adult clients' needs, so that they are not the sole responsibility of DHR. (2) Adult Services Risk Screening Tool - for the first time, Office of Adult Services has developed and piloted a standardized tool for all local Department of Social Services Adult Services screeners to do a preliminary assessment of risk of harm when referrals are received by Adult Services. This Risk Screening Tool is now being used at the local Dept. level across the state, but we need a mechanism to collect data to determine whether the tool is effectively helping staff make appropriate triage decisions when accepting referrals for service. The Social Services Administration and some local Dept. staff have identified an Access data base as an available mechanism to collect the data we need. This data collection mechanism is needed because: • Adult Service programs are not a part of Chessie (Child Welfare Data Information System) • The "Client Information System" (CIS) that we currently use is very unsophisticated and does not have the capacity to provide the type of data we need for this endeavor. • An Access-based system would enable local Adult Service staff to enter information and generate reports and forms on line, which would save worker time from completing multiple and duplicative forms, while providing OAS with the data needed. (3). The Office of Adult Services and the DHR Office of the Attorney General has developed a mandatory refresher training for local Department of Social Services Adult Public Guardianship staff, including Guardians, Guardians' Designees, Local Agency Legal Counsel, Adult Public Guardianship Administrators, Supervisors and Direct Service staff. This training will be conducted from both a policy and legal perspective. The training will focus on four key areas: 1). Legal liability issues, including issues of financial support, 2). Federal and state immigration laws (benefits and services), 3). Strategies for promoting other surrogate decision makers as an alternative to public guardianship when working with the courts, hospitals, etc., and 4). Developing training presentations for use by staff to educate their local public and private partners on the purpose, role and limitations of Adult Public Guardianship. The format will consist of power point presentations, dialogue, and discussion of three to four actual case scenarios.

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

The following items listed are just a few challenges that APS encounters while providing services to Maryland's most vulnerable elderly and disabled adult citizens: (1). Difficulty in working with a number of hospital discharge planning units/staff seeking to utilize APS and Adult Public Guardianship, as a means in expediting an emergency discharge for problematic placement of vulnerable adults into a safe community residential setting. (2). APS works with clients that are severely mentally ill, with Traumatic Brain Injury (TBI) or exhibit violent behaviors. These clients are difficult to place in suitable residential placements within the community or when seeking appointment of a guardian by the courts. (3). Working with severe cases of self-neglect and hoarding cases. In most of these types of cases clients are non-compliant with medical treatment or mental health services. In addition to, prosecution of financial exploitation or abuse cases where the elderly victim is competent, however, is afraid or refuses to cooperate with local law enforcement or State's Attorney Office to pursue charges against the

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

A few survey question suggestions for future consideration: (1). APS relationship in working with the Developmental Disabilities population. (2). APS & CPS cross-training or investigation efforts (especially working with aging out foster care clients). (3). APS working with illegal or immigrant populations and issues with human trafficking cases.

# **Response Location**

Region:	United States
Region:	MD
City:	Baltimore
Postal Code:	21201
Long & Lat:	Lat: 39.3181, Long:-76.613998