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

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About NAPSA

- Formed in 1989, the 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.

- Its mission is to strengthen the capacity of APS at the national, state, and local levels, to effectively and efficiently recognize, report, and respond to the needs of elders and adults with disabilities who are the victims of abuse, neglect, or exploitation, and to prevent such abuse whenever possible.
About NAPSA

Current Committees

- **Public Policy**
  - advocacy for national legislation, policies and increased funding
  - education of policy makers
  - promoting public knowledge

- **Education**
  - developing educational content for APS programs
  - disseminating professional training materials
  - promoting training opportunities for APS programs
  - developing, maintaining and disseminating Standards of Practice, and
  - developing and providing guidance in an advisory capacity for a national certificate program.
About NAPSA

Current Committees

- **Research**
  - supporting research to better understand and respond to abuse, neglect, self-neglect, and exploitation as they may affect older persons or adults with disabilities
  - expanding APS's participation in practice-related research.

- **Communications**
  - advancing NAPSA’s mission and strategic goals related to marketing and communications
  - promoting the quality and consistency of NAPSA’s internal and external branding and messaging
About NAPSA

Current Committees

- **Membership**
  - working to expand NAPSA membership
  - expanding member and non-member involvement with the organization
  - identifying unaddressed needs of current members

- **Conference**
  - Via subcommittees, works to plan the annual NAPSA conference attended by 600 professionals each year
    - Presentations
    - Awards
    - Scholarships
    - Entertainment
    - Sponsors
About NAPSA

Regional Representatives
About the NAPSRC

- Two year grant funded by the Administration for Community Living/Administration on Aging
  - Expires January 31, 2016
- NAPSRC has the first federal funding *specifically designated* for APS
- [www.napsa-now.org/napsrc](http://www.napsa-now.org/napsrc)
- Goal “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,” and providing targeted technical assistance to APS administrators.”
About Me

- Have worked in social services in vulnerable adult abuse for 15 years
- Former adult protective services caseworker and program administrator in Ohio
- Worked at the national level five years, formerly with the National Center on Elder Abuse
About the Project/Report

- Project aim was to investigate cost-effective and promising practices in APS
- Since there is 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

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 or False?

**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.

TRUE

10% of respondents reported average caseloads of over 100 clients.
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
- Two practices focused on in the report
  - Prevention Services Program
  - Financial Management Services
Prevention Services Program (PSP)

- Begun appx. 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
- 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 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
PSP2 Program

- Variation on the original program
- Begun in 2012
- Do not use a Contact Person
- Caseworker must visit client every other month
- Best for consumers that have no one who can serve as a Contact Person
Financial Services Management (FSM) Program

- Also been in place for over 10 years
- APS serves as Social Security representative payee
- FSM unit consists of 20 staff
- HRA accepts client income and expends funds for rent, bills, insurance, etc.
- An annual budget is completed with each client
Financial Services Management (FSM) Program

- Agency uses a very sophisticated software package
- Maintains a savings account for each client for unforeseen expenses
- Client receives remaining funds via check, deposit or cash from caseworker
Benefits of PSP and FSM

- Can stabilize cases known for coming back to the system
- Less restrictive than guardianship
- Helps decrease incidence of eviction, which accounts for >50% of NYC cases
Philadephia 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
- Utilize a Certified Public Accountant volunteer
Financial Exploitation Specialist

- Caseworker/Investigator position
- Only handles exploitation cases referred by caseworkers
- Current staff in position has a law enforcement background
- Has established relationships with prominent local institutions (central access point)
Financial Exploitation Prevention Taskforce

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

- Engages case review (not primary emphasis)

- Education, awareness and collaboration (primary emphasis)
Recent meeting focused on “gypsy” scams
- Presentation by state police investigator
- Group discussed bank branch closure impacts on older adults
- Establishes relationships among agencies
Volunteer Certified Public Accountant

- Referred by caseworkers and specialist
- Review of more complicated financial arrangements
- Better able to track and locate exploitation patterns
- NOTE – PA has statute that allows APS access to records
Maryland Department of Human Resources
Maryland Department of Human Resources

- As of 2013, no increase in funding since 2008
- In 2009, DHR began the Adult Services Policy and Practice Initiative (ASPPI)
  - caseload priority analysis
  - realigning practice to family and community based practice
  - developing resilience to vicarious trauma
- Developed measurable outcomes for each focus area
Caseload Priority Analysis

- Focus primary intervention efforts toward cases with the most need
- Victims assessed with higher risk levels are given priority within a caseload with the goal of stabilization
- State-developed risk assessment
- Systematic review put in place at specific intervals
- Monitors chronic repeat cases as well as case plan goals
Realigning practice to family and community-based

- Prior to ASPPI, were often working with cases long term
- Services were transitioned to external informal and formal support systems, when appropriate
- Measureable outcomes include:
  - A documented increase in family and community involvement, an increase in service plans that reflect community involvement, and
  - a documented increase during intervention and assessment periods in the number of contacts made to family and the community on behalf of a client.
Developing resilience to vicarious trauma

- Vicarious trauma occurs when an individual who was not an immediate witness to the trauma absorbs and integrates disturbing aspects of the traumatic experience into his or her own functioning (Wendt Center for Loss and Healing, 2011)

- DHR developed resources, procedures and policies that target vicarious trauma and its effects
Additional Info

- System first piloted in seven offices across the state
- “Change Teams” helped the transition and included staff at all levels of organization
- Strategy allowed for better buy-in among all staff
- Decreased the time needed to intervene and refocused where the attention is given
Fairfax County Department of Family Services
Fairfax County Department of Family Services

- County administered system
- County APS staff of 22
- Fairfax County is suburban Washington, DC
- Despite a median income of $100K+, experienced budget cuts
- Utilize a nurse practitioner and a psychologist to provide in-home assessment services (assessment only)
Licensed Psychologist

- Completes assessment in the client’s home, which provides opportunity for better observation
- Report is issued to APS that could include intervention options such as guardianship
- Provides a high degree of credibility and certainty to the decision to pursue guardianship
Nurse Practitioner

- Completes assessment in the client’s home, which provides opportunity for better observation
- Report includes assessment of complicated medical conditions that may be difficult for APS social workers
- Nurse provides consultation during staffing of cases and is available to testify in court
Sacramento County
Department of Health and Human Services
Sacramento County Department of Health and Human Services

- California is the only state with 100% county supervised and administered APS programs
- Only one state APS staff (new)
- Has very strong county programs
Sacramento County Department of Health and Human Services

- Private-Public partnerships 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
- 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 – 3 day response instead of statutory 10 day response
- 63% decrease in usage of hospital services in sample of 33 clients
- Stronger relationships
- Hospitals and APS both positive about the program
- Advisory group meets regularly
Additional Noteworthy Programs

Alaska Department of Health and Social Services
Senior and Disabilities Services

Florida Department of Children and Families
MyFLFamilies.com

NYC Elder Abuse Center
Professionals serving older adults

NAPSA NATIONAL ADULT PROTECTIVE SERVICES ASSOCIATION
Alaska Division of Senior & Disabilities Services

- Alaska is HUGE – 663,300 square miles (more than twice the size of Texas)
- There are 11 APS investigators for the entire state
- Travel eats up many resources and includes air travel
- Weather is an obvious issue
- Have instituted “community designees” to ascertain health and welfare of clients (nurses, law enforcement, etc.)
- Also use video conferencing via internet and satellite
  - Meetings among staff
  - Assessment of clients
Massachusetts Disabled Persons Protection Commission

- Independent state agency responsible for protecting adults with disabilities who are age 18-59
- MA is one of two states with a bifurcated APS system – separate agencies for younger and older adults (LA is the other)
- Law enforcement is co-located/housed within the APS program
  - Five officers are mandated by statute
  - Employed by MA State Police
  - Regularly conducts joint investigations with APS staff
  - Advantageous to have law enforcement and social services in the same office
Florida Department of Children and Families

- State with the largest number of older adults
- Employees use mobile computer equipment
- Utilize “hoteling” - Hoteling is a method of supporting unassigned seating in an office environment
  - Most APS professionals spend majority of time in the field
  - Hoteling allows for work wherever the staff are located
  - Many employees only in the office once per week
  - Is perceived as a benefit within office culture and aids retention of staff
- One region reduced their physical space by 79%, saving money
New York City Elder Abuse Center at Weill Cornell Medical College

- Coordinates and facilitates three multidisciplinary teams in NYC
- Comprised of APS staff, prosecuting attorney, local banks, other community partners
- Systemic issues and cases are discussed
- Team facilitator (from Weill Cornell) ensures:
  - Logistics are coordinated
  - Feedback is constructive
  - Confidentiality is maintained
  - Professional boundaries are maintained
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 very different administrative structures with varying levels of resources. All rely on highly skilled social work, 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.
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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available at
www.napsa-now.org/promisingpractices
These Slides Available At
Thank You

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