

APS Moving Forward!!

11 Innovative Projects Across the Nation
Working to Make a Difference



Agenda

- Introductions
- Co-occurring national projects
- Information on the Administration for Community Living State Grants to Enhance Adult Protective Services
- Brief synopsis on the innovative improvements to APS in each state due to being awarded the grant
- Questions

Co-Occurring National Projects

Administration for Community Living



NAMRS

- National Adult Maltreatment Reporting System
- Person centered approach: analyze strengths, needs, goals, assets, expectations for each person we help
- Use data to create a federal infrastructure and potentially reduce state fiscal burden
- *Grantees encouraged* to be consistent with data collection efforts of NAMRS



Voluntary Consensus Guidelines

- Provided by the Administration for Community Living
- Goal is to promote an effective adult protective services (APS) response across the country so that all adults, regardless of the state or jurisdiction in which they live, have similar protections and service delivery from APS systems
- Develop a federal APS infrastructure to develop an effective APS network, nationwide
- Project is a deliverable for the White House Conference on Aging

State Grants to Enhance Adult Protective Services

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Administration for Community Living

- The 2015 White House Conference on Aging:
 - “ACL now marks a milestone in the fight against abuse of older adults and people with disabilities as it awards the *FIRST EVER* federal grants specifically designated to improve states’ Adult Protective Services (APS) systems.”
 - \$2.8 million for up to two years



Synopsis of Grant

- Projects by the Department of Health and Human Services and the Administration for Community Living
 - ACL Center Administration on Aging (the Unit overseeing)
 - To improve the experiences, health, well-being, and outcomes of individuals served
- Recognizes Adult Protective Services as a critical element in supporting older adults and adults with disabilities to fully participate in their communities
- Maximize safety and independence
- State Grants Dovetail with the National Adult Maltreatment Reporting and Voluntary Consensus Guidelines Projects

States Awarded the Grant

- Alabama
- Colorado
- District of Columbia
- Illinois
- Iowa
- Massachusetts
- New York
- Oklahoma
- Pennsylvania
- Virginia
- Washington

ENHANCING STATE AND LOCAL APS DATA COLLECTION

State of Alabama

Adult Protective Services Program

By Tonia Bell



Commissioner, Nancy Buckner
Deputy Commissioner (Interim), Joel Marsh
APS Division Director, Doris S. Ball
APS Program Manager, County Assistance, Tonia M. Bell

SACWIS SYSTEM

FAMILY ADULT AND CHILD TRACKING SYSTEM

APS SYSTEM DESIGN – Overview

- General Client Information
- Tracks/Monitors workflow of incoming APS preventions & AANES from point of intake to investigation disposition
- Risk Assessment
- Case Management
- Tracks agency provided services
- APS Placements
- Provider Licensing Requirements/T
 - Adult Daycare
 - Foster Care Provider



OVERALL PROJECT GOALS



- Improve the quality of services provided by Alabama's APS
- Document successful outcomes for APS Consumers in Alabama by enhancing state and local data collection and tracking capabilities in a manner consistent with National Adult Maltreatment Reporting System (NAMRS).



Targeted Population



- A Person 18 years of age or older
- Mentally/Physically incapable of protecting themselves
- No Guardian/Relative or appropriate caregiver willing or able to assume care and protection





PROJECT OBJECTIVES

- Ability to determine the services or referrals that result in the greatest protection to vulnerable adults by tracking referrals to community agencies
- Ability to track legal interventions and actions taken to ensure emergency protective services are provided timely
- Ability to identify data elements that are needed for analysis to improve outcomes for APS recipients.



Intervention strategies

1. Development of two modules to the current FACT system (Court and Legal Interventions)
2. Ability to track referrals to other agencies for services necessary to meet the needs of vulnerable adults
3. Development of Measurement Tools
4. Data Analysis
5. Resource Development and Training



INCREASE
COMMUNITY
PARTNERSHIP

ENHANCE
SERVICE
DELIVERY

REDUCE
REPLICATION
OF SERVICES

TRACK LEGAL
INTERVENTIONS

Collect
PERPETRATOR
DATA

•

OUTCOMES



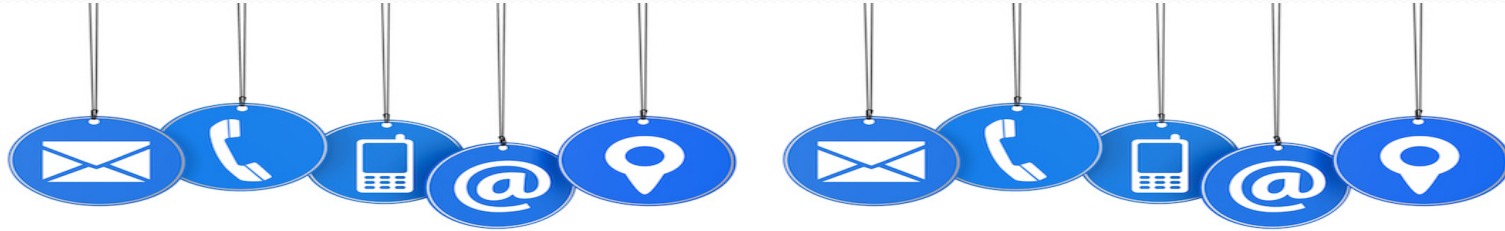
NEXT STEPS...

Steps 2 SAFETY

- Referrals to Other Agencies/Court Modules –Once it passes testing; moving to FACTS production.
- NAMRS Additional Info screen – Will be going to FACTS soon.
- NAMRS Interface/Validation Screen – 70% completed(design/mapping). Working on submission and coding issues.
- Data Analysis/Program Reviews



ALABAMA DEPARTMENT OF HUMAN RESOURCES



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Colorado Adult Protective Services

Kathleen Calderon



Grant Partners

1. Administration for Community Living (HHS-2015-ACL-AOA-JI-0106)
2. Colorado Department of Human Services, Aging and Adult Services, Adult Protective Services, Peggy Rogers, Manager
3. University of Denver, Dr. Leslie Hasche, Assistant Professor
4. Vertiba, Inc., (CAPS data system vendor), Jim Hooten, Partner

Grant Goals

- **Ultimate Goal:** Increase APS's ability to improve outcomes for at-risk adults in need of protective services
- **Interim Goals:**
 - Improve and enhance the intake and assessment process within Colorado Adult Protective Services Data System (CAPS)
 - Scientifically validate and revise the electronic assessment tool in CAPS used by county caseworkers

Intake

- Created dynamic pages that add sections and questions based on input to gather additional details from the reporter
- Added the Review, Evaluate, Decide (RED) Team structured decision-making framework

Intake

- Changes to the intake are completed
- Receiving more detailed information with no significant increase to the time it takes to enter a report
- Data from the new intake will be analyzed after six (6) months of use to identify positive practice changes

Condition

Does the adult have any medical, cognitive or physical disabilities or deficits?

Yes

The adult has or shows signs of (check all that apply):

Please complete the highlighted sections below.

Decision-making/understanding deficits

Memory-deficits

Physical conditions

Medical conditions

Mental illness

Substance abuse

Has the condition been diagnosed?

--None--

What is the diagnosis and what are the details of the condition(s)?

The condition(s) causes the adult to (check all that apply):

Have aggressive behavior

Impact ability to communicate

Unable to protect themselves

Unknown

Have self-injurious behavior

Memory problems

Wander

None

The condition(s) causes the adult to be unable to manage (check all that apply):

ADLs (toileting, bathing, hygiene, etc.)

Healthcare/medical needs

Unknown

Bills/finances

IADLs (cleaning, laundry, cooking, etc.)

None

Exploitation

Please complete the highlighted sections below.

How is the adult's money/home/property/assets being used? (Check all that apply)

- For another person's personal needs
- For things adult would not use/purchase
- There is an unexplained loss of money/property
- For illegal activity
- There is a questionable transfer of money/property
- Without adult's knowledge/permission

What is the adult being threatened, pressured or forced to do? (Check all that apply)

- Allow someone to live with them
- Make changes to a bank account
- To do something the adult wouldn't normally do
- Give away money or property
- Sign a quit claim deed 

Is there a will or power of attorney?

--None-- 

Has there been a recent change made to either?

--None--

Exploitation Additional Details

Assessment Tool

Currently, the assessment tool measures the client's strengths and needs in 70 risk factors in the areas of ADLs/IADLs, living environment, cognitive and mental health, and medical.

- Measures both safety and risk for the client
- A level of impact for each risk factor is chosen by the caseworker
- Safety and risk scores are generated for each status area, in addition to there being an overall score

✓ Save - In Progress

✕ Cancel

✓ Assessment Complete

+ Details

- Physical Status

		Mitigating Services
Physical Status Check All	--None--	
Ambulation (walking, mobility)	--None--	<input type="checkbox"/>
Bathing/Showering Self	<ul style="list-style-type: none"> --None-- No Impact Minor Impact Significant Impact Unknown 	<input type="checkbox"/>
Feeding Self	--None--	<input type="checkbox"/>
Grooming (Hair, Nails, Hygiene)	--None--	<input type="checkbox"/>
Toileting Self	--None--	<input type="checkbox"/>
Transfer(Chair to Bed, Bed to Walker)	--None--	<input type="checkbox"/>
Communicate (speak, sign, etc)	--None--	<input type="checkbox"/>

Assessment Tool Validation Study

- Review risk factors
- Conduct focus groups
- Analyze assessment data
- Determine inter-rater reliability of the tool
- Modify tool

Preliminary Results

- Useful in determining a client's needs
- Helpful in creating a case plan
- User-friendly and intuitive



Contact Information

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Peggy Rogers

State APS Program

Manager

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Advancing Forward: The District of Columbia Adult Protective Services Enhancement Initiative

State Grants to Enhance Adult Protective Services

By Dr. Sheila Jones and Dr. Robert Crosby

Structured Decision Making (SDM) Model Overview

- The National Council on Crime and Delinquency's (NCCD) Structured Decision Making (SDM) model is a suite of assessment instruments that promote safety and well-being for those most at risk—from children in the foster care system to vulnerable adults.
- The SDM model combines research with practice strategies, offering workers a framework for consistent decision making and agencies a way to target in-demand resources toward those who can benefit most.

SDM Goal

The **goal of SDM** is to increase consistency and accuracy when assessing vulnerable adults at critical decision making points during APS involvement.

SDM Characteristics

- **Reliability:** SDM assessments systematically focus on the critical decision points in the life of a case, increasing worker consistency in assessment and case planning. Clients are assessed more objectively, and decision making is guided by facts rather than individual judgment.
- **Validity:** The actuarial research-based risk assessment, which accurately classifies families and clients according to the likelihood of subsequent outcomes, enables agencies to target services to clients at highest risk for negative outcomes, such as maltreatment recurrence or difficulty finding and maintaining employment.

SDM Characteristics (cont.)

- **Equity:** SDM assessments ensure that critical case characteristics, risk factors, and domains of functioning are assessed for every client, every time, regardless of social differences. Detailed definitions for assessment items increase the likelihood that workers assess all clients using a common framework.
- **Utility:** Using the SDM approach can assist staff to accurately identify clients at highest risk and focus on resources for them, thus increasing the efficiency of APS operations.



SDM Field Operations

- The SDM model and its assessments are easy to use and understand. Assessments are designed to focus on critical characteristics that are necessary and relevant to a specific decision point in the life of a case. By focusing on critical characteristics, workers are able to organize information gathering and case narratives in a meaningful way. Additionally, the assessments facilitate communication between worker and supervisor, and unit to unit, about the status of each case.

Project Goal and Objectives

Goal: To improve outcomes for vulnerable adults in the District of Columbia through enhanced decision making and data collection at both the case and division levels.

Objectives: The project offers **four strategic objectives:** (1) to develop a logic model that describes how the changes pursued by DHS-APS will produce better outcomes for vulnerable adults and create a plan for tracking system processes, outputs and outcomes; (2) Customize SDM assessments for DHS-APS to increase the reliability, validity and equity of decisions at critical points in a case; (3) Connect assessments to daily practice through training and integration into the existing database, including mobile access, for real-time assessment documentation and data collection; and (4) provides the APS management team with crucial information for improved program planning, evaluation and resource allocation.



Expected Outcomes

There are *four* anticipated outcomes which include: (1) Reliable, valid and equitable assessment tools; (2) Useful tools to support complex decision making at critical points during APS involvement; (3) Increased consistency of case-level decision making; and (4) Improved data collection and tracking systems to better monitor APS practices and services



The District of Columbia APS Enhancement Initiative Project Team

APS Team:

- Dr. Sheila Jones, Chief Adult Protective Services, Project Director
- Dr. Robert Cosby, Project Coordinator
- Phelan Sanders, Software Application Specialist, IT

NCCD, collaborative partner

Illinois

Alice Hayes and Lois Moorman
(Amount Awarded: \$300,000)



Grant Consultation Partners

- APS Service Provider Network
- State's Area Agencies on Aging

Grant Purpose and Goal

- In the course of this two year project, improve the quality of the services provided by the APS Program to adults 60 years of age and older and adults with disabilities age 18-59, who reside in the community and are the subjects of reports of abuse, neglect and exploitation.
- The goal of this project is to be able to improve outcomes for persons served by the program through enhanced assessment components and monitoring of progress towards case plan goals.

Grant Objectives

- Increase the depth of the program's investigation through an expanded and computerized assessment.
- Use information gathered in the assessment to improve case plan development.
- Systematically measure progress towards case plan goals throughout the case.
- Identify victim outcomes at case closure that reflect mitigated risk to the victim.

Iowa

Catherine Stack, M.A.

Dependent Adult Protection Program Manager

Project Coordinator for the Iowa's State Grant to Enhance
Adult Protective Services (Amount Awarded: \$231, 108)

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**Iowa Department of Human
Services**

Fields of Opportunities



- The “climate is right” for this endeavor now in Iowa
- Inadequate or inappropriate services are worse than no services- US Congress
- 50% of Iowa’s population is 60 and over or diagnosed with a disability (www.dhs.iowa.gov)
- Iowa ranks 4th highest in the nation for population aged 75 and over. In the US, the aging population is expected to increase by 40% over the next 10 years



Grant's Purpose: IDHS' Purpose

- Enhance APS system statewide
- Include innovations and improvement in practice, services, and data collection and reporting
- Improve technical ability to interface with ACL's National Adult Maltreatment Reporting System (NAMRS)

Iowa's Goal and Vision

- Maximize positive outcomes for dependent adults by protecting well-being, empowering independence, and supporting quality of life.
- IDHS envisions this project being part of a *widespread culture shift* to assist in creating a larger protective infrastructure for our aging and disabled population



Measurable Objectives

- improve the accuracy of data collection to promote protective capacity in dependent adults suffering from abuse and be consistent with NAMRS data collection;
- improve proficiency in risk screening and safety assessment by staff providing dependent adult protection; and
- improve interagency collaboration to enhance continuity of care.



Expansion: Enhanced Systems

- Absorb DAAS(SODA) into JARVIS
 - Streamline workflow for field
 - Enhance accuracy, quality, and consistency
 - Training on use of Jarvis for DAA
 - Able to report on Agency Component and Case Component Data to NAMRS



Innovation: Enhanced Protective Services

- Identify assessment tools to replace more cumbersome mechanisms currently utilized or to electronically use current tool
 - Changes to our Dependent Adult Abuse Intake Form
 - A new dependency assessment that includes the Katz and Lawton
 - New Safety Assessment to be completed within 24 hours
 - Risk Assessments of Adult Subject and Caretaker to be completed prior to conclusion of the case
 - Electronic entry and tracking of Periodic Visits and case closure reasons

Positive Impacts Already

- Dependent Adult Protection is increasingly being given consideration for other pilot projects and work procedures within IDHS along with child protective services. For example, dependent adult cases as will be included when using the UNCOPE to screen for substance abuse issues expands statewide.
- Invited to be an MOU partner on the VAWA grant
- Mutual data exchange
- Better training available for field
- More collaboration with state and federal partners

Massachusetts

Improving the Well-Being of Persons with Disabilities
through a Multidisciplinary Partnership

Nancy A. Alterio
Executive Director
Disabled Persons Protection Commission

Grant # 90J10006-01-00

FFY2016/2017

People with Developmental Disabilities

- Have the same responses to trauma as people in the general population (Margaret Charlton et al., *Facts on Traumatic Stress and Children with Developmental Disabilities* (2004))
- Have exacerbated health risks from traumatic experiences because of additional barriers to recovery (Margaret Charlton et al., *Facts on Traumatic Stress and Children with Developmental Disabilities* (2004))
- Benefit from therapeutic intervention – although it may take longer to make changes; however, if they do not receive treatment, they are less likely to recover spontaneously from trauma (Mansell et al., *Clinical Findings Among Sexually Abused Children With and Without Developmental Disabilities* (1998))

The Gap

- Only 12% of DPPC/APS substantiated reports of sexual abuse included trauma-informed recommendations (2012)
- Needs assessment found personnel who work with sexual assault victims felt least confident/equipped to respond and provide service to persons with developmental disabilities (2012)
- DPPC/DPH/DDS Survey of States identified only two therapist trained to work with trauma victims with intellectual/developmental disabilities (2014)

Team

- Disabled Persons Protection Commission
 - Nancy Alterio – DPPC Co-Director
 - Susan Vickers – Project Coordinator
- Department of Public Health
 - Janice Mirabassi – DPH Co-Director
- Massachusetts Advocates Standing Strong
- Boston Area Rape Crisis Center
- Riverside Community Care – Trauma Center

Team

- Department of Developmental Services
- Hampden District Attorney's Office
- Massachusetts Office for Victim Assistance
- Sexual Assault Nurse Examiners
- Jane Doe, Inc.
- Victim Rights Law Center
- Office of Attorney General, Victim Compensation and Assistance Division
- Rape Crisis Programs

Grant Objectives

- I. Improve and streamline access to Rape Crisis Centers for persons with developmental disabilities through the APS system;
- II. Improve communication, information and awareness about trauma-informed services for persons with developmental disabilities; and
- III. Improve the effectiveness of sexual assault services provided to persons with developmental disabilities through a multidisciplinary approach.

Tasks – The ‘To Do’ List

- Convene Multidisciplinary Team – ✓
- Create voluntary guidelines for RCCs to address such areas as:
 - Accommodations
 - Communication
 - Guardianship
 - Confidentiality
- Create educational and outreach materials
- Develop and conduct four multidisciplinary regional trainings
- Provide technical assistance to RCCs
- Enhance APS data collection system to document improvements in outcomes, referrals, protective services, and well-beings of persons with developmental disabilities, consistent with national efforts

Benefits to Multidisciplinary Partnerships

- No one person or agency possesses all of the skill, knowledge and resources necessary to respond to the complex problems of mistreatment and abuse
- Each agency brings a different perspective and different information to the table
- In working together, persons with disabilities will receive enhanced access to trauma services to minimize trauma

Multidisciplinary Partnerships!!

- the concept is simple;
- the work is difficult; but
- the benefits are worth it!

New York

Alan Lawitz

Bureau of Adult Services

The New York State Office for Children and
Family Services (OCFS)

(Amount Awarded: \$300,000)

Team

- Local Services Agencies
- Key stakeholders

Grant Purpose

- This two-year project will expand upon existing programs and services with the goal of improving the rate at which financial exploitation cases are satisfactorily resolved and preventing further abuse.
- Financial exploitation is the most common form of abuse experienced by older adults in New York state.

Grant Objectives

- Develop effective tools and templates that can be used by APS workers to improve investigation, screening and assessment of financial exploitation cases through increased information and documentation
- Increase the capacity of APS workers by utilizing the services of a forensic accounting consultant, who will review complex cases and make recommendations for further actions in such cases
- improve the state's current APS data collection systems to capture data that will help researchers and policymakers measure the scope of this problem and find ways to protect vulnerable adults.

Oklahoma

Jeannie Parsley

Oklahoma Department of Human Services (DHS)

Adult Protective Services Division

(Amount Awarded: \$300,000)

Grant Purpose and Goal

- A vital project to expand its data collection and reporting capacity, called OK-ENHANCE (Enhanced Reporting to Protect Vulnerable Adults).
- The **goal** of the two-year project is to support clients' ability to be safe in their environments through the implementation of strategic updates and expansions to the APS case information system application.

Grant Objectives

- Increase information about the outcomes of individuals served by APS, expand data collection on clients' and perpetrators' characteristics
- Improve information on services provided by and referred to by APS
- Increase information about changes that occur between the opening of a case and its closing as a result of APS intervention
- Upgrade Oklahoma's data collection efforts to be consistent with the NAMRS national effort

Building Partnerships

- In the process, the project will ensure that information is relevant to significant partners that serve special populations, particularly the multiple Tribal Nations that exist in Oklahoma

Pennsylvania

Montrell Fletcher

The Pennsylvania Department of
Aging (PDA)

(Amount Awarded: \$200,000)

Grant Purpose and Goal

- The Pennsylvania Department of Aging (PDA) plans to enhance existing systems, practices, and technology to improve Pennsylvania's Older Adults Protective Services system statewide.
- The goal of this project is to introduce new tools and practices that will enhance and standardize Pennsylvania's response to abuse allegations. Furthermore, these innovations will ensure that data being collected is accurate, consistent, and compatible with NAMRS

Grant Objectives and Partners

- The approach and reasoning behind protective services case intervention decisions will be standardized through these tools, which will improve recording, tracking, and communication practices for protective services
- For this project, PDA is collaborating with the Institute on Protective Services at Temple University's Harrisburg Campus to conduct the research, training, and evaluation activities.



DARS

**VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES**

*Providing resources and services to
improve the independence of older Virginians*



Virginia APS Division

Improving to Better Respond to Workers and Those They Serve

<http://www.vadrs.org>

Improving Virginia's APS System

- The Virginia Department for Aging and Rehabilitative Services (DARS) is replacing an 11 year old Adult Services (AS) and APS case management system with Peer Place (PP).
- PP is currently used by all 25 Area Agencies on Aging (AAA) in Virginia. When local AS and APS workers use the same system, it will result in improved service delivery to individuals who frequently seek assistance from local departments of social services (LDSS) and AAA.
- Additionally, private entities such as hospitals and home care agencies are also using some features of PP. Virginia is implementing a one stop approach to address the needs of older adults and individuals with disabilities.

Adapting PP to AS and APS needs

Currently PP is being adapted to meet the needs of Virginia's AS and APS workers and clients. After system development is complete, PP will:

- Employ a “pitch & catch” information and referral feature, ensuring clients do not “fall through the cracks” when referred to other providers.
- Enable online submissions of APS reports by PP users to LDSS.
- Limit user access to sensitive, high profile, or conflict of interest APS cases.

More Enhancements

- Think smart” for the worker; only certain fields will appear in response to the choices and selections made by the worker
- Improve tracking and safety of clients under guardianship. In Virginia every court-appointed guardian for an incapacitated adult, whether the guardian is private or through a public guardianship program, is required to submit an annual status report on the adult to the appropriate LDSS for review. PP will track guardian report compliance , notifications to the circuit court, and employ a tickler system for reminders.

More Enhancements

- Permit workers to complete the Uniform Assessment Instrument (UAI) offline in a client's home. UAI is uploaded when worker returns to office.
- Build-on/copy a previous (UAI) to save time.
- Increase the number of AS/APS reports and add enhanced data components to help workers efficiently manage cases.
- Be NAMRS compliant.
- PP will be available statewide for Virginia AS and APS workers January-May 2018.

Contact

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Aging and Long-Term Support Administration

APS Fatalities & Near Fatalities – The Washington Quality Assurance Approach

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