Supervising to Protect, Prevent & Empower

Are You Adventure Ready?

Thomas W. Kimbark  
APS Supervisor II

William J. Kimbark  
Healthcare Info Analyst
“It's a Barnum and Bailey world just as phony as it can be”

“But it wouldn't be make believe if you believed in me”
No one wants to see a vulnerable adult going without basic needs; being mistreated or repeatedly abused. As a frontline supervisor it is your duty to assure that workers under your direction have the skills necessary to recognize, evaluate and deter situations that are potentially dangerous.

This session will be inclusive of training that can prepare Adult Protective Service (APS) Specialists for what they will see in the field through simulation and mentoring programs.

We will discuss how to properly utilize an assessment tool to help identify hazards that present harm and barriers that increase risk and how it can point workers toward steps that can be implemented to alleviate symptoms.

We will look at the heart of the matter and explore the possibilities of establishing prevention measures for situations that may not have risen to the definition of abuse or neglect where a seasoned supervisor may be able to guide a novice worker to avert the inevitable.

We will look at developing community partnerships in an effort to open communication and outline the importance of front line worker involvement with these collaborative efforts.

And finally we will review recruitment opportunities and how the APS Specialist can be effectively used as a marketing representative to attract new persons to our workforce.
LEARNING OBJECTIVES

• Supervisors will be educated on the protection of vulnerable adults as a primary responsibility.
• Supervisors will participate in a discussion aimed at improving training related to assessments geared at identifying and removing risk.
• Supervisors will explore methods of incorporating prevention measures in routine situations involving vulnerable adults and be encouraged to develop community partnerships for assistance.
• Supervisors will be encouraged to take a more active role in community presentations and recruitment efforts by allowing worker's to take part in these activities.
VULNERABLE ADULTS HAVE BASIC NEEDS

“Is it a Medical Emergency?”

“Yes, there were times, I’m sure you knew when I bit off more than I could chew”

“I did what I had to do and saw it through without exemption”
MEDICAL EMERGENCIES NEEDING HOSPITAL TREATMENT

• Acute Pain
• Broken Bones
• Dehydration
• Gangrene
• Hemorrhaging
• Respiratory distress
• Severe Malnutrition
• Unconsciousness

“If there's something strange in your neighborhood
Who you gonna call?

If there's something weird
And it don't look good
Who you gonna call?”
IN-HOME PERSONAL ATTENDANT & SKILLED NURSING CARE

Keys for Evaluation:
- Can they ambulate?
- Is the home clean?
- Is the home safe?
- What adaptive equipment is present?
- Can they prepare simple meals?
- What is the support network like?

Can We Deploy:
- Home Health Services?
- Community Care Attendant?
- Friends and/or Relatives?
- Volunteers of America?
- Meals on Wheels?
- Visiting Angels?
INSTALLING SMALL APPLIANCES

Winter, spring, summer, or fall, all you have to do is call and I'll be there.

WINTER - is it too COLD?
SPRING - is it too WET?
SUMMER - is it too HOT?
FALL - does the WIND blow THROUGH the home?
“Compulsive hoarding, also known as hoarding disorder, is a pattern of behavior that is characterized by excessive acquisition and an inability or unwillingness to discard large quantities of objects that cover the living areas of the home and cause significant distress or impairment.”

“Hoarding treatment begins with a person acknowledging the underlying problems that fuel hoarding behavior.”
Healthy Homes Maintenance Checklist

- Check for signs of leaks where porch/deck attaches to house, in ceilings/roof, in the plumbing, water and gas lines.
- Check for broken/cracked glass, missing/gaps in windows and/or doors.
- Check chimney for missing brick.
- Check the condition of roof and shingles.
- Check gutters for clogs and holes.
- Check electric outlets for hazardous conditions.
After the Storm

- Is it safe for APS to be on site?
- Is it safe for them to remain in the home?
- What other agencies are offering assistance?
- How are their physical needs being met?
- Are there medical needs that complicate the situation?
- How is the situation affecting their mental health?
- Do we know of temporary shelters in the area?

“You are like a hurricane
There's calm in your eye.
And I'm getting blown away
To somewhere safer
where the feeling stays.”
SIGNS AND SYMPTOMS OF DEPRESSION IN OLDER ADULTS

- Sadness or feelings of despair
- Unexplained or aggravated aches and pains
- Loss of interest in socializing or hobbies
- Weight loss or loss of appetite
- Feelings of hopelessness or helplessness
- Lack of motivation and energy
- Sleep disturbances (difficulty falling asleep or staying asleep, oversleeping, or daytime sleepiness)
- Loss of self-worth (worries about being a burden, feelings of worthlessness)
- Slowed movement and speech
- Increased use of alcohol or other drugs
- Fixation on death; thoughts of suicide
- Neglecting personal care (skipping meals, forgetting meds, neglecting personal hygiene)
Mental Illness
“YOU MAKE THE CALL”

TELEPHONE LINE
“Hello, how are you?
Have you been alright through all those lonely, lonely, lonely, lonely, lonely nights?
That's what I'd say, I'd tell you everything;
If you pick up that telephone, yeah, yeah, yeah”

AIDS National Hotline + 1-800-342-2437
Cocaine Help Line + 1-800-COCAIN (1-800-262-2463)
Domestic Violence Hotline + 800-799-7233
Drug & Alcohol Treatment Hotline + 800-662-HELP
Family Violence Prevention Center + 1-800-313-1310
Healing Woman Foundation (Abuse) + 1-800-477-4111
National Alliance on Mental Illness (NAMI) +1-800-950-NAMI (6264)
Panic Disorder Information Hotline + 800-64-PANIC
Rape (People Against Rape) + 1-800-877-7252
Sexual Assault Hotline + 1-800-656-4673
Suicide Prevention Lifeline + 1-800-273-TALK
RISK ASSESSMENT
SELF-NEGLECT / MALTREATMENT

ALLEGATIONS

INVESTIGATION
Are They Safe?
Likely To Re-Occur?
What Do They Lack?

FINDINGS

CASE DETERMINATION

DELIVER SERVICES / SOLUTIONS

Self-Neglect
Neglect by Other(s)
Exploitation
Physical Abuse
Emotional Abuse
Sexual Abuse

Open Case
Continue Case
Client Refused
Close Case
Prevention Measures

At the Consumer Level:
• Living wills / Advanced directives
• Home assessment / Fall precautions
• Promote self-awareness
• Encourage Prompt action
• Refute myths and misconceptions
• Demonstrate or illustrate healthy skills
• Reinforce knowledge, attitudes, or behavior
• Show the benefit of individual behavior change

In the Community at Large:
• Increase Public awareness
• Strengthen organizational relationships
• Advocate a position on an issue or policy
• Increase demand or support for services
• Increase knowledge and awareness of an issue, problem, or solution
• Influence perceptions, beliefs, and attitudes that may change social norms.
COLLABORATION TAKES EFFORT

Older Americans Month Proclaimed

Community Presentations

Health Care Coalition Activity

Local Health Fairs

Public Awareness Meetings

LEAD THE WAY

Older Americans Month Proclaimed
A True story

This is a little story about four people named Everybody, Somebody, Anybody and Nobody.

There was an important job to be done and Everybody was sure that Somebody would do it.

Anybody could have done it, but Nobody did it. Somebody got angry because it was Everybody’s job.

Everybody thought that Anybody could do it, but Nobody realized that Somebody wouldn’t do it.

It ended up that Everybody blamed Somebody when Nobody did what Anybody could have done.

Author Unknown

Posted @ http://SteveMillersBlog.com
AWARENESS, ALTRUISM, ACTION

Did YOU ever KNOW that YOU’RE my HERO

YOU are the WIND beneath my WINGS
Building Your Team

Identify Knowledge Skills Abilities

Knowledge of: federal and state laws, regulations and policies as they relate to Adult Protective Services; risk assessment for elder mistreatment, human behavior; abusive adults; medical illnesses and psychological abuse; substance abuse and its effects; domestic violence as it relates to domestic violence, in later life; conflict resolution techniques; judicial system as it relates to the appointment of Guardian/Conservator; legal issues and social work principles; physical behavioral indicators of abuse and/or neglect of mentally disabled and/or seriously mentally ill (SMI) adults and frail elderly; appropriate interventions for a variety of behavioral, developmental and psychological symptoms; statewide community resources; APS statutes; Cue questions; determining vulnerability and incapacity; and automated client file.

Skill in: interviewing and communication, particularly listening via telephone; oral and written communication, especially grammar and punctuation; needs assessment of vulnerable and frail elderly; organization and time management; and computer software packages such as Windows, Outlook, and Word.

Ability to: effectively communicate to extract pertinent information; accurately apply confidentiality statute and policies and procedures; search the APS computer system to research information; write a clear and concise report that reflects the alleged abuse, neglect and/or exploitation; evaluate risk and to maintain files and all pertinent data; enter, retrieve and correct data in automated system; use a variety of computer software packages (e.g. Excel, Word, Power Point) and set priorities and delegate work assignments.
BUILDING YOUR TEAM
RECRUIT THE BEST

ATTEND LOCAL CAREER DAYS:
HIGH SCHOOL
JUNIOR COLLEGE
UNIVERSITY

ATTEND JOB FAIRS:
COMMUNITY BASED
WORKSOURCE
EDUCATION CENTERS

INTERVIEW QUESTIONS

• Basic questions about previous experience.
• What do you know about at-risk elderly?
• How do you make a good first impression on the phone?
• Why are you a good for this job?
• Name a time where you had to deal with a difficult person/client.
• Describe a real life APS scenario. How would interviewee handle it?

“If possible, establish a probationary period upon hire.”

Source: https://www.glassdoor.com
BUILDING YOUR TEAM
INSPIRE THROUGH LEADERSHIP

“A team is a group of individuals who know each others strength and weaknesses working together to accomplish a common goal.”

LEADERSHIP POINTS:
• CHALLENGE THE PROCESS
• INSPIRE A SHARED VISION
• EMPOWER OTHERS TO ACT
• MODEL THE WAY
• ENCOURAGE THE HEART
• LEADERS ARE TEACHERS & MENTORS
Building Your Team
Training and Development

Field of Dreams...

... Lessons Learned
Piecing it Together

Reviewing the Situation...
BUILDING YOUR TEAM
REWARD TO RETAIN

- Recognize Above and Beyond Achievements
- Implement a Promotion or Career Ladder
- Performance Awards
- Celebrate Milestones
  - Promotions
  - Community Recognition
  - Work Anniversaries
  - Birthdays
In reviewing our core values I noticed that COLLABORATION is the only one that actually requires an action to achieve. The first four of our core values SAFETY, DIGNITY, INTEGRITY and RESPECT are sometimes measured superficially but when we COLLABORATE we are judged by the quality of our relationships with the participating agencies and, it could be said, that in order to make our core values work, we must COLLABORATE.

- SAFETY is a condition attributed to ones surroundings
- DIGNITY is a state of or quality of being worthy
- INTEGRITY is a quality of being honest and having strong moral principles
- RESPECT is a feeling of deep admiration
- COLLABORATE is working jointly on an activity to produce something
There was no shortage of collaboration by YR in her diligent attempt to assure the safety of a 75 year old elderly woman and her 54 year old mentally challenged son. Ms. R first met this couple in 2013 when local law enforcement observed that these persons were living in a home that was in extremely poor condition. Ms. R learned that the mother actually was maintaining a part time job. Ms. R determined that the mother was aware of her responsibility and committed to care for her mentally challenged son. The couple did not wish to receive APS assistance at this time. Ms. R observed that both the mother and her son were still physically able to attend to chores themselves. Based on this demonstration, Ms. R supported a least restrictive alternative and showed them RESPECT. Collaborative efforts at this phase were done in the form of referrals for electrical assistance through Sheltering Arms and for Meals on Wheels.
A second case was opened in 2014 as a result of the mother becoming confused while driving to her part time job. This confusion led to hospitalization and an eventual loss of her employment. The effort at this time included the aspects of DIGNITY and SAFETY as the focus shifted to providing assistance to allow the mother and her son to continue to live in their residence. COLLABORATION included working with Behavioral Health for evaluation and stabilization and locating a family member to assist with monthly bills. A heavy cleanup was recommended and performed. The mother and son were able to maintain INTEGRITY though the assistance of community programs and a relative.
Core Values Nomination Collaboration

The final intake was received in 2015 after a neighbor reported that the son was going throughout the neighborhood picking up items that were set out as trash and bringing them home. Investigation at this time heightened APS concerns. The mother had begun to experience health issues that would require short hospital admissions. The conditions would ordinarily have been addressed through home health but her living conditions had again deteriorated. The son was bringing items into the home that were unclean and they were not able to clean the home so that his mother could recover without fear of developing infections. A physician examining both mother and son expressed concerns for both of their physical & mental health. APS located a neighbor willing to assist but the family member who was providing past physical and financial assistance became ill and was no longer able to help. Ms. R again turned to behavioral health to help stabilize the mother but her son continued to refuse outside assistance. Realizing the danger involved in this situation Ms. R stepped up the frequency of her visits and would check on this couple weekly. When SAFETY became an ongoing concern she reached out the probate courts and worked hand in hand with the County Attorney in filing an application for guardianship for both the mother and the son.
Although the outcome for this mother and son can be considered restrictive, I believe the case example set forth is a comprehensive use of each of the core values solidified through effective COLLABORATIVE efforts. And the efforts of YR were so strong in this situation that it earned her the following praise from County Attorney's office:

"I was impressed with the caliber of employees in the Liberty office. Ms. R is awesome; and I was glad to be of service to you."

YR is truly deserving of receiving a 2016 Core Value Award if not in this category than in another.
Since we began with the end in mind,

We’ll show you what it was like in the beginning.