# **Specialization within APS**

Evaluating the Benefits and Addressing the Challenges

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28th Annual NAPSA Conference August 29, 2017

#### **Introductions**

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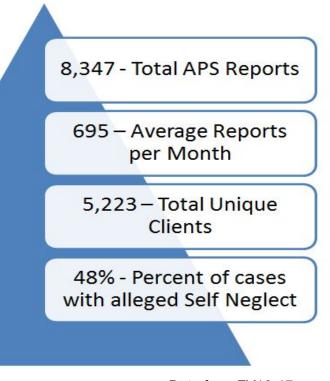


# Objectives for Today

- 1. Review the findings of a national survey regarding unit specialization in APS.
- Discuss findings from San Francisco's case-level study.
- Learn about Sonoma County's Elder Financial Protection Team.
- 4. Discuss San Francisco's newly formed High Risk Self-neglect and Eviction Prevention Unit.
- Hear from other APS jurisdictions regarding specialization.



#### SF APS Dashboard



#### **Setting the Stage**

#### San Francisco's motivation

- Revolving Door concept with High Needs Clients
- APS Worker Satisfaction
- Community Providers
   Feeling Frustrated



#### The Self-Neglect Equation

Cognitive impairment — Mental Health Issues — Multiple Medical Issues Housing Issue Co-Occurring Substance Abuse Hoarding Conditions





#### **Hoarding Intervention and Tenancy Preservation Pilot Project**

2014-2015 Pilot Project

**Who:** APS clients at risk for eviction due to hoarding and cluttering behaviors.

**What:** Long-term APS Worker implemented a specialized intervention model with subject matter consultation and guidance.

**Where:** Frequent visits to the client's home to provide hands-on skills training and coaching.

**Why:** To evaluate a different way of approaching this client population.

#### **Outcomes**

Eviction risk was resolved within 4.5 months, on average.

Motivation and Insight are key to assisting clients to develop decluttering skills. Both can increase through regular visits with a trained APS Worker.

Client centered service models are key to addressing self neglect.

#### In Search of More Information



Prior experience with specialization made some staff skeptical.

Program needed to gather more information before making a structural change.

Partnership with the Controller's office to gather data.

# City and County of San Francisco

National Peer Survey & Analyzing Case Data



# SF Controller, City Performance



City Performance (CP) serves as an **internal consulting unit** to other City departments, whose goals are to:

- support City departments in making
   transparent, data-driven decisions in policy
   development and operational management
- guide City department in aligning programming with resources for greater efficiency and impact, and
- provide City departments with the tools to innovate, test, and learn.

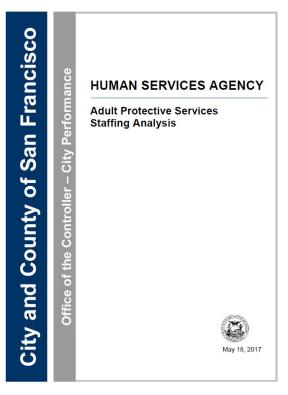


## SF Controller, APS Staffing Analysis

This report documents CP's analysis and findings from:

- job shadows and a social worker focus group,
- a national peer survey, and
- an analysis of case data from more than 22,000 APS cases from 2012-2015.

The analysis highlights the key drivers of case complexity and informs business decisions around unit organization and caseload management.



#### **Job Shadows and Focus Group**

Before any analysis, CP did two full days of **job shadows**.

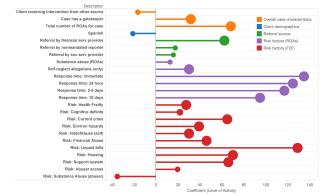
- SWs serve clients with complex & often multiple needs
- SWs face challenges to their safety & emotional health
- Clients often refuse services, which makes it difficult to reduce risk and can lead to recurring cases
- SWs' time is very fragmented; the largest segment of time is spent on the phone connecting with collateral agencies, clients, and service providers
- SWs rely heavily on external resources in reducing client risk. These resources are scarce & have their own timelines & eligibility criteria.

After initial data analysis, CP led a **focus group** to: get insights from social workers, share preliminary data analysis results, and get their interpretations.









# **APS National Peer Survey**

We drafted a survey because we did not find many resources specific to APS about unit organization, specialization, and caseload management. We received **74 responses** (34 from CA, 40 from elsewhere). The survey included questions about:

- Social worker/investigator specialization,
- Case assignment,
- Caseload management (including weighted caseloads),
- Tangible & intangible services provided,
- Number of staff,
- Case closure statistics, and
- Type(s) of abuse/self-neglect





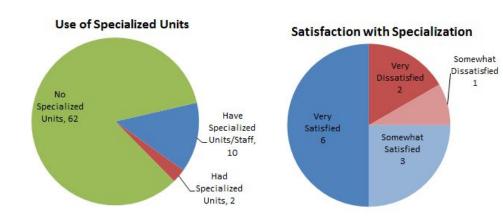


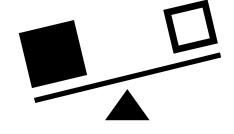
## **Survey Findings - Specialization**

While most APS programs do not have specialized units, **those that do tend to be satisfied** with them.

Among programs that were dissatisfied with specialization, the key challenges are around **balancing resources and caseloads across units**.

**Financial abuse units** are much more common than any other type of specialized unit.





# Survey Findings - Caseload Management

**Weighted caseloads** (where programs assign specific "weights" to different cases) have rarely been attempted (2 of 74 programs), and were unsuccessful among both programs in the survey.

For these programs, weighted caseloads were **difficult to administer** and had **limited impact**.

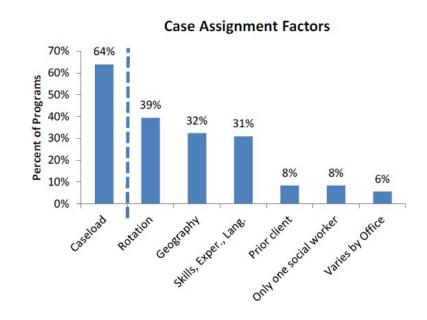
Other mechanisms exist for caseload management, such as caps or other modifications to a pure rotation system (e.g., counting a distinct set of cases as being "two" cases).



# **Survey Findings - Case Assignment**

A majority of programs do however **consider current caseload** when assigning cases, either formally or informally.

About a third of programs reported considering social worker skills, expertise, or language capabilities in case assignment.

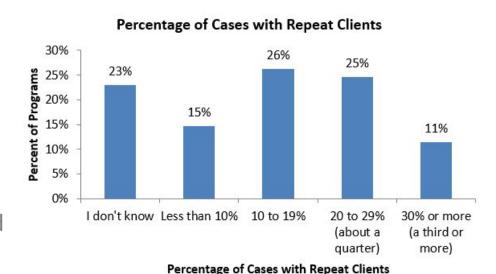


## **Survey Findings - Repeat Clients**

There is a wide range of rates of repeat clients.

More than a third of programs said that at least a fifth of their clients are repeat clients.

Almost a quarter of programs said they did not know how many of their clients are repeat clients.

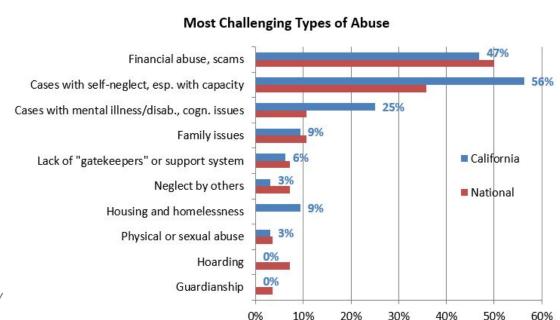


## **Survey Findings - Most Challenging Cases**

Programs reported that the most challenging cases to resolve are **financial abuse/scams** and cases with **self-neglect**, especially when there are questions of **capacity**.

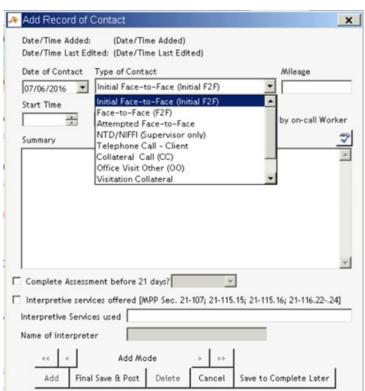
There are many other survey findings, including about the types of tangible/intangible services provided, staffing ratios, and average caseloads that we didn't have time to discuss here. To see the full survey analysis, go to

www.tinyurl.com/SFControllerAPS.



CP also analyzed **22,514 cases** from 2012-2015, including all of their **224,506 records of contact** associated with those cases.

CP combined the time measurements from job shadows and a survey of social workers to assign average numbers of minutes that corresponded to each activity in the records of contact. The result was an **activity index** to measure the relative level of effort on past cases.

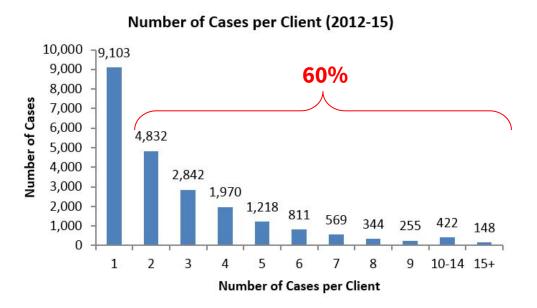


**Self-neglect cases are more resource-intensive** than cases of abuse by others, but the most intensive cases on average are ones where both types of abuse occur.

#### Average Case Length and Activity Index by Type of Abuser

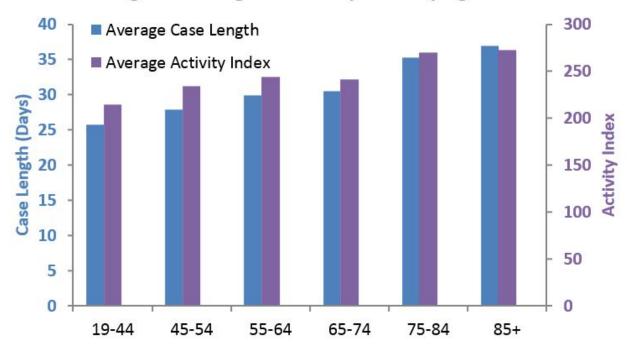
Type of Abuser	Average Case Length		Average Activity Index	
	Alleged Abuser	Confirmed Abuser	Alleged Abuser	Confirmed Abuser
No Abuse Found	\$ <del></del>	20.8	(1 <u>-1-1</u>	156.5
Abuse by Others	28.2	43.6	206.1	322.1
Self-Neglect	33.1	48.3	264.6	390.4
Combination	41.4	70.9	327.9	547.6

**Sixty percent of cases** from 2012-2015 corresponded to **clients who had more than one case** in that time period.



Case length and level of activity increase with each age bracket.





The required **response time** (immediate, 24-hour, 2-5 days, or 10 days) have the greatest impact of any variable on case length and level of activity.

The shorter the required response time, the shorter the case but also the greater the intensity of activity.



**Housing-related** and **financial abuse** variables have some of the strongest upward impacts on case length and level of activity.

**Substance abuse** and **homelessness** were both negatively correlated with case length and levels of activity.

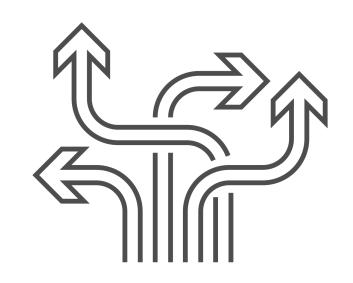
In this data, physical, mental, and developmental issues and disabilities, as well as age, were not strong drivers of case complexity.



While we can learn a lot about the drivers of case complexity by examining past cases, a key takeaway is that **it is very difficult to predict case intensity** even once we know the types of abuse, risk factors, and many other variables.

Before the first client visit, available information only explains 25% of the variation in case length and level of activity.

These findings underscore the challenge of caseload management.



## Integrating the Findings . . .

Overarching Objective:

Effectively use program resources to meet diverse client needs.



#### What stood out?

Cases involving substance abuse = Short Duration

Cases involving a housing issue = Longer Duration

#### Likely due to:

- Insufficient Training.
- Ineffective connections to community resources.
- APS Worker Assumptions.
- High Caseload Pressures.
- The APS Service Model

#### High Risk Self-Neglect and Eviction Prevention Unit

- Six licensed (LCSW and MFT) APS Workers.
- A licensed (LCSW) APS Supervisor overseeing the unit.
- Lower Caseload than rest of the unit (6-8 new cases per month).
- Intensive training for APS Workers.
- Working with APS clients but taking a different approach.

#### Goals for the Unit

- 1. Maintain housing and prevent evictions.
- 2. Reduce unnecessary hospitalizations and use of emergency services.
- 3. Resolve complex cases of self-neglect including those with co-occurring abuse by others.
- 4. Collaborate with other city departments to address service needs.
- 5. Reduce likelihood of re-referral to APS.

## What types of cases?

Client is at high risk for eviction.

Client's home is an extreme health and safety hazard.

Frequently re-referred to APS.

Acute vulnerability due to cognitive impairment and mental illness.

#### **Intervention Approaches**

# Engaging the clients takes time.

- Specialized Self-Neglect APS Workers are required to conduct two face to face visits within a week after the initial home visit.
- Twice monthly visits required once a service plan is established.
- Follow up post closure.



## **Clinical Approaches**

- Motivational Interviewing
- Cognitive Behavioral Therapies
- Harm Reduction Strategies
- Trauma Informed

 Collaboration with department's nursing team to address chronic medical conditions.

# **Tracking Outcomes**

- Cognitive Status Mini-Cog
- Depression Phq-9
- Health Service Utilization -
  - Hospitals, Emergency Rooms,
     Outpatient Visits
- APS Outcomes Matrix



## How is it going?

#### Challenges

- Equity among staff
- Identifying appropriate cases
- Determining when to close the case

#### **Benefits**

- Strengths based
- New opportunity for staff
- Meeting the needs of our clients

# Sonoma County Adult Protective Services

An Evolving Model of Financial Specialization



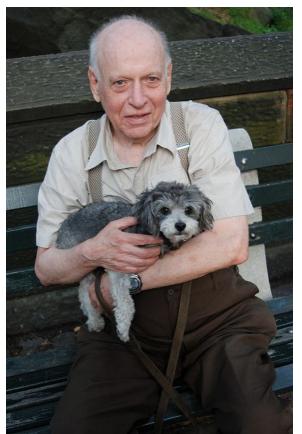
## Sonoma County, California

- 60 minutes north of San Francisco
- 500,000 population
- 9 cities (mostly rural and suburban)
- Large geographic area
- 60+ white and under 18 Latino populations are the fastest growing
- Santa Rosa is the County seat and has the 2<sup>nd</sup> fastest growing 85+ population in the US



#### Sonoma County Adult Protective Services

- County based with minimal State oversight in California
- 4 units that include 27 Social Workers (3 Investigations units, 1 Intake unit)
- 2 Public Health Nurses, 1 Community Liaison Social Worker
- 4 Supervisors and an APS Program Manager
- Counties mandated to operate APS in California since 1999
- Investigate elderly (65+) and dependent adult (18-64)



## Financial Abuse in Sonoma County

Why Specialize?

#### Case complexity

- Higher rate law enforcement involvement
- Family dynamics/discord
- Financial and legal concepts
- Time consuming



#### **Elder Financial Protection Team (EFPT)**

- Pilot July 2013 June 2014
- Cross-program collaboration between APS, Public Guardian & Linkages (a short term case management program)
- Team comprised of: 4 APS Social Workers, 1 APS Supervisor, 1
   Deputy Public Guardian, 1 Supervising Public Guardian, 1
   Linkages Social Worker and 1 Linkages Supervisor
- Weekly meetings
- Criteria for APS Referral to EFPT established

#### **EFPT Lessons Learned**

- Portrait of a typical client
- Goal to provide financial abuse case management to reduce on going risk was successful!
- Limited resources and legal constraints of the PG prevented real collaboration from taking place.



#### **Current Financial Team Structure**

- Each APS unit has 1 to 2 financial specialists assigned to it
- Weekly financial team meetings facilitated by a supervisor
- Public Guardian and Linkages attend once a month for consults
- Financial Abuse Specialist Team (FAST) is an available resource

# Benefits of Financial Abuse Specialization

- Increased social worker confidence
- Enhanced investigation skills& knowledge
- Improved client outcomes
- Increased law enforcement investigations/prosecutions



# **Challenges of Specialization**

- Unable to keep up with the increases in financial abuse cases
- Decrease in the skill set/knowledge among generalists when financial abuse issues arise in investigations
- Maintaining balanced caseloads
- Overall staff cohesion Us/Them attitude

## **Proposed New Model**

- Complex Cases vs. Simple Financial Abuses Cases
- All SWers will investigate financial abuse cases
- Financial specialist will investigate complex financial cases, act as secondary worker or "money buddy" with Generalists as needed.



## What is your experience with Specialization?



# Thank you!

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Link to the Controller's Office report, including national survey results: www.tinyurl.com/SFControllerAPS