



# Voluntary Consensus Guidelines for State APS Systems: What's New and How Are States Integrating Them?

November 16, 2020



# Disclaimer

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# Presenters



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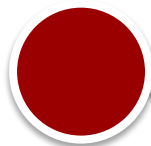
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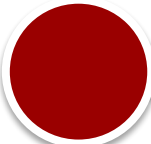
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# Today's Topics



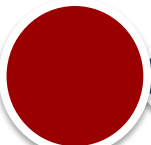
Orientation to the Guidelines



Updating the Guidelines



Developing the APS Research Agenda



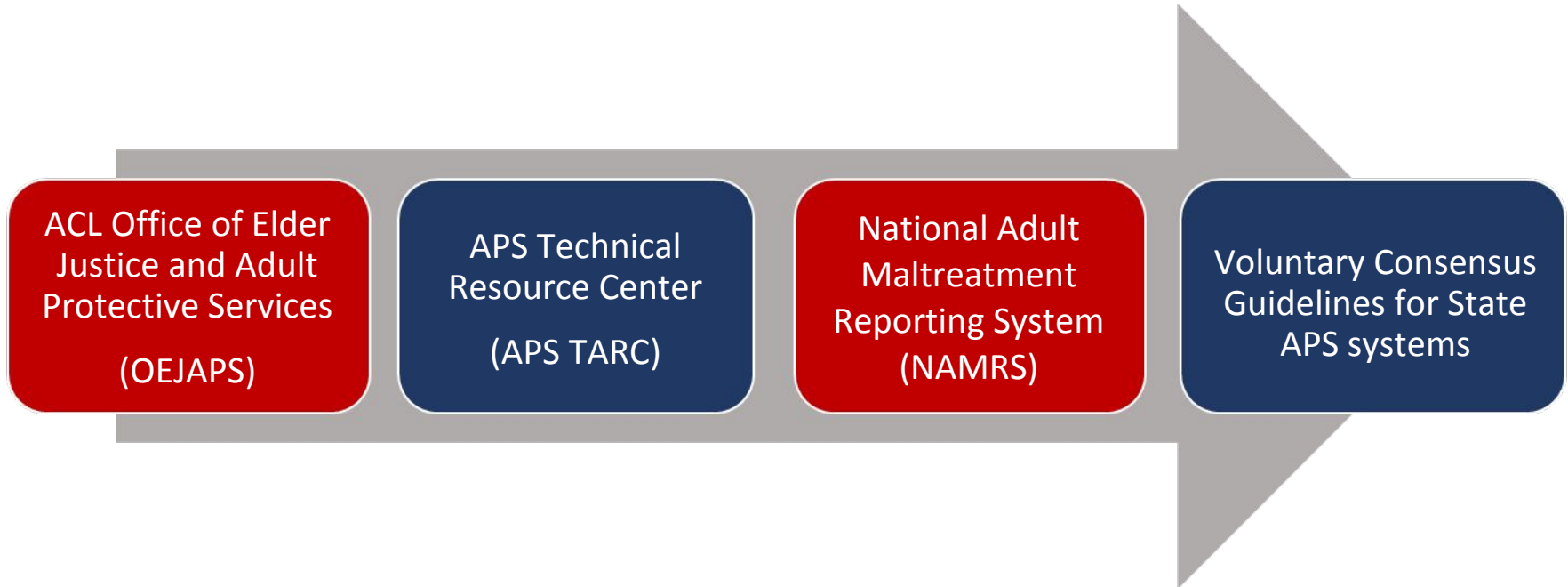
Pilot Project on Integrating the Guidelines



# Learning Objectives

1. Describe new recommendations from the updated Voluntary Consensus Guidelines for State APS Systems Guidelines (Guidelines)
2. Describe the development of the APS Research Agenda and identify key research topics for the APS field
3. Discuss how states are using the Guidelines
4. Examine lessons learned from states for integrating the Guidelines

# ACL'S Vision: Building a National APS System



# Goals of APS Guidelines

- Provide a core set of principles and common expectations to encourage consistency among APS programs
- Help ensure that older adults and adults with disabilities are afforded similar protections and service delivery regardless of where they live in the U.S.
- Support interdisciplinary and interagency coordination
- Enhance effective, efficient, and culturally competent delivery

The Guidelines do not constitute a standard nor a regulation and will not create any new legal obligations nor impose any mandates or requirements. They will not create nor confer any rights for, or on, any person.

ACL will update the Guidelines at regular intervals.

# ACL's Approach for the Guidelines

- ACL served as facilitator for the development of the 2016 Guidelines and for the updates of the Guidelines, including facilitating an extensive and wide-reaching stakeholder engagement and outreach process.
- ACL applied the Office of Management and Budget (2016) and National Institute of Standards and Technology (2001) process for creating field-developed, consensus-driven guidelines.
- To eliminate unnecessary duplication and complexity in the development and promulgation of the Guidelines, ACL's process remains consistent with the guidance of the National Institutes of Standards and Technology 15 CFR Part 287 (2020).



# Content: Seven Domains of APS Practice

1. Program Administration
2. Time Frames
3. Receiving Reports of Maltreatment
4. Conducting the Investigation
5. Service Planning and Service Implementation
6. Worker and Supervisor Training
7. Program Performance & Quality Assurance

# Updates to the Guidelines (2020)





# Sources of Guidelines Updates

- Literature review (2014–2018)
- Stakeholder comments
- Technical expert panel deliberations

# New Global Changes Made Throughout the Guidelines

- Created a glossary with definitions of terms used in the Guidelines to assist the reader
- Changed the word “victim” to “alleged victim” or “client” as appropriate
- Added NAMRS data and definitions to the background sections
- Added language in the introduction to clarify why references to child protective services/child welfare are included

# Updates by Domain or Element

1A. **Ethical Foundation.** Recommended the code of ethics and ethics policies be reviewed *annually*

1B. **Protecting program integrity** was moved up to follow Ethics

1B. Added “APS program policies and standards should be transparent and available to the public”

1B. Added section on Providing Information on Rights of Perpetrators

1E. **Mandatory Reporters.** Made it clear that LTCOs are not mandatory reporters

1E. Added language clarifying that it is recommended that mandatory reporters be immune from civil as well as criminal liability

1F. **Coordination With Other Entities.** Added LTCO, AG, P&A, Licensing, etc. to list

1H. **Staffing Resources.** Augmented content of Ratio of Supervisor to Direct APS Personnel to highlight role of supervisor and risks to clients and workers if limit is not maintained

# Updates by Domain or Element, cont'd

1M. **Community Outreach.** Added information on Reframing Elder Abuse

2C. **Closing the Case.** Added “Client goals have been achieved to the extent feasible”

4B. **Conducting an APS Client Assessment.** Moved Trauma-Informed Care to this section (from Ethics section)

4B. Clarified that APS programs screen for decision-making ability (but don't make the final determination on capacity)

4C. **Investigations in Residential Care.** Added that APS should notify the LTCO when APS is investigating allegations of maltreatment in residential facilities

5. **Service Planning and Service Implementation.** Changed language – used to be *Service Intervention*

5A. **Voluntary Service Implementation.** Added language to encourage programs to provide longer-term interventions for entrenched clients

5A. Added language saying services and supports should be those shown to be effective in protecting against negative outcomes, such as social support and programs that promote participation in community social outlets

5A. Added language about working in partnership with mental health practitioners

# Updates by Domain or Element, cont'd 2

**5B. Involuntary Service Implementation.** Added language about how using a Forensic Center can help make the difficult determination as to whether or not APS should petition for a guardianship

**6A. Caseworker and Supervisor Minimum Educational Requirements.** Added statement that candidates for APS employment should be screened for suitability and capability

**6B. Caseworker Initial and Ongoing Training.** Under Core Competency Training, added two new topics: Motivational Interviewing and Cognitive Deficits

**6C. Supervisor Initial and Ongoing Training.** Strengthened section on supervisor training, using materials from the APS Leadership Development Framework Report developed by Adult Protective Services Workforce Innovations (APSWI), Academy for Professional Excellence.

**7. APS Program Performance.** Divided into two sections:

- **7A. Managing Program Data.** Added language about keeping data long enough to ensure their availability for quality assurance needs
- **7B. Evaluating Program Performance.** Added language about collecting information on client outcomes

# Conclusion: Updating the Guidelines

- Updating the Guidelines is important to keep recommendations relevant and rooted in latest findings from relevant research.
- Stakeholder engagement is critical to make sure updates reflect the current experience of APS and those who work in partnership with APS.



# Development of the APS Research Agenda



# Purpose of APS Research Agenda

- Provides a research agenda focused exclusively on APS  
(Though the larger adult maltreatment field has created research agendas, there has never been one so focused.)
- Provides guidance to funders, researchers, and APS programs to help move the field forward
- Provides guidance on what research is still needed to create an evidence base for APS

# Ten Highest Rated Research Questions

	Research Question	Mean	Standard Deviation
1.	What is the impact of caseload size on the quality of investigations and interventions?	8.6	0.7
2.	What is the impact of caseload size on case worker performance, retention, satisfaction?	8.3	1
3.	What are the validity and effectiveness of existing screening and assessment tools and tools that are used by APS to measure intervention outcomes?	8.1	0.9
4.	What is the impact of interventions for perpetrators on client outcomes?	8	0.7
5.	What are effective processes for investigating allegations and making decisions regarding substantiation?	8	0.9
6.	What are relevant and meaningful outcomes at case closure, and the means to quantify those outcomes, that will provide meaningful information about the effectiveness of services in the lives of clients?	8	0.9
7.	What are longitudinal client outcomes (e.g., from case initiation to 1 year+ after case closure), and what are effective strategies for measuring longitudinal client outcomes?	8	0.9
8.	What is the effectiveness of specialized/focused interventions (e.g., relationship-based intervention, longer-term interventions, client navigators, peer support services), including impact on different populations/types of clients?	7.8	0.7
9.	What are best practices for identifying cases that require an investigation?	7.8	0.8
10.	What are best practices for effectively prioritizing cases?	7.8	0.8

# APS Research Agenda Themes

- Definitions
- Quality Assurance and Program Improvement
- Cost Impact of APS
- Caseload Size
- Worker Safety and Well-Being
- Time Frames
- Intake
- Tools (for Screening, Assessment, and Decision-Making)
- Collaboration
- Investigations and Findings
- Perpetrators
- Service Planning and Delivery
- Client Goals
- “Underserved” Populations
- Specialized Interventions
- Access to Expert Resources
- Involuntary Interventions
- Client Outcomes

# APS Research Agenda Content

- For each of the 18 themes, three sections were created for the APS Research Agenda:
  - **Importance** presents a brief summary of how the theme is significant to APS practice and policies.
  - **Existing Knowledge** presents an overview of what is already known about the theme, based on existing literature.
  - **Research Questions** presents the research questions that were identified by the field and experts for this theme.

# Highlights of the Research Agenda

- The top 10 questions reflect 7 of the 18 themes.
- The top-rated questions (#1 and #2) are about **Caseload Size** (total of 2 questions in this theme).
- **Client Outcomes** theme had the most questions (9), of which 2 made it into the top 10 (#6 & #7).
- Two themes had 7 questions each: **Tools** (#3 in the top 10) and **Service Planning** (none in top 10).
- Four themes had just 1 question each: **Definitions**, **Cost of APS**, **Client Goals**, and **Access to Experts**, none of which made it into the top 10.

# Conclusion: APS Research Agenda

- Research about APS should begin in consultation with APS to ensure relevance and feasibility.
- Researchers and practitioners need to work together in ALL phases of research.
- There is a lot we still do not know about APS as a whole, effective standards and practices, and program and client outcomes.
- The APS Research Agenda summarizes top priority research questions for APS field at this point in time.
- The APS Research Agenda will provide guidance to funders, researchers, and APS programs to help advance the evidence base of APS practices and policies.

# Integrating the Guidelines: A Pilot Project





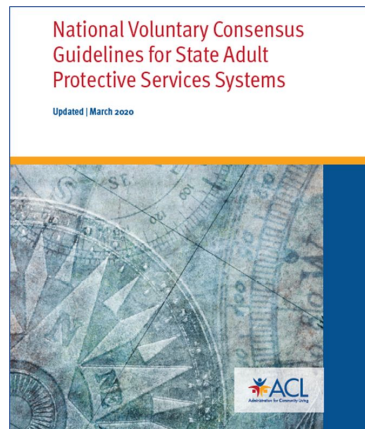
# Guidelines: Now What?

**ACL has published the Guidelines; now we want to know...**

***So what?***

**How are states currently using the Guidelines?**

**Can targeted technical assistance (TA) help state integrate the Guidelines?**



# Pilot Project: Purpose and Goals

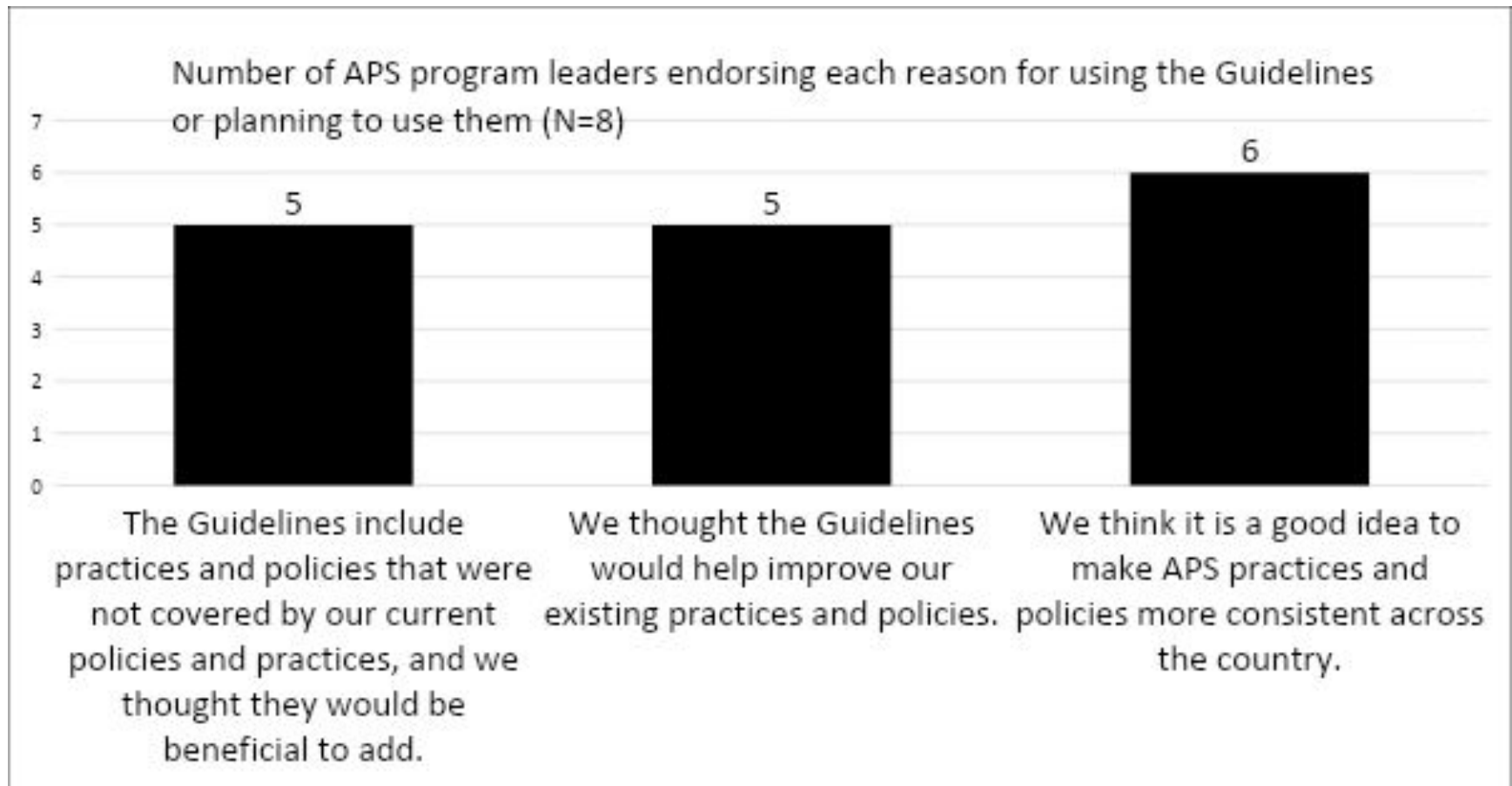
## 1. Retrospective Assessment

- Conduct survey and focus groups with states that have already used the Guidelines to make changes in their APS policies or procedures; gather lessons learned

## 2. TA Pilot

- Pilot the delivery of TA to support states in integrating parts of the Guidelines into their APS policies and practices

# Why are APS programs using the Guidelines?



# How are APS programs using the Guidelines?

- Changed the structure/organization of their state's APS manual to correspond to the structure/organization of the APS Guidelines
- Changed policies, including:
  - Code of ethics
  - Disaster and emergency preparedness
  - Client eligibility criteria
  - Protocols for conducting interviews
  - Ways to collect evidence
  - Interagency coordination
- Added training curricula or mandated training
- Developed a new quality assurance process

# TA Project Team and Participants

- **Funding from**
  - Office of Elder Justice and Adult Protective Services, ACL
- **Project Team**
  - New Editions Consulting, Inc.
  - Mary Twomey, Consultant
  - National Adult Protective Services Association (NAPSA)
- **Pilot Participants**
  - APS leadership in four states
    - Nevada, South Carolina, North Dakota, Louisiana



# TA Strategy/Approach

1. Met with the states to identify and discuss their needs and gaps, using a needs assessment
2. Developed short-term, intermediate, and long-term SMART goals (**S**pecific, **M**easurable, **A**chievable, **R**elevant, and **T**ime-bound)
3. Discussed possible products to meet short-term goals
4. Developed TA workplans to address short-term goals

## TA Strategy/Approach, cont'd

5. Collected existing resources/information from other programs and existing research
6. Developed TA content/products
  - Examples: crosswalk, revised policy manual section, findings matrix, decision trees, dissemination plan, training materials
7. Revised based on feedback and finalized
8. Evaluated TA and usefulness of the TA

# Outcomes of TA for Nevada

- Created guiding principles for APS workers to help ensure findings are determined in a consistent manner
- Created guidance for APS workers on when to support the allegation so that findings are determined in a consistent manner
- Created guidance for APS workers on APS' role when clients who are in crisis refuse services
- Created a decision-tree to assist workers in making decisions when they encounter clients in crisis
- Provided a presentation/training for APS supervisors and APS workers on how to use all of the products created for Nevada



# Outcomes of TA for South Carolina

- Developed a new Ethical Framework chapter in APS Policy that includes the Code of Ethics
- Developed a matrix document which outlines “whom we serve” and explains the South Carolina APS standard of evidence
- Incorporated supported decision-making language into APS Policy
- Highlighting supported decision-making in APS training through scenario-based learning

# Outcomes of TA for North Dakota

- Created guidance for APS workers on when to support the allegation so that findings are determined in a consistent manner
- Created a Guardianship decision tree to assist staff in making decisions about when to consider a guardianship
- Created a collection of case closure policies and common themes/practices

# Outcomes of TA for Louisiana

- Created a comprehensive APS program plan on responding during infectious disease outbreaks
- Created guidance for APS workers in Louisiana on worker safety during infectious disease outbreaks
- Created guidance for addressing APS worker stress, including how to support workers
- Educated the public about how to access APS and APS resources available during the pandemic

# Conclusion: Pilot Project

- Some states are already using the Guidelines to make changes in their APS policy, training, and protocols.
- Generally, states are eager to receive TA to help with integrating the Guidelines into their APS policies and practices.
- TA provides “space” for state leadership to focus on needs/enhancements that are often pushed to the back burner because of the press of day-to-day business.
- Products from TA project are being shared with other state APS programs (on APS TARC website).

# Links

- APS Guidelines and Related Documents
  - <https://acl.gov/programs/elder-justice/final-voluntary-consensus-guidelines-state-aps-systems>
- APS Research Agenda
  - <https://acl.gov/programs/elder-justice/research-agenda-adult-protective-service-aps>

# Contact Information

Questions and Comments?

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