

**REPORT TO THE TWENTY-EIGHTH HAWAII STATE
LEGISLATURE 2015**

**IN ACCORDANCE WITH THE PROVISIONS OF HOUSE
CONCURRENT RESOLUTION 118, H.D.1, ADOPTED BY THE
2013 HAWAII STATE LEGISLATURE**

**DEPARTMENT OF HUMAN SERVICES
SOCIAL SERVICES DIVISION
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**REPORT SUBMITTED BY THE DEPARTMENT OF HUMAN SERVICES TO THE 2015
LEGISLATURE PURUSANT TO HOUSE CONCURRENT RESOLUTION (H.C.R .)
118, H.D.1, ADOPTED BY THE 2013 HAWAII STATE LEGISLATURE**

In 2009, the Department of Human Services (DHS), Social Services Division (SSD), Adult Protective and Community Services Branch (APCSB) reduced their staff by 25% due to Hawaii's economic crisis. That same year, APCSB's statutory mandate as enumerated at Hawaii Revised Statutes §346-221, *et seq.*,¹ was expanded from providing services to "dependent adults" to include all "vulnerable adults". This expansion in the population that APCSB are required to serve resulted in a 51% increase in investigations. Consequently, APCSB was put in a precarious position to try to service more clients with less staff.

In 2013, H.C.R. 118, H.D. 1, requested that the Department of Human Services provide a report to the Legislature detailing efforts to improve and restructure the Adult Protective Services to provide a comprehensive delivery of services to vulnerable adults who are or are in danger of being, abused, neglected, or financially exploited. This report is to be submitted to the Legislature no later than 20 days prior to the convening of the Regular Sessions of 2014 and 2015, respectively.

I. Introduction

Adults, who are vulnerable to abuse, neglect, and exploitation, comprise a significant segment of Hawaii's population, and are a major concern and focus of the State's effort to protect its residents. The APCSB contracted the University of Hawai'i Center on Aging (COA) to conduct a study to evaluate their program and provide recommendations for the restructuring of APCSB from a policy, operational, structural/programmatic, and systems perspective. The study included a national scan of adult protective systems and existing evidence based practices. The COA submitted the final report to DHS in July 2014.

In alignment with the COA's report, the APCSB is working on a strategy to build upon existing SSD technical infrastructure and practices that will support a centralized intake system, improve their data collection system, and increase the use of evidence-based practices and tools. Other program improvement goals include: developing a standardized training curriculum and updating policies and procedures to include additional enhanced services. In order to achieve these goals, APCSB may need to increase capacity of its professional staff to better address the complex needs of Hawaii's vulnerable adult population. Consequently, as APCSB moves towards enhancement of services through evidence based best practices, increased budget implications may be necessary.

II. Summary of Findings

The COA study included an environmental scan of the State of Hawaii's APCSB, review and evaluation of nationwide APS systems, interviews with staff (45) and community partners, a survey of internal APCSB staff (31 respondents), and a review of APCSB statutory mandates, rules, policies and procedures, and protocols.

The COA report recommends that APCSB policies align with national evidence-informed best practices and services for Hawaii's vulnerable adults are restructured to include:

1. Improved assessment of victims' circumstances to better ascertain the protective response;
2. Enhanced investigation and case management;
3. Improved delivery of appropriate services that meet the needs of the clients;
4. Increased efficiency of APS' operations through the efficient use of available resources;
5. Reduction to the rates of subsequent reports and incidence of confirmed abuse, neglect, exploitation or self-neglect; and
6. Increased use of case-level and agency wide data for program administration, planning, evaluation and budgeting.

Using the COA's recommendations, the APCSB has identified the following priority areas that APCSB will focus upon in the upcoming fiscal years:

1. Policies and Procedures: Development of detailed policies and procedures that provide specific instructions for performing day-to-day activities (e.g., investigations, documentation). Case quality assurance policies and procedures will also be developed.
2. Protocols and Tools: Development and adoption of standardized intake, risk, safety, assessment tools and information resources for staff.
3. Infrastructure and organization:
 - a. Development of a statewide centralized intake system to ensure timely, consistent, review, and appropriate and accurate disposition of reports. Looking ahead, the APCSB is considering the necessity and feasibility of extending the centralized, statewide intake operations from a standard work week to a 24 hour/7 day per week capacity.
 - b. Along with the COA recommendations, APCSB proposes development of a case management program with supportive services and follow-up after investigation. APCSB believes this addition will be beneficial to APCSB clients. Often times, individuals and families require a "warm hand off" and monitoring of the vulnerable adults referred to services. The presence of transitional and support services may encourage vulnerable adults to be more amenable to engage in services and consequently reduce vulnerability and risk of additional report of abuse or neglect.
4. Staffing and Staff Training: Development of a core training curriculum for APS staff as well as regularly scheduled re-orientation and refresher trainings on daily operations and special topics, such as financial exploitation, pro-social uses of social media and/or dementia. The APCSB contracted with the COA to assist in the development and of a core training curriculum for APCSB.

5. **Interagency Relationships:** Strengthen collaboration with other organizations, agencies, and stakeholder to improve the delivery of case management referrals and development of transition services to the vulnerable adult population in Hawaii. Although there are current Memoranda of Understanding between APS and agencies such as the Adult Mental Health and Developmental Disabilities Divisions of the Department of Health, further exploration of collaboration is needed to determine potential areas of improvement. Relationships with other agencies such as the Executive Office on Aging, County Area Agencies on Aging, Aging and Disability Resource Centers (which are in various stages of operation) are developing, and more work needs to be done to strengthen collaboration and improve services. This is an on-going priority placed on APS county offices to reach out to its private and public partners.
6. **Build APCSB capacity to understand and deal with the issues of financial abuse/exploitation of vulnerable adults in Hawaii.** Financial abuse/exploitation of vulnerable adults is a growing and serious problem. APS has assessed the need for a second Financial Auditor position to address the increasing cases of financial abuse/exploitation. Specialized training for APS staff on this complex subject is needed in addition to identifying other inter-agency opportunities for training as well as enhanced collaboration with financial institutions.
7. **Build the capacity of APCSB to provide case management and services for complex cases.** Reports and investigations are increasing and are more complex due to the multiple harm/neglect issues in addition to medical issues involved with the vulnerable adult of senior age (60 and older). Increasingly, these cases require a triage of different investigation interventions that include social work, nursing/medical and financial expertise. APS has identified the need for additional resources for Oahu and nursing resources for Kauai and West Hawaii to address the growing caseloads.

III. Department's Recommendation for the Proposed Project Implementation for FY15

To restructure Hawaii's APCSB, the DHS proposes the following project implementation plan:

Phase 1:

1. APCSB will begin the process of redesigning their business model which will incorporate best practices and expanded support services. The best practices model refers to a range of refinements and changes, both incremental and broad-based. These changes will include and not be limited to: new protocols and assessment tools, development of a core training curriculum and quality assurance protocols, centralized processes, and adoption of interdisciplinary team and case management models.

Phase 2 (projected FY16, pending appropriation):

1. Develop and prepare for the implementation of APCSB system protocols. (Assessment tools, centralized intake processing, training curriculum, quality assurance, multidisciplinary teams, and case management models. etc.);
2. Network with community partners and other stakeholders on the changes to the APS system and their participation with APS; and
3. Monitor fidelity to the new model and examine implementation challenges.

ⁱ Act 154, adopted by the 2008 Hawaii State Legislature, amended Chapter 345, Part X. Adult Protective Services. The Act became effective on July 1, 2009.