APS MONTHLY REPORT TO THE DAIL COMMISSIONER

August 2014

To: Susan Wehry
Commissioner, Department of Disabilities, Aging and Independent Living

Prepared by: Clayton Clark
Director, Division of Licensing and Protection

Date: September 30, 2014

The Adult Protective Services (APS) program provides monthly reports at the request of the DAIL Commissioner. This is the monthly report for August 2014. The data table and attached charts derived from it provide information on the APS program from March 2014 to August 2014. Appendix A provides definitions for the data elements used in this report.

Notes on Report Data

There are no significant positive or negative trends in the data that require action at this time. The table and charts below show workload that is variable month by month.

The July report highlighted an increase in the percentage of intakes referred to investigation. This trend has continued into August and our preliminary September data, which will be reported next month. As a result of this increase, the average investigator caseload has increased from 30 to 36 (Chart 1) and the average open cases for the month has increased to 391 (Chart 2). As described last month, this change is attributed to process improvements made by intake staff in June and July to improve consistency in decision making.

APS has one investigator vacancy as a result of the departure of Lynn Holland-Kelley on September 12. APS expects to have a replacement identified and in position by the beginning of November.

Appendix B provides information on referrals made by DLP Intake to the Survey and Certification (S&C) of DLP. This information will regularly be included in APS Quarterly Reports. This information was requested by community advocates. The data shows the number of intakes S&C received from DLP Intake, the number of intakes referred to S&C investigation, and the number of investigations with at least one deficiency resulting.

Data Table

Month	March	April	May	June	July	August
Intakes Entered	308	351	402	340	387	358
APS Closed Contacts	183	211	255	219	214	195
APS Closed Contacts Referred to S&C for Investigation	104	107	133	110	122	91
Intakes Referred to APS Investigation	120	125	144	120	172	154
Completed APS Investigations	89	92	129	134	93	92
Substantiated APS Investigations	6	16	15	16	11	13
Unsubstantiated APS Investigations	83	76	114	117	82	79
Perpetrators Placed on Adult Abuse Registry	8	16	11	7	20	7
Total Open APS Cases (Average)	317	351	344	333	344	391
APS Investigator Caseload (Average)	29	32	31	30	31	36
Minimum APS Investigator Caseload	5	3	3	11	6	8
Maximum APS Investigator Caseload	45	43	52	44	44	54

Chart 1: Minimum, Maximum and Average APS Investigator Caseload Past Six Months

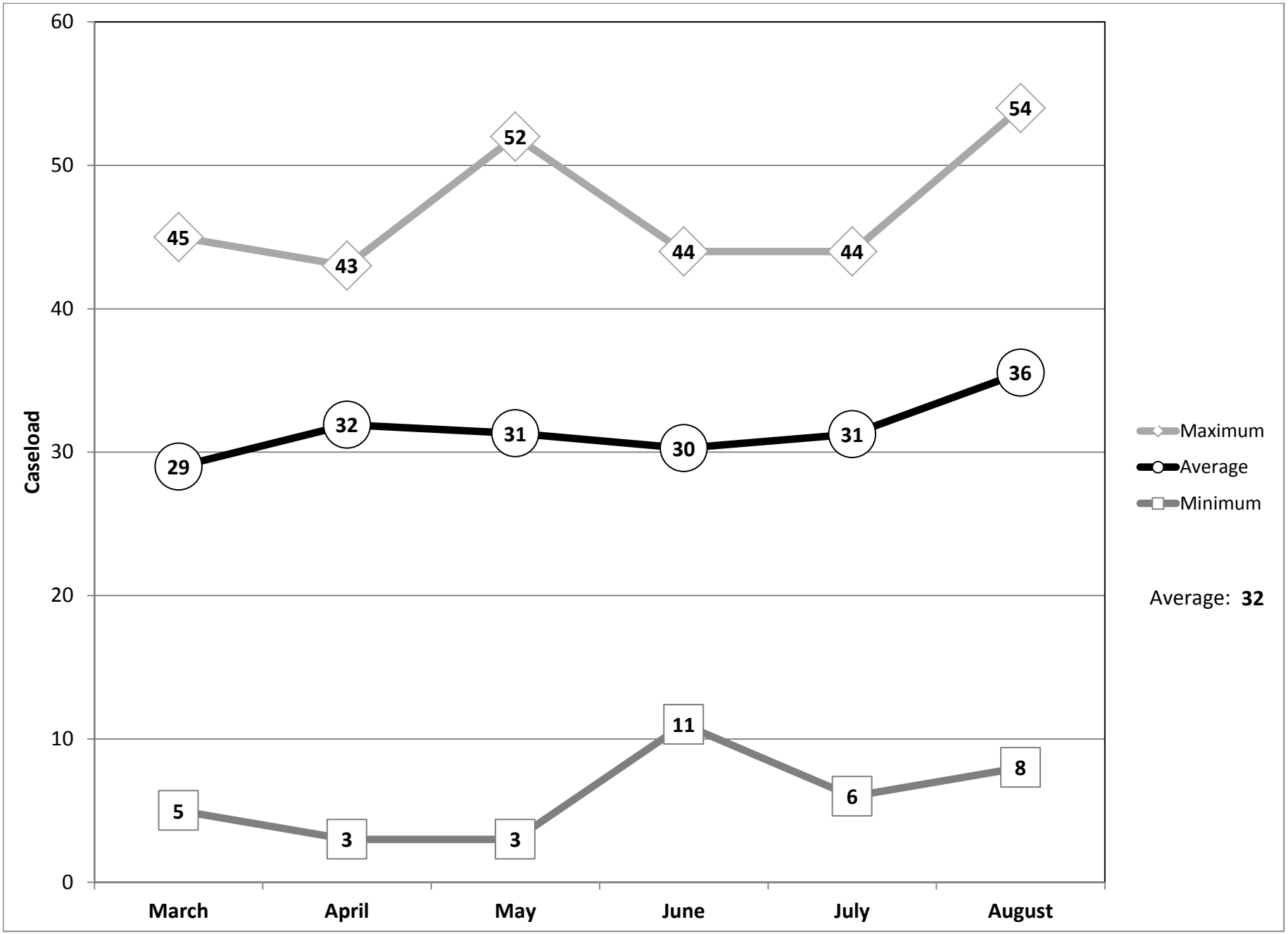


Chart 2: Division Intakes, APS Closures and Average Open APS Cases Past Six Months

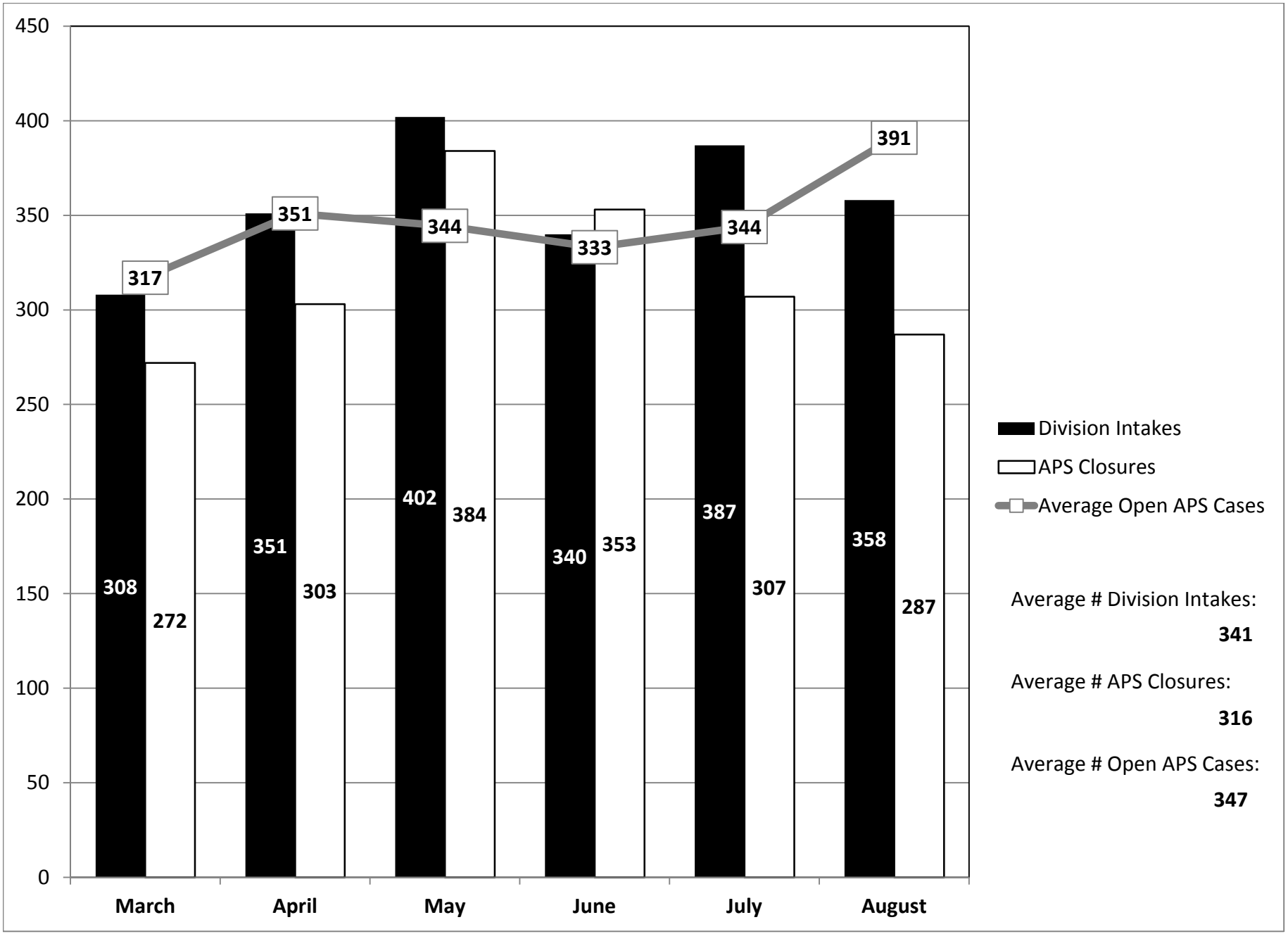


Chart 3: Intakes Referred to Investigation Past Six Months

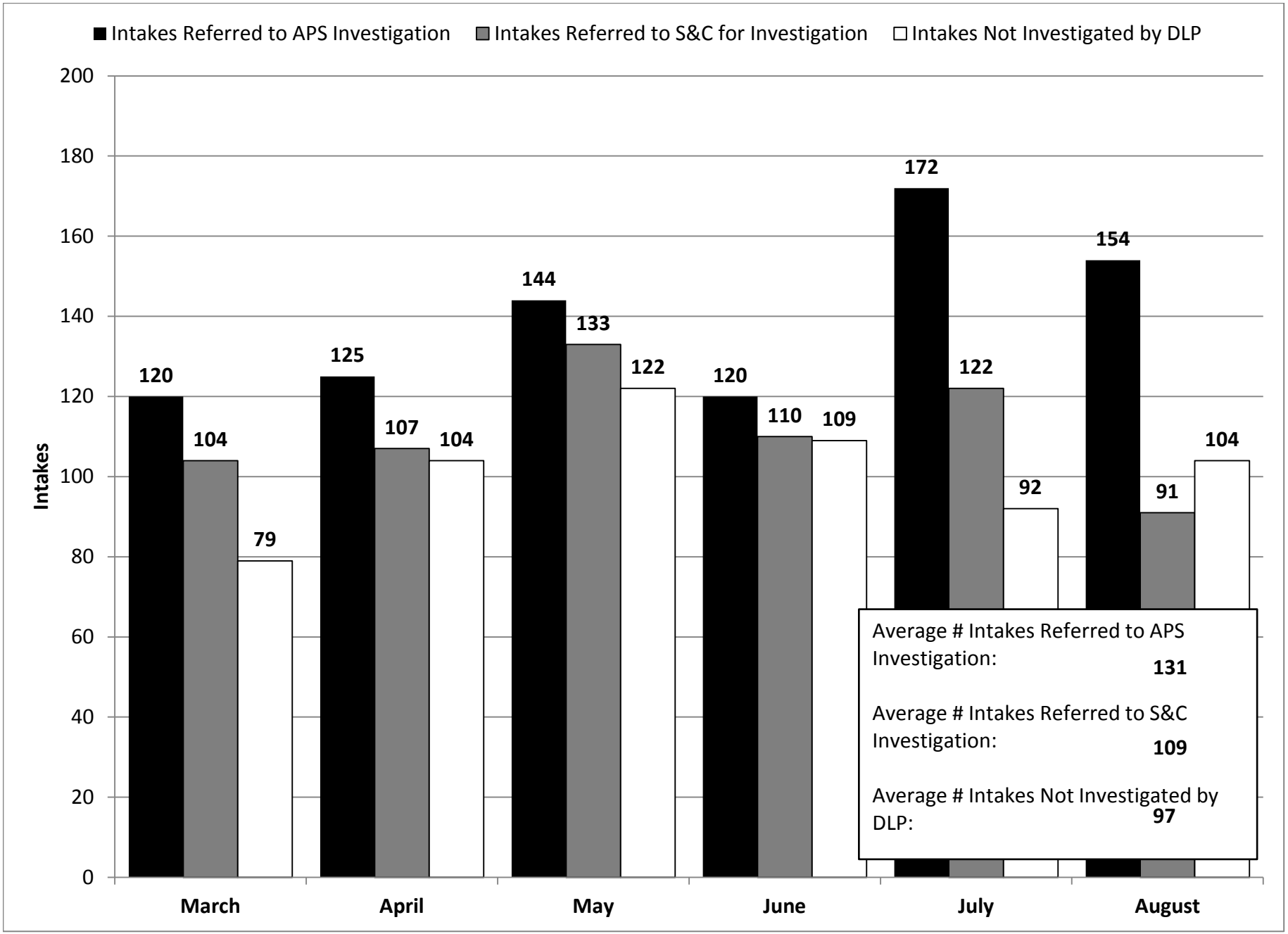


Chart 4: Percent Intakes Referred to Investigation Past Six Months

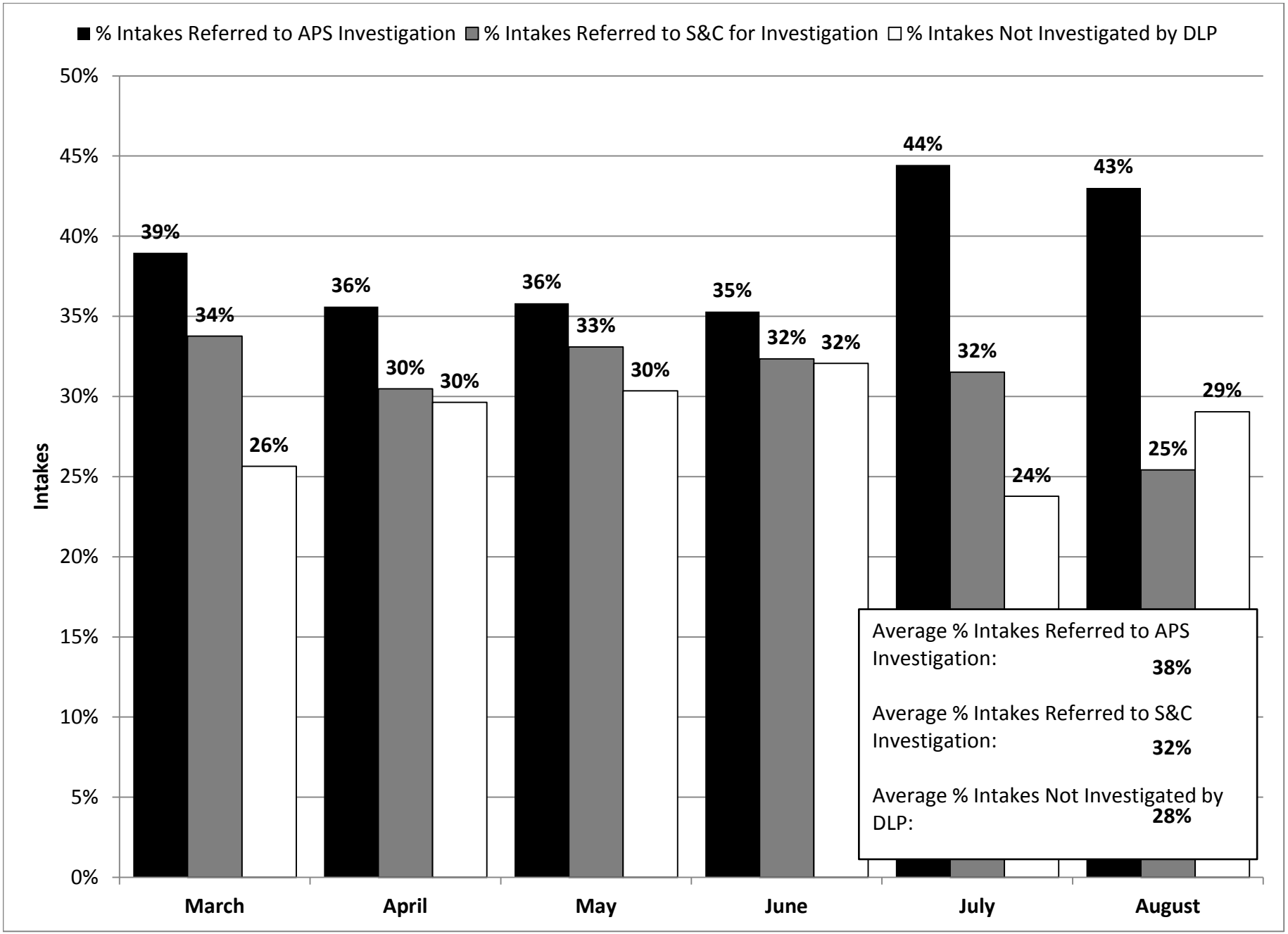


Chart 5: Number of APS Investigations Substantiated and Not Substantiated Past Six Months

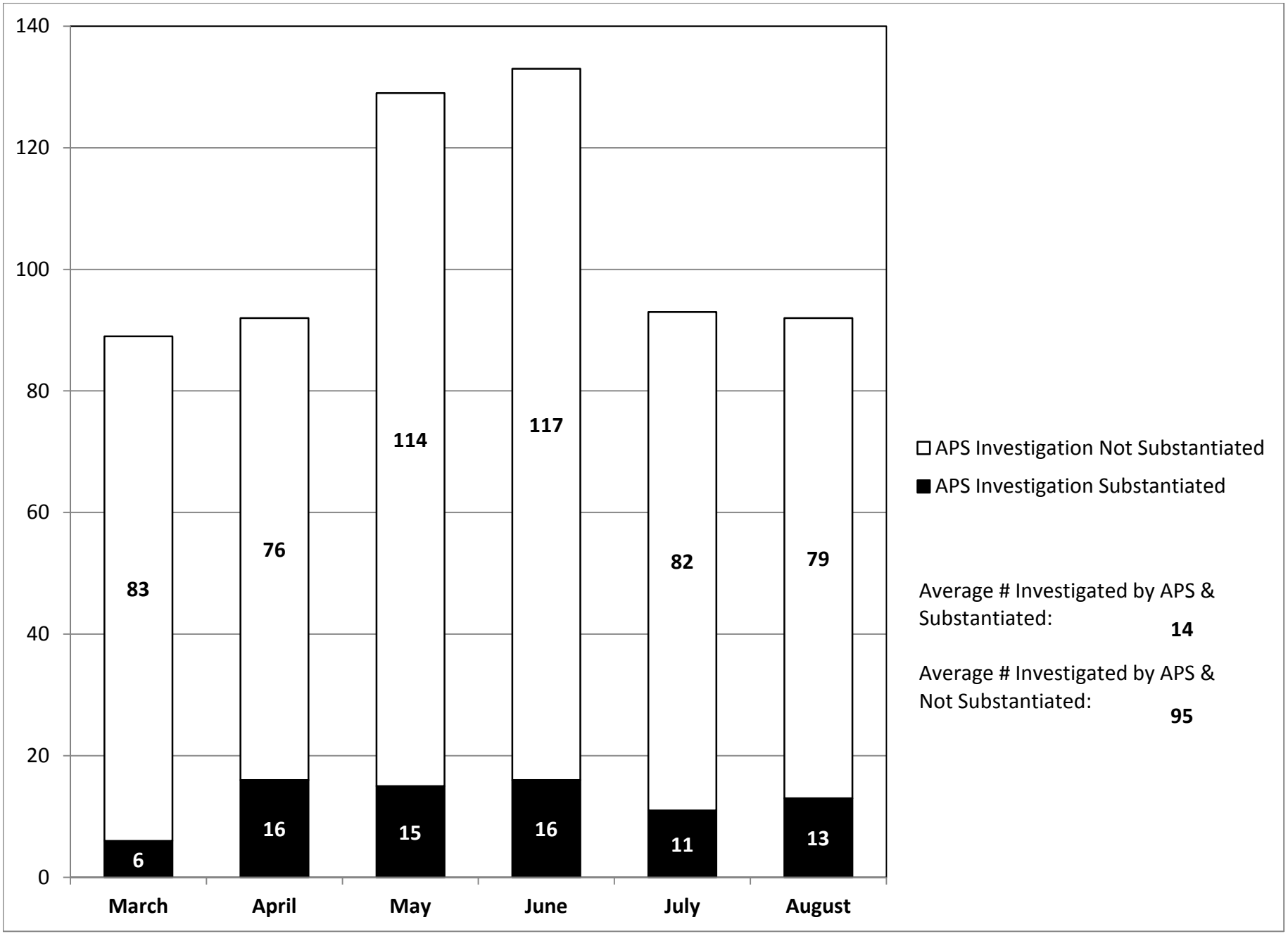


Chart 6: Percent of APS Investigations Substantiated and Not Substantiated Past Six Months

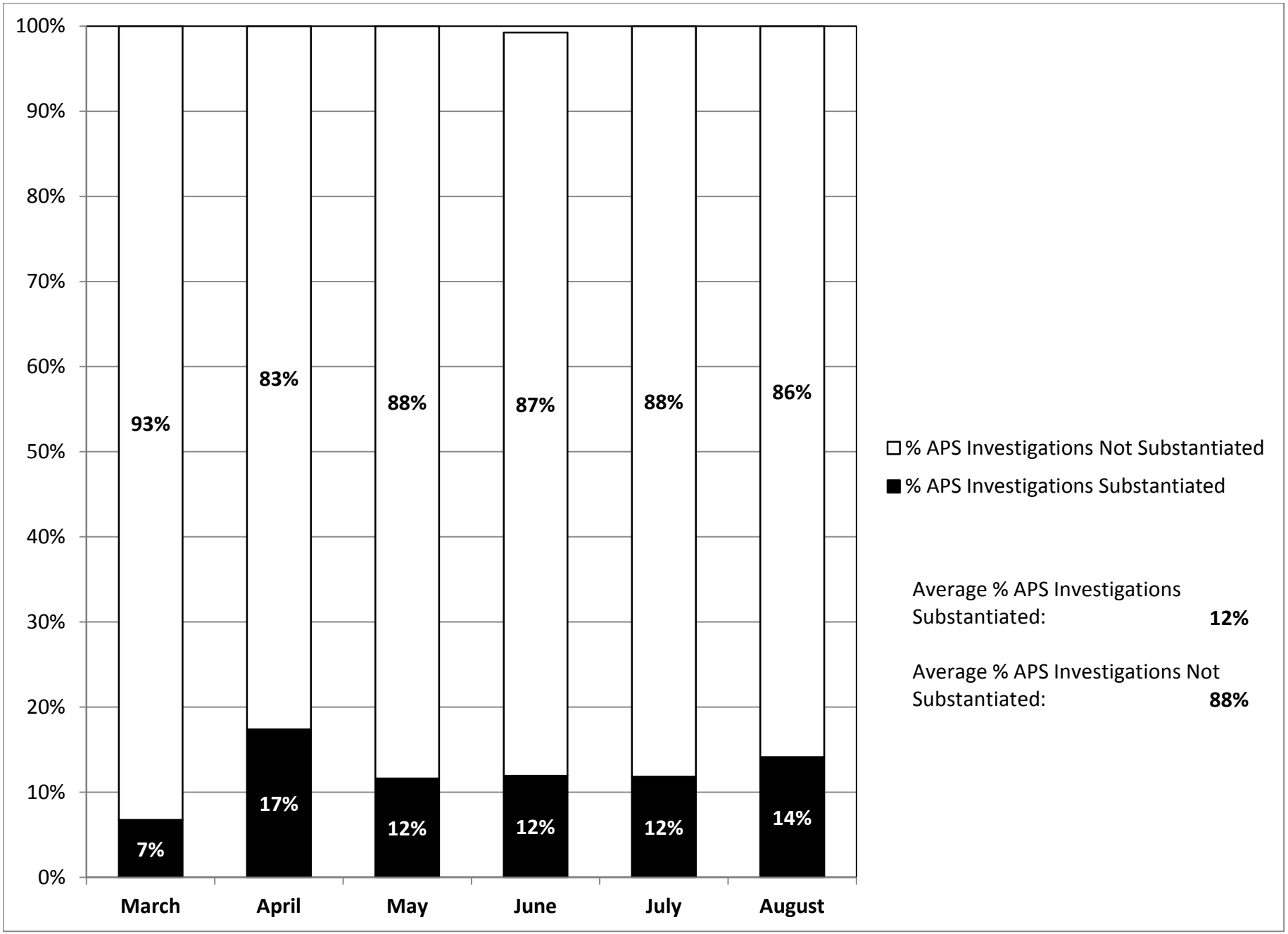
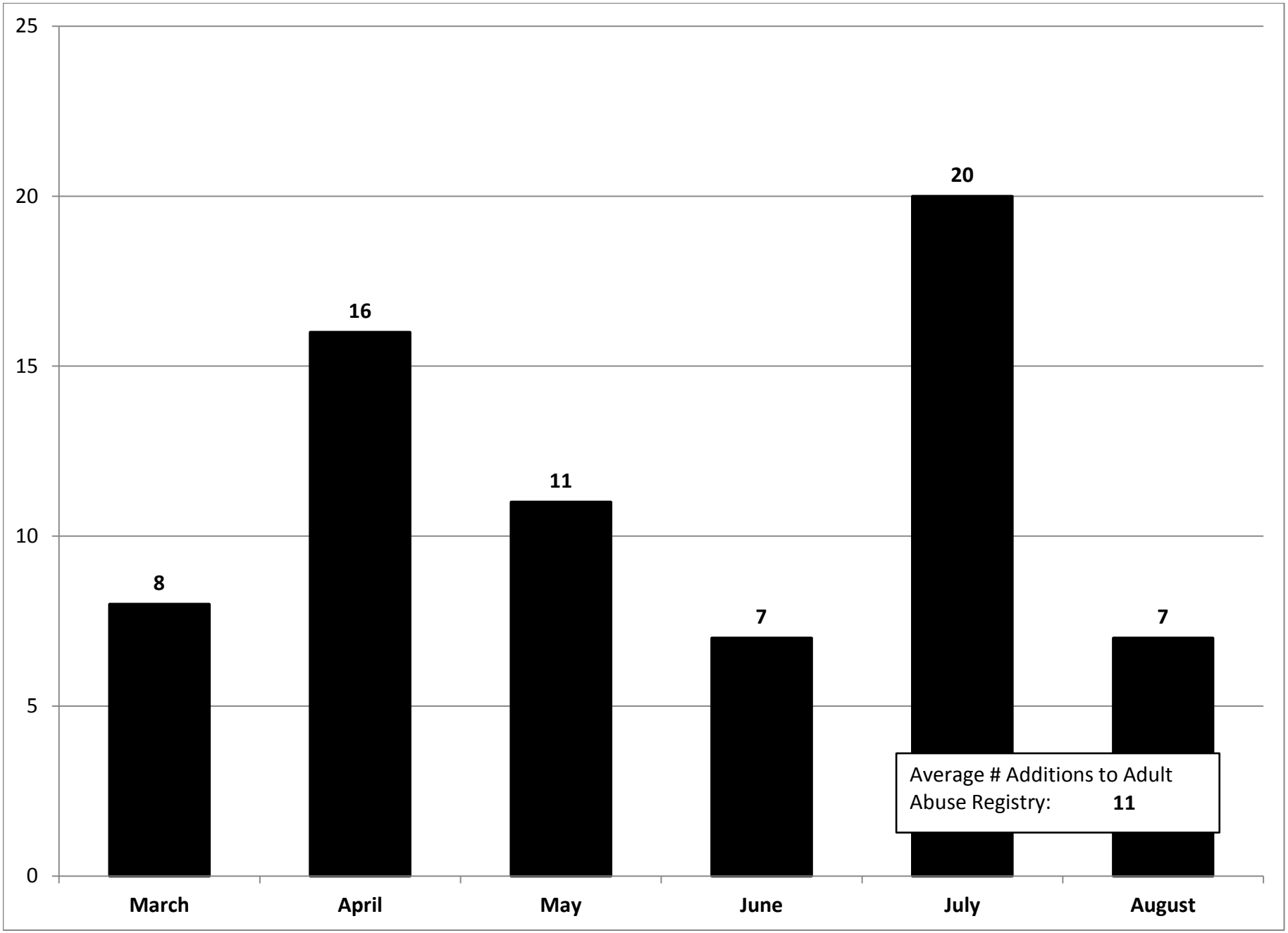


Chart 7: Adult Abuse Registry Additions Past Six Months



Appendix A

Definitions for Data Elements

Intakes Entered: The total number of intakes received by the Division of Licensing and Protection during the month through web intake, fax, phone, and mail.

All Closed Contacts: The number of intakes closed without investigation because the alleged victim is not a vulnerable adult and/or the situation described does not involve abuse, neglect, or exploitation.

Closed Contacts Referred to S&C: The number of intakes not investigated by APS but referred to Survey and Certification (S&C) because they pertain to a licensed facility.

Intakes Referred for Investigation: The number of intakes referred to an APS Investigator for investigation.

Completed Investigations: The total number of investigations completed.

Substantiated Investigations: The number of investigations that have been completed and are substantiated because the APS Investigator determined a vulnerable adult has been abused, neglected, and/or exploited by a perpetrator.

Unsubstantiated Investigations: The number of investigations that have been completed and were not substantiated by the APS Investigator.

Perpetrators Placed on Registry: The number of individuals placed on the registry after they have been substantiated and no appeal has been filed, or after they have been substantiated and their appeals have been heard and denied.

Total Open Cases (Average): The average number of cases open during the month.

Caseload (Average): The average caseload for investigators during the month.

Minimum Investigator Caseload: The minimum number of open cases for an investigator across all investigators during the month.

Maximum Investigator Caseload: The maximum number of open cases for an investigator across all investigators during the month.

Appendix B

Survey and Certification Background and Data

The Division of Licensing and Protection houses Survey and Certification (S&C). S&C licenses and surveys health care organizations to ensure compliance with applicable state and/or federal regulations. S&C has a contract with the Centers for Medicare and Medicaid Services (CMS) to survey federally regulated facilities.

S&C uses the Aspen Complaint Tracking System (ACTS), which is provided and maintained by CMS, to track all of its investigative work. CMS has full access to ACTS data and provides ongoing oversight of S&C's activities at federally regulated facilities that includes:

- Monitoring the timely completion of investigations.
- Reviewing deficiencies.
- Reviewing investigative work.

As part of the contract with CMS, S&C surveys the following facilities to ensure compliance with applicable federal regulations:

- Acute Care Hospitals (Federal)
- Ambulatory Surgical Centers
- Clinical Laboratories
- Critical Access Hospitals
- End Stage Renal Disease Units
- Federally Qualified Heath Centers
- Home Health Agencies
- Hospice
- Intermediate Care Facilities for the Intellectually Disabled
- Nursing Homes
- Outpatient Physical Therapy
- Portable X-Ray Units
- Rural Health Clinics
- Transplant Programs

S&C surveys the following facilities to ensure compliance with applicable state regulations:

- Assisted Living Residences
- Home Health Agencies
- Homes for the Terminally Ill

- Nursing Homes
- Residential Care Homes
- Therapeutic Community Residences

S&C investigates complaints and self-reported incidents at state regulated facilities using the same timelines as federally certified nursing homes.

S&C does not investigate the alleged abuse, neglect, or exploitation (A/N/E) of vulnerable adults by alleged perpetrators. S&C surveyors are mandated reporters that report evidence of A/N/E to Adult Protective Services through DLP Intake when discovered. In addition, when S&C encounters practices that deviate significantly from professional norms, they notify the Office of Professional Regulation.

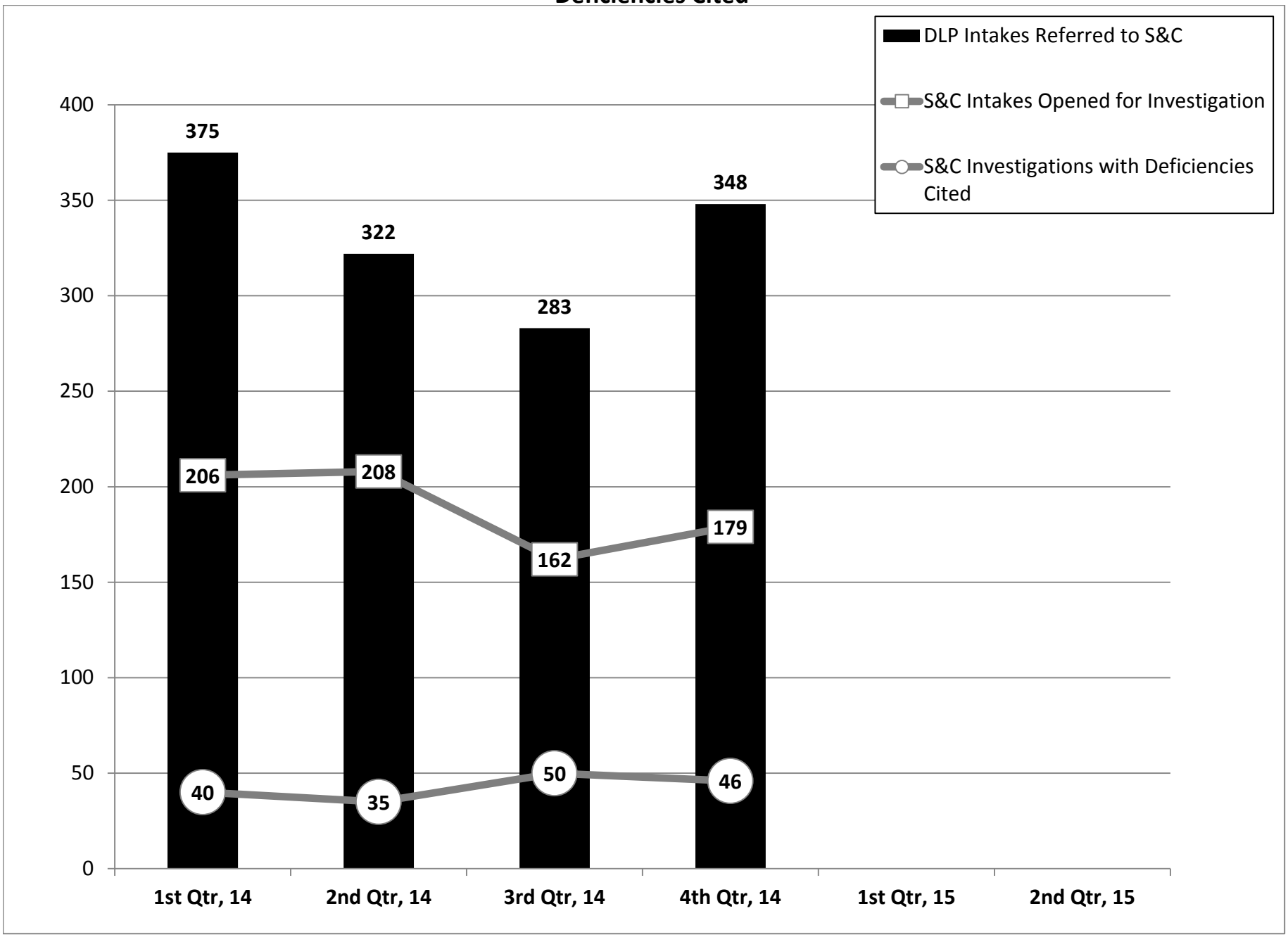
The chart on the next page shows:

- The number of referrals made to S&C by DLP Intake.
- The number of referrals S&C opened for an onsite investigation.
- The number of onsite investigations resulting in at least one deficiency.

Please note that the data does cross quarters. A referral to S&C may result in an onsite visit in a future quarter.

100% of referrals to S&C are reviewed and screened by qualified Nurse Surveyors with extensive nursing and survey experience.

Appendix B: DLP Intakes Referred to Survey and Certification, Intakes Referred to Investigation, Investigations with Deficiencies Cited



Source: Harmony for APS and ACTS