

# ADULT PROTECTIVE SERVICES

## STATUTORY MISSION

Pursuant to New York State Social Services Law Section 473, Adult Protective Services (APS) serves:

adults eighteen years of age and over, without regard to income, who, because of physical and/or mental impairments, are unable to manage their own resources, carry out the activities of daily living, or protect themselves from abuse, neglect, exploitation or other hazardous situations without assistance from others, and who have no one available willing and able to assist them responsibly.

## ELIGIBILITY CRITERIA

The New York State Code of Rules and Regulations, Title 18 Section 457.1(b) defines APS eligibility as follows:

Protective services for adults are provided to individuals 18 years of age and older, who, because of physical or mental impairments:

- 1) are unable to meet their essential needs for food, shelter, clothing, or medical care, secure entitlements due to them or protect themselves from physical, sexual or emotional abuse, active, passive or self-neglect or financial exploitation;
- 2) are in need of protection from actual or threatened harm, due to physical, sexual or emotional abuse, active, passive or self-neglect or financial exploitation or by hazardous conditions caused by the action or inaction of either themselves or other individuals; and
- 3) have no one available who is willing and able to assist them responsibly.

Referrals to APS are accepted for services only if they meet all three of these criteria.

## APS DIVISIONS

APS serves its clients through a Central Intake Unit and five Borough Offices. Each Borough office is comprised of Assessment, Eviction, Undercare, and Preventive Service Project units. For the period January through June, 2005, the caseload distribution among boroughs averaged as follows: 38% in Manhattan, 23% in Brooklyn, 18% in Queens, 17% in the Bronx and 4% in Staten Island.

Several specialized programs and the central administrative office are located at 330 West 34<sup>th</sup> Street in Manhattan.

Central Intake Unit screens almost 15,000 referrals annually. If the referral appears to meet the eligibility criteria (is "presumptively eligible"), the case is referred to the appropriate APS borough office for a complete assessment.

Assessment Units visit and assess approximately 7,400 referrals annually to determine their eligibility for services. Initial service plans are developed for those cases eligible for services.

Eviction Units visit and assess 3,700 referrals from City Marshals annually, all involving clients immediately threatened with eviction, pursuant to an agreement with the NYC Department of Investigation Marshals Bureau. Initial service plans are developed for those cases eligible for services.

Undercare Units implement service plans by applying for and maintaining services for clients. Pursuant to State mandate, cases are visited monthly and more frequently if necessary.

Preventive Service Project Units maintain services and monitor stabilized cases with the assistance of community contacts, visiting every third month.

Financial Management Unit assists approximately 1,600 of the Undercare and Preventive Service Project clients to manage their money by paying their bills and providing money for food and incidental expenses.

Division of Voluntary and Proprietary Homes for Adults (DVPHA) a separate unit under APS administration, provides room and board and in some cases personal care to 350 clients in approximately 250 private homes. DVPHA also screens referrals from individuals and agencies for placement in licensed congregate care Level II facilities (adult homes and community residences).

Division of Post-Institutional Services (DOPIS) a separate unit under APS administration, assists individuals being discharged from inpatient psychiatric facilities with discharge planning and transition to community Medicaid. Approximately 220 clients are served annually.

## APS CLIENTS

In FY05, APS served an average of 5,423 clients at any one time— 1,267 in Assessment Units, 320 in Eviction Units, 3,224 in Undercare Units, and 612 in the Preventive Services Project. In total, APS provided services to over 15,700 clients during the year.

APS clients are among the most debilitated and neglected members of the community – the frail elderly, the mentally ill, the medically ill, the developmentally disabled and the abused and exploited.

Most clients are isolated and initially hostile to accepting assistance, requiring skilled casework and in some cases involuntary legal interventions to protect them from harm. Many clients live in extremely unsanitary and unsafe conditions.

It is estimated that between 2000 and 2030, the number of older adults with mental illnesses will double from 7 million to 14 million. At the same time, APS is increasingly viewed as the last resort for an under 60 population of substance abusers and persons with mental impairments who refuse services.

Data from a sample of APS client service plan documents indicates that at the time clients are determined eligible for APS services approximately:

- 62% are 60 and over
- 7% are under 40
- 8% are developmentally disabled
- 25% are substance abusers
- 82% have mental disabilities (includes dementia)
- 63% have physical disabilities
- 59% are unable to manage finances
- 65% are threatened with eviction
- 16% exhibit self-endangering behavior
- 11% are financially exploited or abused
- 57% need assistance with activities of daily living

## **APS SERVICES**

Responding to reports of abuse, neglect, and/or exploitation, APS provides assessment services, develops and implements service plans, advocates for clients and makes referrals to resolve presenting problems, stabilize situations, and ensure the safety of clients. Using the least intrusive measures it can, APS assists clients to remain in the community or to be placed in a residence that provides a suitable level of care with the greatest degree of independence possible.

During FY05, APS:

- made over 11,000 home visits on Assessment and Eviction cases
- made almost 48,000 home visits on Undercare and Preventive Service Project cases
- completed heavy duty cleanings on over 1,000 cases
- served as case manager for over 650 clients receiving Home Care services
- requested over 1,100 RAU grants
- referred 1,236 clients for Guardians ad Litem (attorneys who provide assistance in Housing Court)
- requested 243 Orders to Gain Access (when client appears eligible but will not allow APS to complete an assessment)
- referred 616 clients for Article 81 Guardianship

## **CONTRACTED CASE MANAGEMENT SERVICES**

APS contracts with three voluntary agencies to serve as guardian for approximately 1,100 individuals.

A separate contract provides protective services to 900 APS clients in Brooklyn, the Bronx, and Queens.

## APS PROCESS CHART

STEP ONE	STEP TWO	STEP THREE	STEP FOUR
<p><b>Referral Source or Potential Client Decides to contact Central Intake Unit (CIU)</b></p> <p>The largest referral source is Family/Friends with Landlord/Building, Medical/Hospitals and Self-Referrals next.</p> <p>Referrals can be made by:                      Telephone                      FAX                      Internet                      Intranet</p>	<p><b>CIU Screens Referral</b></p> <p>Utilizing an automated computer system, a standard detailed script is used by CIU staff to record the interview and assist in determining presumptive eligibility</p> <p>Interviews are recorded electronically</p> <p>Separate Eviction Unit within CIU receives DOI referrals and all are accepted as presumptively eligible unless review indicates that HASA or HCSP is appropriate program for referral</p>	<p><b>CIU Accepts or Rejects/Refers to Other Services</b></p> <p>Referrals are reviewed by a Supervisor prior to acceptance as presumptively eligible or rejection as ineligible</p> <p>If necessary additional information is obtained through preliminary investigation via telephone</p> <p>Referrals that do not meet the APS eligibility criteria are referred to CBO's or other City agencies for services when appropriate</p> <p>Cases accepted as presumptively eligible are transferred electronically to the Borough Offices</p>	<p><b>Assessment and Eviction Units in Borough Offices Evaluate Referral</b></p> <p>Caseworker reviews referral, contacts referral source if requested, contacts other collaterals and searches other HRA automated systems for information</p> <p>First home visit due: within 24 hours of referral for emergency cases and within 3 working days of referral for non-emergency cases</p> <p>Caseworkers complete initial assessment and determine eligibility by using standard assessment form</p> <p>If client is determined to meet the APS eligibility criteria, case is accepted</p> <p>If the client is determined ineligible, client will be provided with CBO or other City agency referral, when appropriate</p>

STEP FIVE Assessment and Eviction Units in Borough Offices Develop Service Plan	STEP SIX Undercare and Preventive Service Units In Borough Offices Implement and Maintain Services	STEP SEVEN Exit APS Services
<p>Caseworker and supervisor develop service plan to address all presenting client needs, not just those noted in initial referral</p> <p>Caseworker completes applications for emergency services and then transfers to Undercare</p> <p>Services include:  <b>Benefits</b>            SSI and SSDI            Rental Assistance Unit Grants            Medicaid</p> <p><b>Housing</b>            Heavy duty cleaning            Home repairs            Relocation</p> <p><b>Home Care</b>            Home Attendant            Homemaker            Home Health Aide            VNS</p> <p><b>Financial Management</b>  <b>Legal Intervention</b>            Guardian Ad Litem            Community Guardian            Police/DA Report            Order to Gain Access</p> <p><b>Medical Services</b>            Affiliations exam  <b>Mental Health Services</b>            Psychiatric Exam            Intensive Case Management referrals</p> <p>Day treatment referrals  <b>Support Services</b>            Meals on Wheels            Senior Center referrals</p>	<p>Undercare units implement service plan</p> <p>Undercare monitors progress toward achieving service plan goals</p> <p>Undercare conducts at least monthly re-assessment of client service needs</p> <p>Undercare updates service plan and implements additional services as necessary to ensure stability</p> <p>If client is stable and has a community contact, transfer to Preventive Service Unit for quarterly visits</p>	<p>Case is closed when:</p> <p>Client placed in nursing home</p> <p>Client hospitalized and will not be able to return to the community</p> <p>Responsibility assumed by HASA or HCSP or DHS</p> <p>Article 81 Guardian is appointed</p> <p>Client moves out of State</p> <p>Client dies</p> <p>Client no longer meets APS eligibility criteria because risk is no longer present or a third party is willing and able to responsibly assist</p>