



Adult Protective Services Annual Report

Family and Social Services Administration – Division of Aging

Annual report

Sec. 30. The division shall report to the general assembly before February 2 of each year concerning the division's activities under this chapter during the preceding calendar year. The report must include the recommendations of the division relating to the need for continuing care of endangered adults under this chapter and must be in electronic format under IC 5-14-6.

IC 12-10-3-30

Adult Protective Services (APS) Legislative Report for 2015 as required by IC 12-10-3-30

Indiana APS units investigate reports of abuse and when substantiated, coordinate services for the victims. APS serves adults over 18 years of age. Eligible adults must be incapable of managing or directing their own care because of mental illness, intellectual disability, dementia, habitual drunkenness, excessive drug use or other physical or mental incapacity. They must also be harmed or threatened with harm by neglect, battery or exploitation. Currently, county hub prosecutors employ 17.5 full-time equivalent (FTE) unit directors and 28 FTE unit investigators. During 2015, APS received 34,721 calls for service; of those calls, 9,550 cases were opened. This report shows statistical trends for battery, neglect and exploitation of endangered adults over the past ten years, as well as program improvements and recommendations.

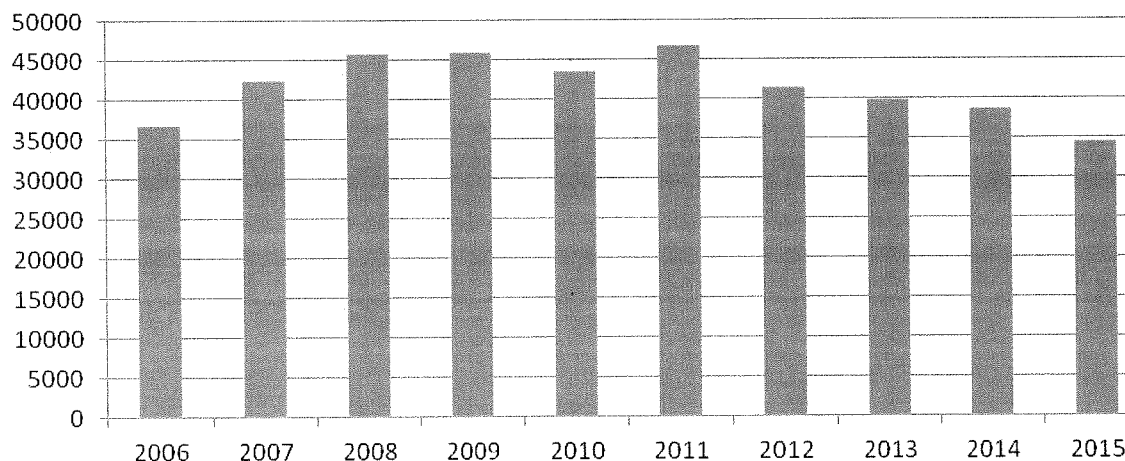
APS Funding

The Division of Aging provides grants to 18 county prosecutors to conduct APS investigations in their county and the surrounding counties. In 2015, the total grant was \$3.2 million, of which \$2.9 million was state funded. The remainder comes from Medicaid reimbursement and other Federal funding sources. In state fiscal year 15/16, FSSA increased the grant allocation by \$450,000 to supplement the efforts of regional APS units.

Ten Year Statistical Roll-up

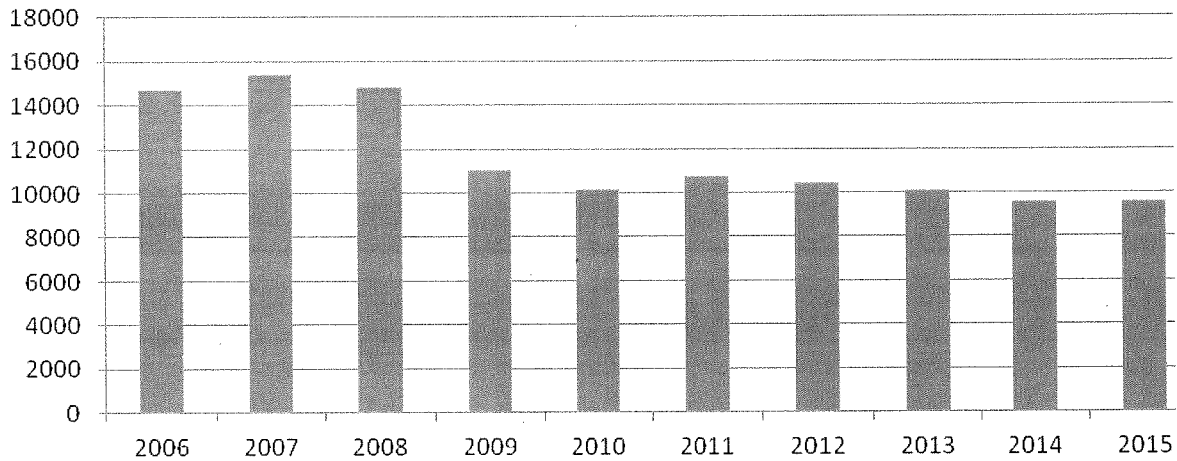
The first two charts show the number of calls for service and cases over the last 10 years. Those are followed by charts showing the number of allegations by type.

Calls for Service



* A call for service is any call for assistance made to an APS unit.

APS Cases

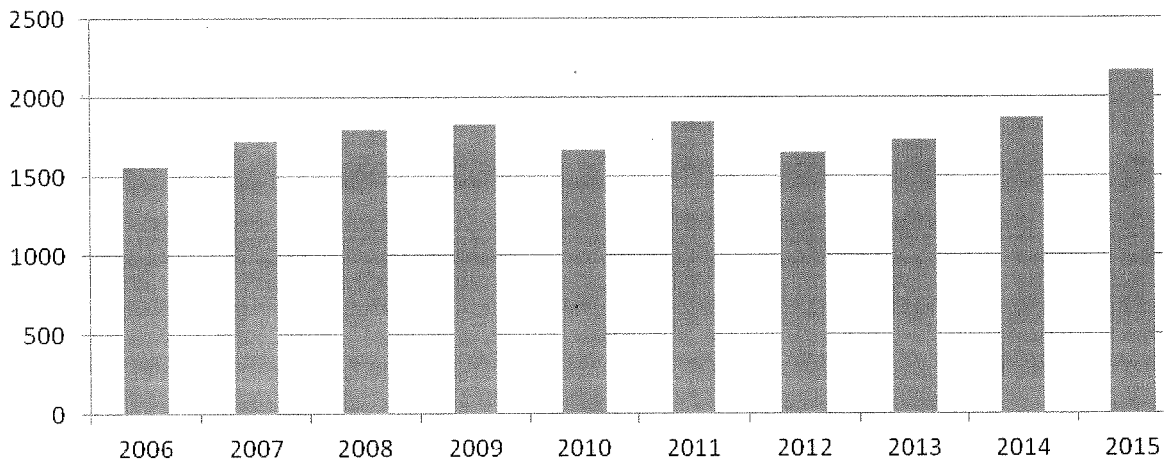


* A case is a call for service alleging abuse that is screened in for investigation.

Exploitation

Following the national trend, allegations of exploitation continue to increase. In 2015, APS received 2,190 allegations of exploitation, a 14% increase over last year. The following chart shows the number of exploitation allegations over the last 10 years.

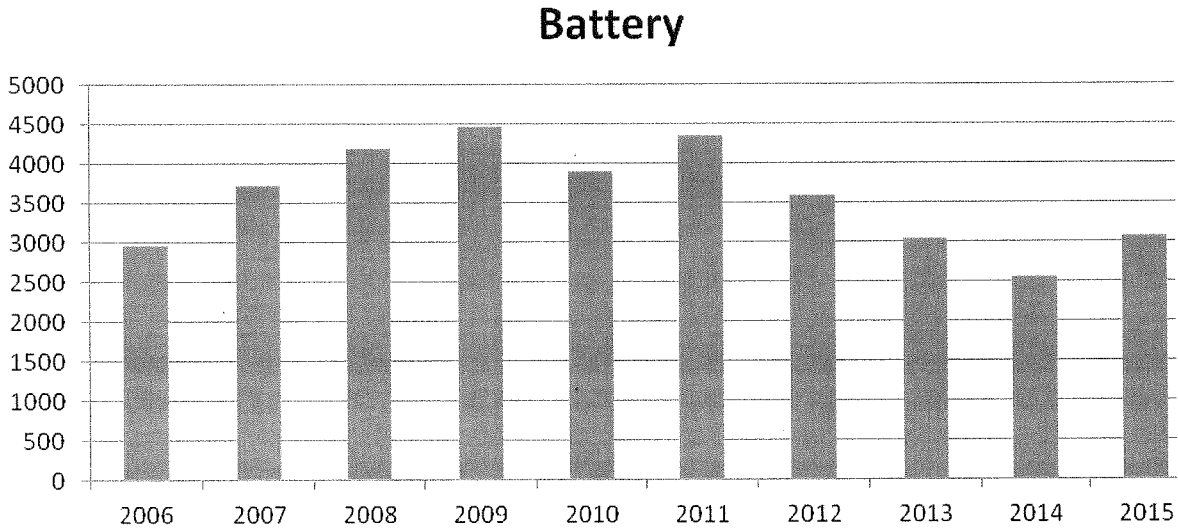
Exploitation



* Exploitation is the illegal or improper use of an individual's funds, property assets or services.

Battery

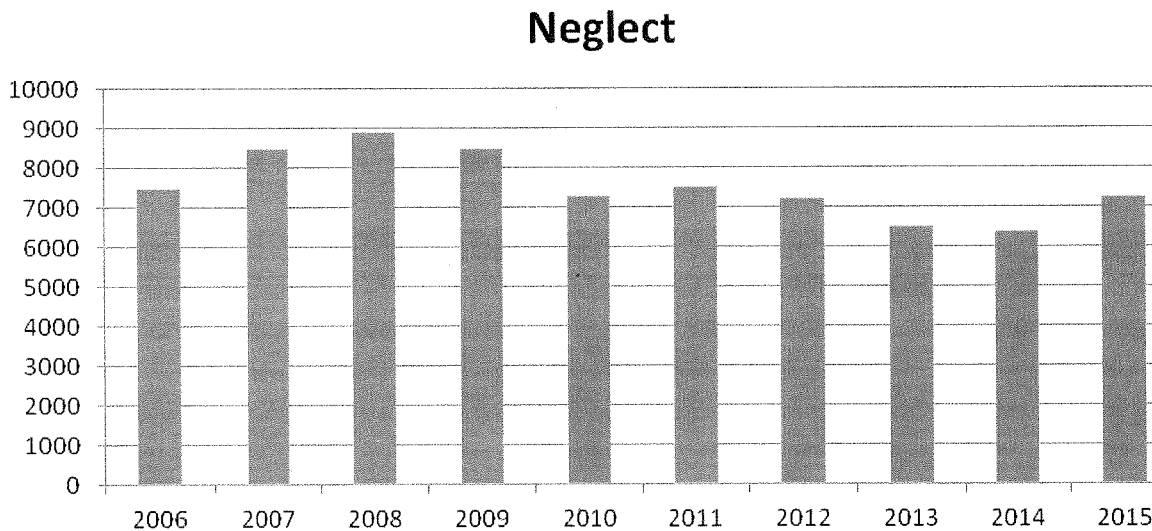
In 2015, APS received 3,125 allegations of battery, a 17% increase over last year. The following chart shows the number of battery allegations over the last 10 years.



* Battery includes physical, emotional and sexual abuse.

Neglect and Self-Neglect

In 2015, APS received 7,342 allegations of neglect (3,696) and self-neglect (3,646), a 13% increase over last year. The following chart shows the number of neglect allegations over the last 10 years.



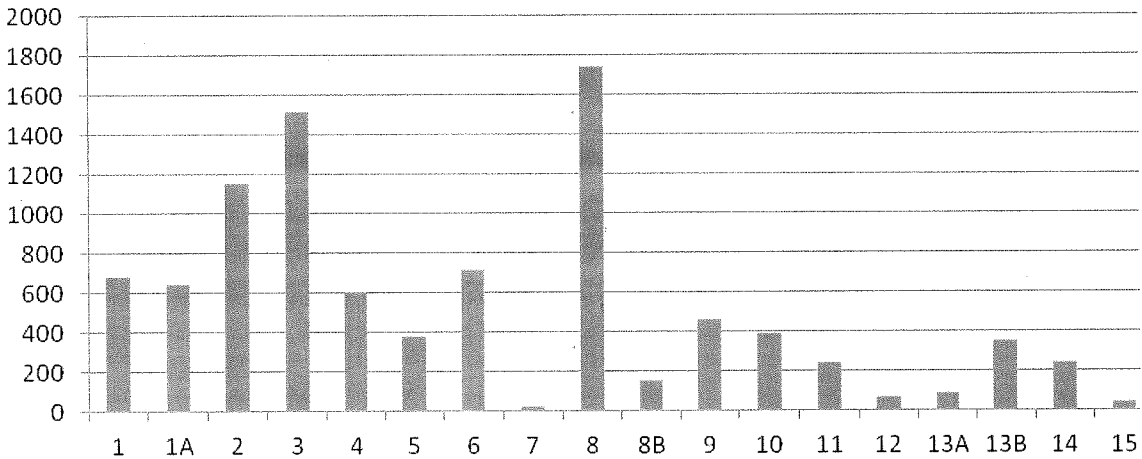
* Neglect means that the person taking care of the individual is unable or fails to provide adequate food, clothing, shelter or medical care.

** Self-neglect means the individual is unable or refuses to care for his/her self.

Volume of Cases by Unit

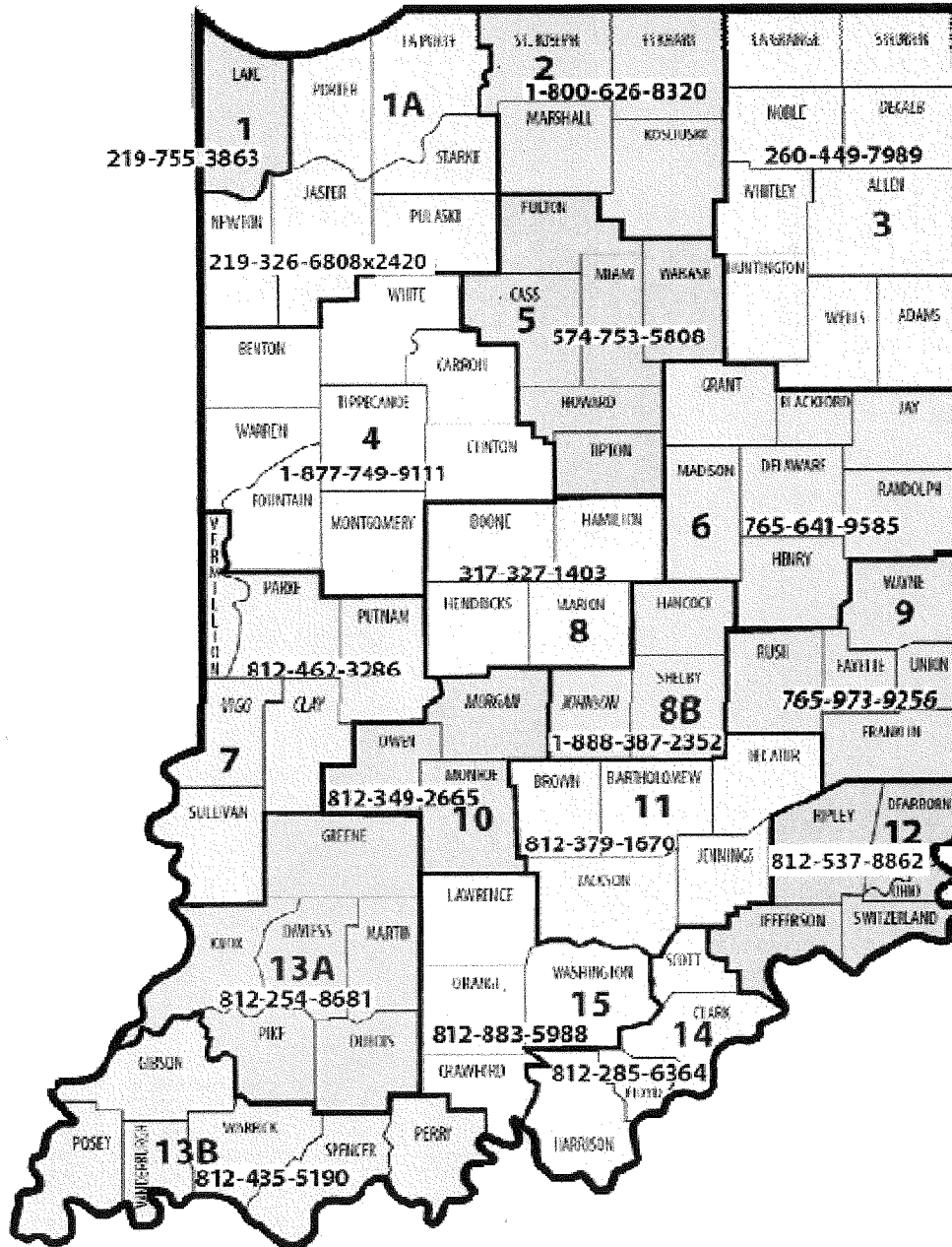
Annual case volume varies widely between the 18 county hubs. It ranges from 26 in Unit 7 to 1,750 in Unit 8. However, it is difficult to compare one unit to another due to lack of consistent operating procedures. Some of the unusually low caseloads may be a function of inconsistent data input by the local units. On the following chart, the units along the horizontal axis are identified in the table below and accompanying map on page 6.

Number of Cases per Unit 2015



Unit 1	Lake	Unit 1A	LaPorte	Unit 2	St. Joseph
Unit 3	Allen	Unit 4	Tippecanoe	Unit 5	Cass
Unit 6	Madison	Unit 7	Vigo	Unit 8	Marion
Unit 8B	Shelby	Unit 9	Wayne	Unit 10	Monroe
Unit 11	Bartholomew	Unit 12	Dearborn	Unit 13A	Daviess
Unit 13B	Vanderburgh	Unit 14	Clark	Unit 15	Washington

Indiana Adult Protective Services



Systemic Improvements

The Division of Aging has moved forward with several systemic improvements to the program.

- After a year's collaboration with county level APS Unit Director's and the Indiana Prosecuting Attorney's Council (IPAC), the Division drafted an APS standard operating procedures manual (SOP). Indiana law requires that the Division establish standards of practice with the concurrence of IPAC. (IC 12-10-3-12). Once implemented, this manual will standardize APS procedures throughout the state.
- The Division partnered with the University of Indianapolis Center for Aging and Community to conduct a caseload/work study. The study will determine the maximum number of cases an APS investigator can work in a month. This objective study will provide the bases of estimates for future APS staffing.
- This year the Division upgraded the 800-hotline system, allowing the hotline operator to collect the data, automate the report and forward it directly to the appropriate prosecutor's office. Prior to this, callers were required to dial a second number following initial contact with the hotline and no data was collected.
- The Division has begun preparing a formal APS training program for APS investigators. The program is based on the National APS core competencies published by the National Adult Protective Services Association (NAPSA). The formalized pre-service and in-service training will meet NAPSA certification standards.

Recommendations

Pursuant to IC 12-10-3-30 FSSA makes the following recommendations.

- **Staffing:** Evaluate the University of Indianapolis APS caseload study, once completed, to help provide an objective determination of the number of staff required. Address APS funding consistent with the recommendation of the interim study committee.
- **Emergency Placement:** There are no emergency or short-term placement options for persons who need to be removed from dangerous environments. Currently, APS can only refer clients to outside agencies for non-emergency services. This creates a service gap for those individuals in need of immediate assistance. The need to include a social services component and associated resources was a finding made by the interim study committee.
- **Central Intake and Consistent Data Collection:** A centralized APS call center staffed 24/7 would improve responsiveness and consistency in data collection. Each year, only 1,500 calls are reported through the state's 800-hotline. The majority of calls are received directly by the local APS units in the prosecutor's office. The state

hotline is staffed only during business hours. After hours, an answering machine records calls, and state APS staff process those calls the next business day. The need for an improved 800-hotline was a finding made by the interim study committee.

- **Training:** Implement a formal APS training program. Centralized training supports our efforts to create consistent practices across the state.