

Adult Protective Services – Field Operations (4280)

**Presented to House Finance Division III
LOB Room 210 March 2017
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Agenda

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- ▶ **Overview of Agency (or Division or activity)**
- ▶ **Key Programs / Services**
- ▶ **Population Served**
- ▶ **Delivery System**
- ▶ **Financial Summary**
- ▶ **Accomplishments**
- ▶ **Key Challenges**



Overview – Adult Protective Services

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- ▶ Carries out the legal requirements of NH RSA 161-F: 42-57, the Protective Services to Adults Law under the Adult Protection Program.
- ▶ Provides protection for vulnerable adults who are age 18 and older, who are abused, neglected, exploited, or self-neglecting.
- ▶ Strengthen Statewide adult protection efforts in conjunction with the elder justice system, law enforcement, Office of the Long-Term Care Ombudsman and community partners.



Adult Protective Services

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Types of Clients and Services

Protective Services

Most seniors and adults with disabilities live independently without assistance, however some face abuse or neglect by others and need trained professionals to advocate on their behalf. Others may simply be struggling with routine activities and benefit from in-home support services to maintain their health and independence.

APS helps by assessing each individual's unique needs, then developing a service plan to maintain his/her safety, health and independence.

The overall goal of the service is to promote safety of vulnerable adults, identify and meet the needs of incapacitated adults and to decrease the incidence of self-neglect and maltreatment by others.

Services include:

- ** Counseling and case management services provided directly by the APSW**
- ** Services authorized or coordinated by the APSW and provided by other individuals or agencies**
- ** Services coordinated by the APSW and provided by families, community organizations or volunteer groups**



Caseloads

Year *	APS Total	Protective Reports	Open Cases	Information & Referral	
2012	8,102	2,716	1,151	4,235	
2013	8,113	2,543	1,243	4,327	
2014	7,009	3,349	1,268	2,392	
2015	6,899	3,255	745	2,899	
2016	7,155	3,724	735	2,696	
2017 *	4,118	2,016	610	1,492	

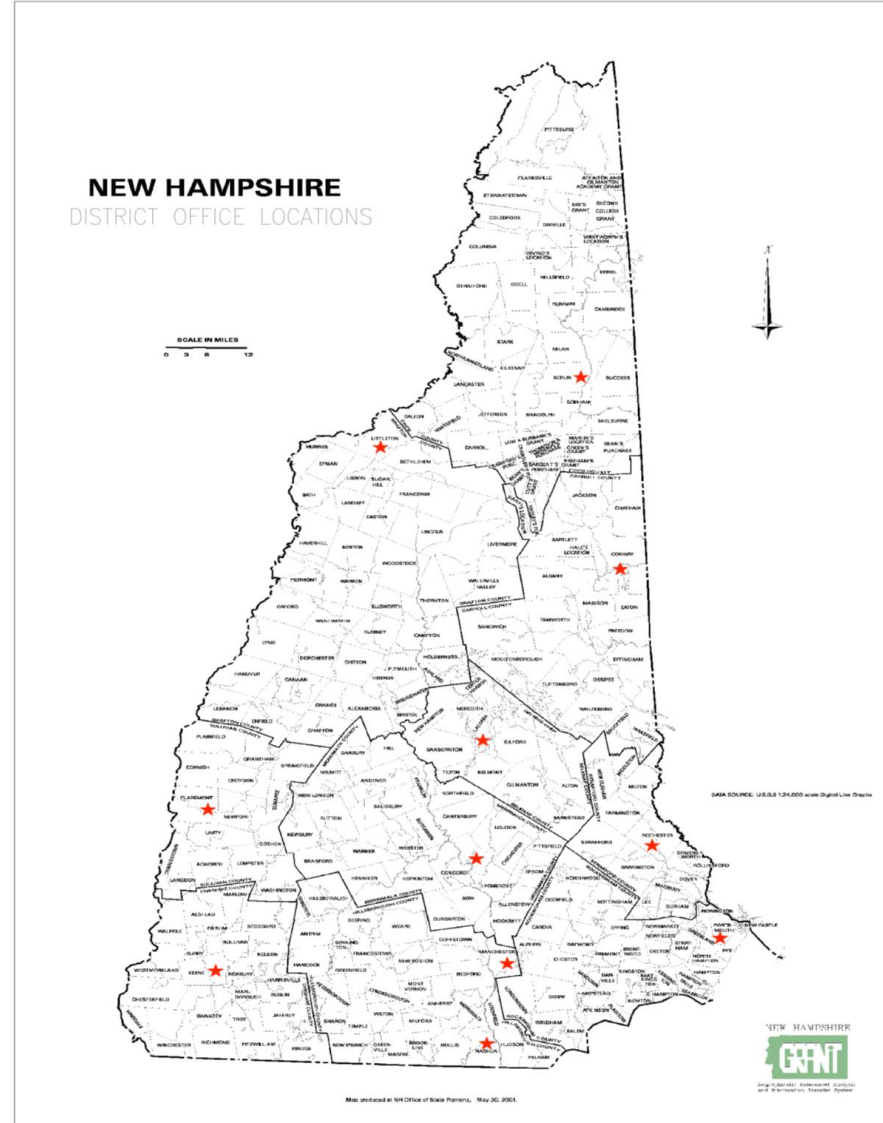
* Dates are as of State Fiscal Year end, 2017 through January 2017 only



Delivery System – District Offices State Staff

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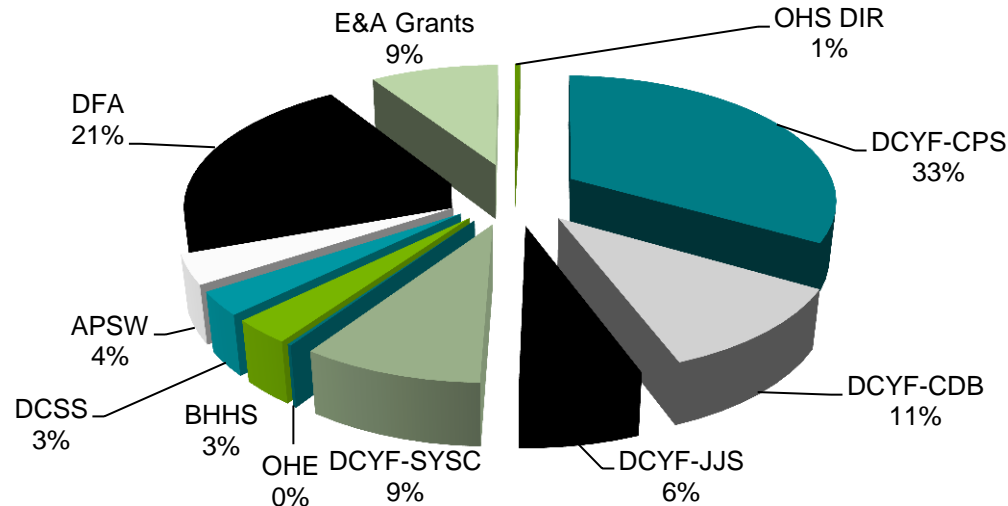
Location	Head Count	Admin
Berlin	4 FTE	
Littleton	2 FTE	
Conway	1 FTE	
Laconia	5 FTE	
Claremont	5 FTE	
Concord	3 FTE	3 FTE
Rochester	6 FTE	
Keene	5 FTE	
Manchester	7 FTE	
Southern	7 FTE	
Seacoast	6 FTE	
Intake/Registry	8 FTE (2 Vacant)	



Major Spend – General Funds – Office of Human Services

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Total SFY18 & SFY 19



Total	SFY 16 Actual	SFY 17 Adjusted Authorized	SFY 18 Agency Request	SFY 18 Governor's Budget	SFY 19 Agency Request	SFY 19 Governor's Budget
Total Funds	\$240.1	\$260.9	\$281.6	\$287.1	\$283.7	\$289.3
General Funds	\$123.2	\$127.2	\$130.8	\$131.7	\$132.2	\$133.3
APSW GF	\$4.8	\$5.1	\$5.0	\$4.9	\$5.1	\$5.0
<i>Amounts in millions</i>						



Staffing – Office of Human Services

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# FTE 16-17	# FTE 18-19 Funded	# FTE 18-19 Unfunded	# FTE 18-19 Totals	%		Activity
	11	1	12	1.3%	4200	OHS Director
322	380	12	392	41.8%	4210	DCYF - Child Protection
10	10	0	10	1.1%	4211	DCYF - Child Development
111	108	1	109	11.6%	4214	DCYF - Juvenile Justice Services
143	123	18	141	15.0%	4215	DCYF - Sununu Youth Service Center
8	10	0	10	1.1%	4220	Office of Health Equity
6	5	0	5	0.5%	4230	Bureau of Homeless and Housing
155	133	7	140	14.9%	4270	Division of Child Support Services
66	62	0	62	6.6%	4280	Adult Protective Services
52	46	0	46	4.9%	4500	Division of Family Assistance
9	9	1	10	1.1%	4810	Elderly and Adult Grants



Key Accomplishments

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Staff Longevity/Retention

Average length of APS staff is 10 years

Centralized Intake

Considered Best Practice in that it brings about uniformity and a consistent methodology for assessing whether the information provided rises to the level of abuse/neglect. Also, lessens the confusion as to which office to report to.

Collaboration with Community Partners

Participation in community groups such as Elder Wrap teams. Helps to problem solve different cases and avoids duplication of services and gaps in service.

Key Partner in the Elder Abuse Summit

The overall goal was to develop recommendations for increasing collaborations, maximizing resources and creating effective responses to address the growing problem of elder financial exploitation in New Hampshire. Key activities included the planning and implementation of a multi-sector initiative in two phases. Professionals from criminal justice, banking, legal services and community supports were involved to develop recommendations which were then shared at five regional meetings across the state.



Major Challenges

Workforce at DHHS and Providers

APS currently has five offices with no clerical positions. Short staffing in other areas of the Department may impact timely eligibility for supports or services such as Choices for Independence.

The shortage of community providers impacts the ability for APS to provide remediation in a timely way for some of the challenging cases.

Aging Population

New Hampshire is the second fastest growing “oldest state”.

Opioid Crisis

We have seen an increase in more self-neglect cases involving substance misuse disorders as well as an increase in exploitation cases involving alleged perpetrators with substance misuse disorders. Some reports involve medication diversion while other exploitation reports involve an alleged perpetrator who is suspected to have substance misuse disorder using a vulnerable persons money or other assets.

