

An Assessment of the Need for an Adult Protective Services Program Report Highlights

HR 590 requires the LB&FC to examine the need for a protective services program for physically and cognitively impaired adults aged 18 to 59. Protective services include a 24/7 intake capacity, mandated reporting, investigations and risk assessments, case management plans, and certain short-term services. PA is one of only 8 to 10 states that do not have statutory protective services for persons aged 18 to 59.

Need for an APS program. To assess the need for an APS program, we reviewed safeguards in existing social service programs; reports received by the Dept. of Aging and counties; caseloads in states that operate 18-59 APS programs; comments received from government officials, providers, and advocates; and case studies.

➤ *Existing social services programs.* The social service programs and licensed facilities we reviewed (MH, MR, personal care homes, long-term care, home health, attendant care, and domiciliary care) provide varying degrees of protections to their clients. Some of the strongest protections are in the mental retardation programs. But even here there are significant gaps, including:

- clients must be registered in a state or county program to receive protections, and only about half of PA's mentally retarded citizens are registered in such programs; and
- if the abuse is occurring in the client's private home, neither the provider, county, nor state has the authority to conduct an investigation or require corrective action without first getting permission to enter the home, even if the victim is a registered client.

Also, in many programs, the investigations focus on facility licensing standards, not on the needs of a particular individual. Long-term care investigators, for example, can cite facilities for licensure violations, but cannot remove a resident from a facility or order specific actions regarding patient care.

➤ *Reports received by the Dept. of Aging.* In FY 2001-02, Aging received 716 reports of possible abuse for persons under 60. Because the Department has no jurisdiction to investigate these cases, this figure clearly represents only a fraction of the cases that would be reported if an APS program existed for this age group.

➤ *Reports to counties.* Several counties provide limited APS services using the Human Service Development Fund and/or county funds. But because these programs have no statutory basis, county staff may not enter a home or provide services to adults 18-59 without permission.

➤ *APS programs in other states.* In states with APS programs covering all adults, on average about 30% of their caseload are adults 18-59, with 42% of reports being substantiated.

➤ *Provider and advocacy groups.* Most, but not all, provider and advocacy groups we contacted offered at least qualified support for a state-mandated APS program. Advocacy groups, in particular, were concerned that any program contain strong protections for individual rights.

Cost and Administrative Placement. We estimate an APS program for adults 18-59 would cost about \$5 million annually. This estimate does not include any long-term service costs. The most feasible administrative homes for a program are the Dept. of Aging or DPW's Office of Social Programs. Aging has the experience and administrative structure to operate an 18-59 APS program, and they are independent from the DPW service system. DPW has certain advantages in that it operates many of the programs APS clients may eventually need. Placement in DPW would, however, mean creating three separate protective service programs: one for children, another for adults 18-59, and a third system for persons 60 and older.

Recommendations: We recommend the General Assembly amend the Older Adults Protective Services Act to create statutory authority for an APS program which: covers persons 18-59 with physical or cognitive impairments; places the program in the Department of Aging; allows county discretion for local placement; retains existing mandated reporting provisions; provides for coordination of activities; and provides for a dedicated source of funding.