



APS: Seven Counties revisited during the COVID19 pandemic

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June 15, 2020

Introduction

In June 2018, The Center for Community Solutions interviewed Adult Protective Service (APS) departments from [seven different counties](#) as they started to implement the Ohio Database for APS. For the first time, all APS offices had a uniform reporting system with built-in protocols. At the same time, the state budget included a line item designating funds for APS, allowing for some counties to hire a dedicated APS worker for the first time. Two years ago also marked the height of Ohio's opioid crisis, which impacted all Ohioans, including older adults. Based on those initial interviews with APS departments, Community Solutions wrote an issue brief exploring how each of the seven counties addressed these three topics. We have now revisited each of the counties to learn what has changed in the past two years, with a specific look at how they have adjusted services during the COVID-19 pandemic.

General themes

The statewide reporting system has provided uniform tools and assessments across the state that had been lacking; however, many consider the system to be clunky, and they desire a more user-friendly upgrade. Counties that did not previously have an ability to report data have welcomed the reporting features. Conversely, counties that had existing client management systems have found the reports to be inadequate and cumbersome.

In the fall of 2018, after the implementation of financial institutions as mandated reporters, many counties saw an increase in financial exploitation cases. Family member opioid abuse has also been connected to financial exploitation. However, self-neglect continues to be the most common APS referral.

Strong support systems are important in good times, and they prepare communities to weather the bad times with reduced disruption. Those who had the help of programs to reduce social isolation, social service and medical providers who had a strong presence in the community were able to maintain varying degrees of service provision to the benefit of the older adults in the community.

Counties continue to see the impact of the opioid crisis; multiple APS offices have seen an increase in opioid-related referrals in the past two years. APS offices have developed strategies to work with both the older adult and addicted family member to mitigate the abuse, exploitation and neglect of the older adult.

In some counties APS reports have decreased, likely because fewer service providers have had in-person interactions with older adults. Some counties are finding that the clients have reached a crisis level of need by the time someone became aware of the situation and was able to make a report. In other counties, the number of reports has remained steady, but the number of cases screened in has increased, particularly for older adults lacking access to basic need and hygiene items.

Guidance from the state on how to proceed with APS interactions and investigations during the COVID-19 pandemic has been useful and followed at the county level. APS workers have found adaptable ways to continue to provide services during the pandemic, but most will return to the pre-coronavirus practice of in-person visits. Most counties reported benefits of staff working from home and are exploring to what extent this practice will continue long term.

Delaware County

2018 ACS 1-year estimates

Population: 204,826

Older Adults: 39,972 (19.5 percent of population)

Median Income: \$99,881

Delaware County APS welcomed the statewide reporting system two years ago and was pleased to have standardized assessments and tools. Prior to the implementation of the Ohio Database for Adult Protective Services (ODAPS), the agency had created its own assessments, which had been working well, but the agency is happy to be aligned with counties across the state. The new system allowed the county to have hard numbers backing up what they intuitively knew to be true, that self-neglect is the most common type of APS report. Delaware County also now has a dedicated APS worker. In the past the role was split between APS and Child Protective Services (CPS). The current APS worker's background in aging network services has proven beneficial to clients referred to APS.

At the end of 2018, financial institutions became mandated reporters for elder abuse. When this change went into effect, Delaware County experienced a noticeable increase in reported cases of financial exploitation. The number of cases that met the criteria, however, did not see the same jump. Many of the cases financial institutions report involve large-scale internet scams that originate overseas. Because the perpetrators do not have consistent access to the older adult, these cases generally do not fall within the purview of APS and are referred to law enforcement.

Since 2018, Delaware County has seen an increase in cases related to the opioid crisis. These cases generally involve adult children who are abusing opioids. They have moved back into their parents' household and have begun exploiting the older adult's finances. In a wealthy community, like many in Delaware County, people find the opportunity to sell the older adult's valuable personal items, cash in their investments, directly steal cash or credit cards, and take out loans in the older adult's name. Delaware County has a strong network of agencies for those seeking help for substance use disorders, but the county does not have specific treatment facilities or programs with a geriatric focus. At this time, such a program does not appear to be necessary.

A strong, well-supported system of services for older adults has proven to be invaluable for APS in Delaware County during a time when the coronavirus has upended much of how health and human services operate. Prior to the pandemic, older adults in Delaware County were well supported through programming offered by Source Point, an agency focusing on adults age 55 and older. Strong social service agencies, and the residents' generally high incomes, have helped meet social, housing, nutrition and health needs, resulting in a well-cared for and well-connected population of older adults. Older adults in the community often have people to turn to when they need help, a situation that has mostly held true during the past few months when the stay-at-home order has been in place.

CPS experienced a 50 percent drop in abuse reports in Delaware County. In stark comparison, APS reports have remained constant. On average, the APS office received 30 to 40 report calls per month pre-COVID19, with five to eight cases accepted for investigation. While the report calls have not changed, the number of cases accepted has nearly doubled, with 13 and 14 cases in the past two

months respectively meeting the criteria for investigation. Unlike mandated reporters for child abuse, typical reporters for elder abuse have remained engaged with the older adults and have had eyes on this population. Reporters have continued to identify and report instances of abuse, exploitation or neglect.

Cases meeting criteria during the pandemic have generally involved self-neglect. Older adults have, in general, been heeding the advice of public health professionals to stay home and avoid unnecessary contact with people, sometimes to the detriment of their own health and well-being. For example, a number of cases have involved older adults who have failed to seek necessary medical attention out of fear of contracting COVID-19 from their providers. Others have involved an older adult who has run out of basic need items, including personal hygiene necessities and food, and that person does not have a way to obtain these supplies. APS in Delaware County continues to be able to refer to the strong network of social service agencies to address issues that arise from APS reports during the stay-at-home order and voluntary recommendation.

Franklin County

Population: 1,310,300

Older Adults: 157,541 (12 percent of population)

Median Income: \$60,373

Franklin County has found that ODAPS has allowed more data collection than had been done previously. The increased access to data allows APS to provide quarterly reports to the county commissioners and an increased ability to conduct home visits in a timely manner. Adopting a new system, any system, requires adjustments among staff that take time to fully implement. Within about a year, the APS staff members were acclimated to the new system and using it effectively. Features within the system track the time a case is opened and the 72 hours a caseworker has to contact the client. The automatic time-keeping mechanism has increased their ability to manage workflow and ensure they are responding quickly to all referrals.

The opioid crisis continues to impact residents of Franklin County, including older adults. APS works closely with the Franklin County Opiate Task Force through the Sheriff's Office. APS has seen neither an increase or decrease in cases specifically related to opioids but continues to see children or grandchildren taking over the home of an older adult. Often the older adult is fearful of his or her family member and reluctant to take the steps to have the abusive family member removed. Working with the older adult on relationship management and offering substance abuse treatment to the perpetrator are strategies used by APS to improve the situation.

Franklin County has seen a dip in referrals, likely a result of the stay-at-home order issued during the coronavirus pandemic. The office processed intakes for just 80 cases in March, compared to 213 intakes processed in February. Prior to COVID-19, a large number of referrals to Franklin County APS came through medical and social service providers. Once stay-at-home orders were in effect, these professionals did not have eyes on older adults, and they were unable to make referrals. As the state has begun to reopen, referrals have increased again. Particularly noticeable is an increase in financial exploitation referrals as banks re-open.

Franklin County APS is following the guidelines developed by the Ohio Department of Job and Family Services. Prior to any in-person contact, caseworkers call and ask clients if they have had any known

exposure or current symptoms. If exposure has occurred or symptoms are present, all contact is done over the phone, and if deemed necessary, a law enforcement officer will conduct a well check. If no exposure or symptoms are present, one staff member conducts as much of the investigation over the phone as possible. If neglect or abuse is a concern, one caseworker will visit the home to see the person. Staff are supplied with masks, face shields, gloves, hand sanitizer and disinfecting wipes. Plastic bags are also given to caseworkers to hold paperwork for each case.

While caseworkers are understandably concerned for their own safety, they want to continue working as they are worried about the safety of older adults. APS staff are increasingly concerned about older adults visiting offices, businesses and services as the state re-opens. They are worried there will be an increased risk in transmission of COVID-19 from older adults to APS staff. Some older adults have refused services out of fear of contracting COVID-19, but most do not. APS has continued to be able to refer to all the service providers they had referred to prior to the stay-at-home order.

Having APS staff work from home has worked well, and APS will continue to follow the governor's directive that if you can work remotely you should. The department is continuing to invest in technology that allows staff to remain working from home. They are also thinking about how to best support staff and what working in the office or from home could look like in the future.

Hamilton County

Population: 816,684

Older Adults: 125,017 (15.3 percent of population)

Median Income: \$57,189

ODAPS has not changed much of how Hamilton County operates APS. The mandate to accept referrals of suspected adult abuse, neglect and exploitation remains the same regardless of the type of reporting system used. Prior to the implementation of the statewide system, Hamilton County used an internal database with robust reporting. Those in Hamilton County report that the ODAPS system has report functionality, but it is not user friendly. Hamilton County has been able to have the state create some reports, but those reports have not been as useful as those that came out of the internal database used previously.

Hamilton County has seen an increase in financial exploitation cases, likely as a result of financial institutions becoming mandated reporters. Self-neglect, however, is still the largest category of abuse. Hamilton County continues to see a high level of opioid addiction. They do not see a high volume of older adults with substance use disorder; more likely cases involve a relative's or caregiver's use of opiates that results in an unsafe situation for the older adult. Hamilton County APS has seen many instances of caregivers or family members overdosing, resulting in a negative situation for the older adult.

Since the stay-at-home order was put into place, referrals to APS have remained fairly consistent in Hamilton County. Currently, the lack of access to guardians for some APS clients is concerning. When the bid for contracts for guardianship services went out last year, Hamilton County did not have any bids. APS plans to meet with the prior contract agency in hopes that an agreement can be reached to provide this invaluable service.

To limit staff members in the Job and Family Services building, all APS staff and the manager work remotely. When necessary for staff to work in the community, they wear masks and gloves on visits and practice social distancing. Prior to making a visit, the intake staff asks specific questions to determine if clients have symptoms or are at risk for the virus. They then advise the caseworkers accordingly.

Thus far, staff feel safe conducting the work of APS. Practices are in place to protect both the staff and the older adult clients. Some agencies in Hamilton County have had to temporarily suspend seeing clients in their homes as a result of COVID-19. APS is one of the few organizations going out in the field as an essential service during the pandemic, and they must continue to do so to help keep older adults safe.

Following the end of the pandemic, APS will likely continue many of the safe practices designed to prevent the spread of illness. Practices include symptom checking and access to personal protective equipment (PPE). Hamilton County APS is exploring if remote work will continue beyond the pandemic.

Jackson County

Population: 32,524

Older Adults: 5,326 (16.4 percent of population)

Median Income: \$45,340

In Jackson County, ODAPS provides a structure to guide workers through assessing various aspects of an individual's well-being and helps workers make decisions. The system has created a uniformity among counties across the state. Details gathered through ODAPS help provide thorough information that otherwise may be missed if it's not on the assessment. Through implementation of the system, Jackson County recognized that a large number of cases involve an unmet mental health need or familial substance abuse, often accompanied by financial exploitation.

Jackson County has seen an increase in referrals for self-neglect and financial exploitation primarily. Opioids continue to be an issue in the community. Familial substance abuse contributes to family members or caregivers taking financial advantage of older adults in order to support their drug habits. In many cases, the alleged perpetrator has no home of their own and is financially supported by the elder, a situation that negatively impacts the older adult. Workers at Jackson County APS find that self-neglect is often a result of mental health issues, physical limitations and a lack of resources.

APS in Jackson County has seen fewer referrals since the coronavirus pandemic, leading to a concern about a lack of reports. The potential is greater for domestic violence and for an older adult's immediate needs going unmet during the stay-at-home order. With fewer service providers, such as therapists and home health care workers, seeing older adults face to face, fewer opportunities arise to identify instances of abuse or self-neglect. Additionally, social distancing lessens contact with other sources of support, raising concerns about isolation.

Adjustments made as a result of the pandemic include having staff call ahead to screen for illness or COVID-19 symptoms. The APS worker wears a mask to every home, uses hand sanitizer and maintains a safe distance by talking outside, on porches, or through storm doors when possible. Clients are still

being seen unless they have a safety or health risk. For example, some clients have existing respiratory issues, and being exposed to COVID-19 could be deadly. In these rare cases, Jackson County APS workers have used contact by phone with older adults. APS workers who have been going into homes have expressed concern over becoming infected and of spreading something to their clients; however, they understand the need to ensure the well-being and safety of their clients. APS workers have also been asked not to come inside by some of their clients as some prefer to maintain distance. Collateral contacts – sources that are knowledgeable about clients' situations -- and alleged perpetrators are now typically contacted by phone rather than in person. APS caseworkers also offer information about home delivery of food and prescriptions as it is available in the community.

There have been changes with the way older adult serving agencies other than APS have responded during the pandemic. Local law enforcement agencies in Jackson County were not able to do a well check on APS clients when asked, home health, physical and occupational therapists have stopped going into homes, doctors have stopped seeing some patients on a case by case basis, and the court is closed except for emergencies which may hold up guardianships or other probate issues that are not deemed emergencies.

This pandemic will change the way services are delivered and investigations are done post-coronavirus. As Jackson County APS looks for ways to safely serve clients while engaging needed service providers, they will need to be more mindful of how services interact. How or when things will return to "normal" or what the new normal will be is unclear, but this pandemic will have a lasting impact on APS service delivery. Funding cuts to APS in Jackson County are a legitimate concern due to the economic hit from COVID-19 and the state budget cuts that are expected. APS is already an underfunded program, and funding could be reduced further.

Cuyahoga County

Population: 1,243,857

Older Adults: 26,137 (18.2 percent of population)

Median Income: \$49,910

Cuyahoga County had an existing case management system in place that had been implemented just prior to ODAPS. The county received an extension from the state to convert to ODAPS. Since April 1, 2019, Cuyahoga has exclusively used ODAPS for APS case and data management. The use of ODAPS has made some of the data Cuyahoga County APS attempts to gather more difficult to obtain. The previous case management system included closing codes, activities and other demographic info that was specific to trends being tracked in Cuyahoga County. This data cannot be captured in ODAPS. In order to have a level of functionality to meet their needs, customized reports needed to be built for Cuyahoga.

Another loss that resulted from switching to ODAPS was the lack of synchronization with the case management system used by the Cuyahoga County Department of Senior and Adult Services, where APS lives. There is quite a bit of overlap between APS clients and other services offered by the Cuyahoga County Division of Senior and Adult Services. Since ODAPS does not "talk" to the existing case management system, intake staff use two systems constantly for client entries and to set up new cases/reports. Cuyahoga County did identify one benefit to ODAPS, which is the ability to track the types

of abuse including physical, emotional, and sexual. APS workers can also now cross reference with reports from other counties. Prior to ODAPS the agency did not have a universal case lookup system and has found it to be a great improvement.

The number and type of cases has stayed fairly static within Cuyahoga County, with a slight increase in financial exploitation cases. The increase was seen, in part, as a result of more attention paid by the general public and media to the topic. With this increased awareness, the community was able to better recognize the signs and feel confident making an APS referral. While a number of other agencies within Cuyahoga County Job and Family services respond to issues related to opioids, opioid abuse is not a common thread in APS referrals.

Since the start of the COVID-19 pandemic, Cuyahoga County APS has seen a slight decrease in referrals. The decrease is attributed to the lockdown and to fewer people being seen by hospitals, social service providers, and other public-facing programs that typically see older adults on a more regular basis. However, referrals are still coming, and APS has remained busy and continues to investigate reports. There is a concern in Cuyahoga County that the impact of the stay-at-home order and shutdown of community program and provider services will inundate a very busy, already-strapped system once we return to normal. APS is the only agency charged with the mandate to investigate cases of abuse and could become overwhelmed.

Adjustments have been made to keep APS workers and clients safe and to mitigate the risk of spreading COVID-19 while also maintaining a full level of service to the community. APS workers have been equipped with iPads and smartphones to be able to work remotely. APS intake continues to be fully operational without any lag in response to calls. Home visits are conducted for all new reports of abuse. Some staff are more comfortable than others going out into the community. Staff are provided with masks and gloves. Gowns are also available if needed. The county has been working to ensure staff are getting masks and gloves, despite shortages of PPE. Maintaining a consistent supply of hand sanitizer has been much more difficult.

For existing and stable APS cases waiting on services or care plans to be fulfilled, APS workers are calling clients and making collateral contacts to ensure the care plan is seen to completion and clients remain stable. Court hearings for APS cases have been conducted by Zoom. Court proceedings have slowed down considerably and securing a guardianship hearing takes slightly longer. The probate court continues to work to address the needs of county APS, and staff told Community Solutions the judges and magistrates have been wonderful.

Accessing clients in skilled nursing facilities and hospitals presents some challenges. This has been addressed by arranging appointments with facilities as they open to the public. APS emergencies are still handled within 24 hours and include APS staff and a geriatric nurse making a visit to the client's home. Remote work has been going well and may continue in some form post-coronavirus. Cuyahoga County APS has some concerns about funding changes as a result of the pandemic; the county administration has announced budget cuts will be forthcoming.

Summit County

Population: 541,918

Older Adults: 97,476 (18 percent of population)

Median Income: \$58,876

Prior to the implementation of ODAPS, Summit County APS used a different database as well as the state incident reporting system. Converting to the new system did not come as a big change and had the effect of reducing data entry from two systems to one. There have been some challenges with ODAPS. For instance, getting the exact data APS administrators were looking for and running reports has been cumbersome. When a report is needed on demographics or type of cases, the tools to do so are difficult to use and require assistance from the technical support advisor at the state. In its previous systems, Summit APS was able to run its own reports for data needed to guide program operations.

To address the opioid crisis in the county, Summit County Job and Family Services collaborates with the nonprofit Community Action Akron Summit to distribute deterrent pouches. Pouches are given to older adults in the county to dispose of any unused medication. Older adults are advised to add water to the pouch and throw it in the trash. This removes the medications from the household and prevents people from taking unused pills, like opioids and other potentially harmful drugs.

APS referrals have gone down as a result of COVID-19. A reduction in referrals does not mean abuse and neglect have decreased. While APS typically screens in 100 cases per month, only 71 cases were screened in during March, and 75 cases in April. It is likely that a decrease in providers seeing older adults in person has resulted in the decrease of referrals. Direction Home PASSPORT case managers are no longer able to see people in the home, and other mandated reporters, like doctors, aren't seeing patients in the office. Additionally, APS does get financial exploitation reports from banks, and reporting has decreased while bank buildings have been closed.

Prior to beginning a visit with an APS-referred client, staff follow state guidelines to reach out to older adults to check on them and to find out if they have traveled outside of state. Initially, Summit County JFS had trouble getting PPE, but now frontline health workers have access to PPE on an as-needed basis. Summit County JFS has started distributing masks to older adults, as they are increasingly leaving their homes as the state reopens.

Initially, staff members feared contracting the virus or unknowingly spreading the virus through their work. By this point, staff members say they have adapted. In addition to PPE like masks and gloves, disinfecting wipes are also provided so workers can clean their steering wheels and other surfaces between visits. The staff has also found that making initial outreach calls to see what level of outside contact the older adult has had helps to inform the frontline worker about risks before the actual visit. Additionally, some older adults will only speak to social workers through their porch or screen doors.

A concern is that abuse and neglect is still going on, but it is not being reported. Another concern is that APS workers cannot currently go into the hospitals. Staff tells Community Solutions that there is a tiny window of time when older adults are injured or upset that they may be more willing to work with APS investigators so they can investigate an issue. But when a nursing home or hospital is closed to

outsiders, reaching the client during that crucial window is difficult. APS workers do as much by phone as possible. They continue to communicate with social workers at the hospitals and nursing homes to address issues of abuse and neglect. Also worrisome is that APS has noticed an increase in the number of young women who have gone missing (ages 12 through 17), who may have been staying with grandparents.

Changes have been made to some of the ways Summit County APS is able to coordinate services with other agencies. Summit County Job and Family Services (JFS) works with Direction Home Akron Canton (DH) very closely. Summit County JFS used to have a case manager with DH and JFS. The case manager would be at JFS and coordinate the care services plan for individual older adults. With the inability to visit clients, coordinating care has been more difficult. The role of this case manager is to bridge the care gap for local older adults and works best through in-person contact.

Another change has been pulling back a nurse who would go out to investigate APS cases. The Summit County Health Department removed the public nurse from investigating APS cases because he or she was needed in public health during the pandemic. APS staff have also utilized sheriff's deputies more. Summit County JFS has seen more mental health crises and issued more pink slips (where people are a danger to themselves or danger to others) than before COVID-19. Those older adults are transported to the hospital and after they are assessed they are admitted to psychiatric departments or discharged.

Some of the changes that have been made as a result of the pandemic will be maintained. Making calls to clients prior to the visit helps inform the visit conversation and reduced anxieties about virus exposure. But in some cases, calling before an APS visit can reduce the effectiveness of an investigation. Much of what will and will not be changed following the pandemic depends on state guidance

Ottawa County

Population: 40,709

Older Adults: 9,598 (23.6 percent of population)

Median Income: \$57,918

For Ottawa County APS, the biggest change that accompanied the implementation of ODAPS has been an ability to have systematic, timely information about active APS cases. ODAPS is a more efficient system than what the county used previously. Since implementing the new system, the county APS has seen a drop in open and active cases. The drop is a result of being able to close cases in a more consistent manner. Self-neglect continues to be, and has been the most prevalent type of case, over the past two years. After the most recent census count is complete, Ottawa County expects to have a larger percentage of its population age 60 and older. As the number of older adults goes up, the number of cases could go up.

Opioid abuse continues to be an issue in Ottawa County. However the cases come and go in waves. When overdoses occur in the community, they are generally a result of an event, like house party, that included opioid use. APS has seen a few cases in which adult caregivers or adult children with a drug habit would financially exploit the older adult.

The coronavirus has resulted in a large decrease in the number of referrals coming into Ottawa County APS. Compared to before COVID-19, the county has seen a 50 percent drop in the number of reports made in both child and adult protective services. As businesses and services begin to open back up, APS anticipates a surge in reports. County APS is preparing for the anticipated influx, with concerns that some older adults' situations may have gotten worse during the pandemic. One issue that has become apparent is the lack of access to adult diapers, which are being hoarded in the same way toilet paper has been. Older adults who can't access and use incontinence supplies over a long period of time will eventually live in unsanitary and unsafe conditions.

The pandemic has raised some concerns among APS staff in Ottawa County. Home health providers are having problems getting and keeping staff and retaining employees. Services that can prevent things from getting bad during good times are now seeing things that are already bad and getting worse. Protective services for both children and adults are getting to a point that calls are only being made when the situation becomes a medical emergency or requires law enforcement involvement. No longer, it seems, are calls of a more preventive matter coming in to address issues prior to a true crisis.

APS workers have found the need to be more assertive with families, to get them involved in their family member's case. Without the availability of the community providers to provide support to mediate the issue that resulted in the referral, APS workers are relying on family members to be engaged. Not surprisingly, many of those family members fear being exposed to the virus or exposing their family member.

Ottawa County APS workers continue to conduct home visits. Prior to each visit, they ask the older adult for his or her temperature and if he or she has any other symptoms. Clients then meet face to face, usually on the porch. Staff wear PPE, but they have to connect with the homeowner, who may or may not be wearing a mask. An exception to porch visits is hoarding, which requires an in-home visit.

Following the pandemic, Ottawa County may keep some of the practices they have adopted during the pandemic, including mask utilization and monitoring client symptoms. However, some of the aspects of APS that were difficult before the pandemic will likely continue to be challenging. Accessing psychiatric evaluations for older adults has been difficult as has consistent staffing of service providers. The concern is that these services have been more difficult to access during the pandemic and will continue to be challenging to access following the COVID-19 crisis.

If the state or federal government reduces funding for APS or other senior services, Ottawa County will feel the impact. Ottawa County utilizes Title 20 funding – also called Social Services Block Grant funds – more so than other counties do. If that funding is reduced, the impact on APS operations will be large. The county does have a senior levy, which supports senior centers and other senior services. These services may ease the demand for APS services.