

Adult Protection Teams



A Guide to Developing and Maintaining AP Teams

AUGUST 2007



Colorado Department of Human Services
people who help people

AP Team Guide Contents

I.	INTRODUCTION.....	1
	Defining an Adult Protection (AP) Team.....	1
	Purpose of the Team Guide.....	1
	How to Use the Team Guide.....	2
II.	PURPOSE AND BENEFITS OF AN AP TEAM.....	3
	Purpose of an AP Team.....	3
	Benefits to Counties with an AP Team.....	4
	Challenges for County Departments Without an AP Team.....	6
III.	LEGAL BASIS FOR AN AP TEAM.....	8
	Statutory Basis for an AP Team.....	8
	Regulatory Basis for an Adult Protection Team.....	8
	Confidentiality.....	11
	Open Meeting Requirements.....	12
IV.	TEAM ESTABLISHMENT AND COORDINATION.....	13
	County Commission.....	13
	Team Coordinator.....	14
	Team Chairperson.....	15
	Team Members.....	16
	Membership Agreement.....	20
V.	TEAM MEETINGS.....	21
	Organizational Meeting.....	21
	First Team Meeting.....	22
	Second Team Meeting.....	22
	Subsequent Team Meetings.....	23
	Team Challenges and Evaluations.....	24
	Appendix.....	27
	Membership Recruitment Script.....	28
	Membership Agreement.....	30
	By-laws.....	31
	Confidentiality Agreement.....	38
	Case Presentation Worksheet.....	39
	Team Self-assessment Tool.....	41
	Conflict of Interest Disclosure.....	43
	APS Statute – Protective Services for Adults at Risk of Mistreatment or Self-Neglect – Part 1 – Protective Services for At-Risk Adults, Section 26-3.1-101, C.R.S., et seq.....	44
	Colorado Department of Human Services Staff Manual Volume 7, Sections 7.100 – 7.115.....	49
	Statutes and Regulations Pertaining to At-Risk Adults.....	62

I. INTRODUCTION

This guide is a blending of state and county information, resources, and experiences regarding Adult Protection team development and maintenance. For purposes of this document, an adult protection team will be referred to simply as an “AP Team.” Several Colorado County Departments of Social (Human) Services contributed documents, information, and experiences about their AP Teams that enhance the quality and pertinence of this guide as an effective resource for county administrators, Adult Protective Services (APS) staff, and team members.

Defining an Adult Protection (AP) Team

An AP Team is defined as a group of professionals representing various state, regional, county, and community service agencies committed to protecting and addressing the needs of at-risk adults. Team members work together in an advisory capacity to review and assure quality investigations and comprehensive services to meet the needs of at-risk adults in the county. In addition, team members facilitate interagency collaboration and provide education to community members and organizations on the mistreatment and self-neglect of at-risk adults.

Purpose of the Team Guide

County departments are required to develop an AP Team if they had 10 or more reports of mistreatment and/or self-neglect in the prior fiscal year. Both existing and developing AP Teams must meet requirements of Colorado APS statute, Section 26-3.1-103(3), C.R.S. and the Colorado Department of Human Services Staff Manual, Volume 7, Section 7.111. This guide is provided to support county departments in initiating and maintaining an AP Team. The guide provides county departments with information and resources necessary to better understand and more easily develop and maintain an efficient and effective AP Team. The AP Team, in turn, will provide critical support and assistance to the county APS program in addressing the

protection needs of at-risk adults and will raise community awareness about the mistreatment and self-neglect of at-risk adults.

How to Use the Team Guide

This guide should be used to assist with AP Team development. The guide provides important information about the purposes and activities of the AP Team; the legal and regulatory basis for the establishment and organization of AP Teams; team membership guidelines; and the roles of county department staff and other team members.

The guide may be used in a number of ways, depending upon the specific needs of each county. County departments without an AP Team will benefit from thoroughly reviewing each section of the guide. The documents in the Appendix may serve as templates for county departments as they develop new and update current AP Team bylaws, confidentiality agreements, evaluation tools, and other team resources.

Questions about the information in the guide should be directed to the state Adult Protective Services program staff at 303-866-2800 or by email at:

Pat Stanis, patricia.stanis@state.co.us

Jan Green, janet.green@state.co.us

Steve Evans, steve.evans@state.co.us

Peg Rogers, peggy.rogers@state.co.us

II. PURPOSE AND BENEFITS OF AN AP TEAM

Colorado county departments that receive 10 or more APS reports of at-risk adult mistreatment or self-neglect in the prior state fiscal year are mandated to establish an AP Team. Each county department may establish its own AP Team or a group of contiguous counties may develop a single AP Team. Most AP Teams meet monthly. However, county departments with low APS case numbers may meet less frequently. All teams are required to meet quarterly, at a minimum. An AP Team assists the county in more effectively responding to and preventing the mistreatment and self-neglect of at-risk adults. The varied professional backgrounds and expertise of team members are used by the county APS program to explore and develop the best service plans for challenging APS cases. Additionally, the AP Team improves the community's response to the needs of at-risk adults in unsafe situations by providing experience and education to professionals and community members regarding issues pertinent to the mistreatment and self-neglect of at-risk adults.

Purpose of an AP Team

The purpose of an AP Team is based in Colorado statute and in rules and regulations in the Colorado Department of Human Services Staff Manual, Volume 7. A copy of the APS statute and rules and regulations is provided in the appendix. Team members should consider the most compelling needs of the community concerning adult protection issues when implementing the purposes of the team. As outlined in the rules, the purpose of the AP Team is to:

- Act in an advisory capacity to review the processes used to report and investigate mistreatment or self-neglect of at-risk adults;
- Act in an advisory capacity to review the provision of protective services to at-risk adults;
- Facilitate interagency cooperation; and
- Provide community education on the mistreatment and self-neglect of at-risk adults.

Benefits to Counties with an AP Team

Protecting at-risk adults presents distinctive challenges to any service system. AP Teams provide a forum for evaluating the service quality to at-risk adults in the community. AP Teams provide service continuity and the sustained client contact that is needed to evaluate services. The National Center on Elder Abuse cites benefits of using a team approach in response to the service and protection needs of at-risk adults in the 2003 publication entitled *Elder Abuse Prevention Team - A New Generation*. Using a team approach when serving at-risk adults benefits the at-risk adult, the county and collaborating agencies, and the community.

Benefits to at-risk adults include:

- **Enhanced autonomy and choice**

AP Teams assist with the development of service plans that may be tailored to APS clients' individual needs and preferences by offering a broad range of service options from each appropriate service system.

- **Improved access to services and equity of care**

AP Teams provide an opportunity for APS clients to benefit from the expertise of some of the most highly skilled and experienced practitioners.

- **Reduced injury and loss**

By drawing from the professional resources and expertise of multiple disciplines and service agencies, the team review process increases the likelihood that APS clients will receive needed assistance.

Benefits to county departments and collaborating agencies include:

- **Enhanced skills and expertise**

AP Teams provide a systematic, reality-based learning experience that can be professionally and personally enriching.

- **Enhanced knowledge of the resources, approaches, and perspectives of multiple disciplines and service networks**

AP Teams provide members with opportunities to learn about programs and services in areas such as: adult protection, criminal justice, aging, victim assistance, disability, domestic violence, mental health, and many other areas.

- **Improved county department relations with collaborating agencies**

The role of APS in the county is often misunderstood by other community service agencies. Without a clear understanding by other agencies, unrealistic expectations and demands of APS may be made. In an AP Team setting, it is possible to discuss and explain the service parameters and requirements of APS.

- **Up-to-date information on community services, resources, and developments**

Current information about community resources, such as changes in management, newly imposed budget constraints and resulting effects on service provision, and staff turnover, assists the AP Team to use improved inter-agency working relationships to develop realistic, comprehensive, and efficient multi-disciplinary responses to protect at-risk adults.

- **Information regarding county standards of care**

The AP Team review process keeps members informed about how other professionals in the county handle situations involving at-risk adults. This can instill confidence that each professional group's actions conform to accepted county standards.

- **Support to APS program staff and other team members**

Professionals routinely make difficult decisions that have a critical impact on the lives of at-risk adults, their families, and perpetrators. AP Teams can provide a supportive environment in which the members may voice concerns, frustrations, and uncertainty.

Benefits to the community include:

- **Improved service response**

An AP Team can help identify systemic problems such as:

- o Service gaps
- o Breakdowns in communication or coordination between agencies
- o The need for education, training, and public policy

- **Provision of a “checks and balance” system**

There is no single way to respond to at-risk adult mistreatment and self-neglect cases. The AP Team provides a forum for understanding the perspectives of professionals from diverse disciplines.

- **Expanded community awareness of at-risk adult mistreatment and self-neglect**

Team members are charged with the responsibility of providing education and information to their professional colleagues and to their local communities. The information provided will include such topics as the signs and symptoms of mistreatment and self-neglect and recommended reporting protocols. Expanded community awareness of these issues assists the county department in providing timely and appropriate interventions.

As detailed in the above list of benefits, AP Teamwork results in the most effective, comprehensive, and efficient use of service agencies in providing protective services to at-risk adults.

Challenges for County Departments Without an AP Team

The complex protection needs of at-risk adults, whether the county department receives one APS report a year or several reports a day, provide exceptional challenges for the county department. Responses to APS client needs without the support and consult of an AP Team may result in less efficient and inadequate services for clients. The National Center on Elder Abuse's (NCEA) 1995 publication entitled, *Building Partnerships*, outlines the challenges faced by county departments that do not have an AP Team.

- **Fragmentation of services**

Services provided tend to be incomplete, given the multiple and complex needs of the at-risk adult population.

- **Lack of coordination and communication among service agencies**

Multiple agencies serving the same at-risk adult are often unaware of the other agencies involved. As a result, services are poorly coordinated and sometimes duplicated.

- **Crisis oriented services**

Many services for at-risk adults are put into place as a result of and only in time of a crisis. Such responses often provide short-term solutions, rather than a more comprehensive response that attempts to address the current and future service needs of the adult.

- **Lack of consensus on appropriate response**

Service providers from diverse disciplines have no established forum in which to express and resolve different and sometimes conflicting perspectives on how adult abuse cases should be resolved.

- **Lack of consensus about decision-making capacity issues**

The decision-making capacity of at-risk adults is a common criterion for determining appropriate service interventions. Without an AP Team, there is little opportunity for professionals with conflicting definitions of capacity to discuss and reach a consensus on this issue.

- **Funding constraints that require agencies to conserve on client services**

The county department may expend more staff and support resources to assist at-risk adults than are necessary when the department shares service responsibilities with other community agencies.

- **Lack of professional training in at-risk adult abuse issues**

Professional service providers often lack specific training about how to recognize and most appropriately respond to abuse of at-risk adults.

- **Lack of community understanding about the problem and about services**

Without professionals trained and experienced in dealing with the abuse of at-risk adults, the community will lack understanding of the problems involved in such cases and of the roles of adult protective services and collateral service providers in addressing abuse issues.

III. LEGAL BASIS FOR AN AP TEAM

Statutory Basis for an AP Team

The legal basis for the AP Team is grounded in the laws and rules that establish and support protective services for at-risk adults in Colorado. State statutes and regulations provide excellent direction to counties in the development of AP Teams by illustrating how collaborative team efforts and a strong commitment to quality protective services can effectively protect the at-risk adult population. Colorado statutes Section 26-3.1-103(3), C.R.S. and Colorado Department of Human Services Staff Manual, Volume 7, Section 7.111 require the development of an AP Team by county departments that receive 10 or more APS reports in the prior fiscal year. County departments with an existing AP Team should use the information provided in statute, rule, and this guide to review and update team by-laws and procedures, as necessary to meet statute and rule requirements. Samples of team documents are provided in the Appendix.

Statutory requirements for AP Team development are specified in the *Protective Services for Adults at Risk of Mistreatment or Self-neglect* statute, Section 26-3.1-101, C.R.S., et seq. (hereafter referred to as the “mistreatment statute”). A copy of the APS statute is provided in the appendix. The director of each county department is required to create and coordinate an AP Team in accordance with rules that govern the establishment, composition, and duties of the AP Team.

Regulatory Basis for an AP Team

Information regarding the responsibilities of an AP Team is found in the Colorado Department of Human Services Staff Manual, Volume 7, Section 7.111. These rules and regulations provide guidance on the membership, goals, and by-laws for the AP Team, which are detailed below.

Membership for AP Teams

The rules and regulations clarify membership issues for AP Teams as follows:

- Recommended membership for AP Teams includes interested individuals and representatives of agencies and professional groups, such as mental health, health care, law enforcement, long-term care ombudsmen, banks, district attorneys, and community centered boards.
- The county department director is assigned the role of identifying those agencies and/or individuals that have the greatest interest in adult protection issues, and are willing to serve on the AP Team.

Purpose of an AP Team

The purpose of the AP Team is to:

- Act in an advisory capacity to review the processes used to report and investigate mistreatment or self-neglect of at-risk adults;
- Act in an advisory capacity to review the provision of protective services to at-risk adults;
- Facilitate interagency cooperation; and
- Provide community education on the mistreatment and self-neglect of at-risk adults.

The members of the AP Team develop the goals of the team, according to the purpose outlined in statute. Local needs in the area of adult protection may be used to prioritize these goals.

By-Laws for an AP Team

In accordance with APS rules and regulations, the AP Team is required to develop and maintain by-laws that should minimally define the following:

- Team purpose, as outlined in statute;
- Team structure, including:
 - Meeting facilitation responsibilities;

- Frequency of meetings; and
- Composition (membership) of the team.
- Rules of membership that include:
 - Members' duties;
 - Terms of office; and
 - Confidentiality.
- Process for resignation from the team;
- Causes for termination from the team; and
- Process for handling members' potential conflicts of interest.

Community Education

The AP Team, or designee, is required to provide community education on the mistreatment and self-neglect of at-risk adults. The team will:

- Determine the topics for training and educational events according to the known or suspected needs for information in the county and community;
- Use training and educational materials developed by the county, state, national association, or other professional adult protective services agencies, or by team members knowledgeable in a specific area of mistreatment or self-neglect of at-risk adults, such as Community Centered Board staff, long-term care ombudsman, or the local District Attorney;
- Provide a minimum of three (3) educational events each state fiscal year. These events may involve of any combination of the following:
 - A live presentation to a community or professional group;
 - Participation in a senior or community forum, such as providing an article for a newsletter or local newspaper or providing brochures or other written materials at a county or other community event; or
 - Sponsorship of a community elder abuse awareness day or similar event.

Team Report

All county AP Teams are required to develop an annual AP Team report, using the state developed report form. The annual report is required to:

- Be completed by August 31 for the previous state fiscal year;
- Minimally remain on record within the county department for three (3) years; and
- Be submitted to the state upon request.

The state may revise the AP Team report from year to year as information needs change. The information collected will be the minimum needed to meet legislative and audit purposes. That information may include:

- Professional groups represented on the team as permanent members;
- Professional groups represented on the team as consulting members;
- Dates of team meetings held during the past state fiscal year;
- Professional group representatives present at each team meeting;
- Community education events conducted, including the dates and types of events, topics, agenda, number and affiliations of attendees of each event, and length of each event, as appropriate;
- Service needs within the team area;
- Service gaps and limitations within the team area;
- Protocols developed between the county department and other professional agencies; and
- Other information as deemed necessary by the state.

Confidentiality

All APS case and client information must be kept confidential, as stated in the mistreatment statute, Section 26-3.1-102(7), C.R.S. Confidential APS case and client information includes the following:

- Reports of the mistreatment and/or self-neglect of at-risk adults, including:
 - o The name and address of any at-risk adult;
 - o Any member of the at-risk adult's family;

- o The identity of the person making the report; and
- o Any other identifying information contained in APS reports.
- Disclosure of APS case information is permitted only when:
 - o Authorized by a court for good cause;
 - o A criminal complaint, information, or indictment based on the report is filed; and/or
 - o A law enforcement agency files a formal charge or a grand jury issues an indictment in connection with the death of a suspected at-risk adult from mistreatment and/or self-neglect.

Violating confidentiality concerning APS cases is a class 2 petty misdemeanor and punishable by a fine of not more than three hundred dollars (\$300). Confidentiality among team members is best assured by the development and signing of a team confidentiality agreement. The statutory citation for APS confidentiality, Section 26-3.1-102(7), C.R.S., should be noted in the agreement. A sample team confidentiality agreement is provided in the appendix.

Open Meeting Requirements

AP Team meetings are public meetings, as outlined in The Sunshine Law (Section 24-6-401, C.R.S. et seq.). It is important to note that the AP Team must adjourn to a closed executive session prior to discussing any confidential case information. County policy on open meetings should be consulted to provide further direction on conducting public meetings that involved confidential information.

IV. TEAM ESTABLISHMENT AND COORDINATION

The county director and the team coordinator and/or team chairperson play key roles in the development of a successful AP Team. The director of each County Department of Social (Human) Services is required by statute to establish an AP Team when the county has 10 or more reports of mistreatment or self-neglect of at-risk adults in the prior state fiscal year. The directors of two (2) or more contiguous counties may establish one AP Team. This section contains required procedures and duties for the county department to use; however, as long as the county department ensures that the team is being established at the optimal level possible within existing resources, “who does what” is a county decision.

County Commission

When establishing an AP Team it is recommended that the director inform and pursue support from the county commissioners by providing the following information:

- Statutory requirement for an AP Team;
- Details of the AP Team’s role in executing the most appropriate response to reports of mistreatment and self-neglect of at-risk adults;
- Explanation of the potential for long-term cost saving potential to the county department due to the commitment and assistance provided to the county department staff and the APS clients from other professional agencies participating on the AP Team;
- Efficiency of county APS service provision may be improved due to the case review and team process;
- Complexity of adult mistreatment and self-neglect cases often requires a team approach; and
- The team process will improve county and community protection and safety services for vulnerable adults.

Provision of the annual team report may serve to raise the county commission's awareness of the importance of the AP Team, the county APS program, and the protective needs of at-risk adults in the areas of mistreatment and self-neglect. The county commission's involvement in AP Team development and maintenance may vary from one county to another.

Team Coordinator

The county director will decide whether to assume or designate the role of team coordinator. County directors may work collaboratively with an APS supervisor or APS lead worker to coordinate the AP Team during the initial stages of team development. The person designated for the team coordinator position must have strong organizational skills and a background in and commitment to the prevention of the mistreatment and self-neglect of at-risk adults. Following is an outline of the types of skills, abilities, and duties required of the AP Team coordinator.

Skills and Abilities of the Team Coordinator

- Networking skills that foster good working relationships with county and community resources;
- Good administrative, planning, and organizing skills;
- Well-developed listening skills;
- Well-developed oral and written communication skills;
- Group process skills with good ability to facilitate group discussions;
- Ability to facilitate a systems response to case management issues; and
- Knowledge of the resources available to address the legal issues and challenges of APS casework, including guardianship and medical advance directives.

Duties of the Team Coordinator

The duties of the team coordinator may vary from one AP Team to another. The team coordinator's duties may include, but are not limited to, the following:

- Recruiting and convening members of the AP Team;
- Assisting with drafting the team by-laws and confidentiality agreements;
- Assisting with drafting the team membership agreements;
- Determining criteria to select APS cases that are most appropriate for review;
- Assisting with preparing cases for presentations;
- Acting as liaison between the APS caseworkers and other team members by soliciting feedback on the team process from both groups;
- Assuming or designating administrative duties, including:
 - o Planning, organizing, and facilitating team meetings;
 - o Notifying members of meeting schedules;
 - o Preparing, reviewing, and finalizing meeting agendas;
 - o Summarizing cases for review;
 - o Finding relevant articles, videos, and guest speakers for presentations at team meetings;
 - o Assuring that APS provides case updates on previously reviewed cases;
 - o Assisting the APS unit in developing brief scenarios of new cases;
 - o Providing all team members with information needed for each meeting, such as handouts for special presentations;
 - o Assigning note taking duties and, if minutes are kept, distributing minutes from the previous meeting;
- Following up on recommendations by team members;
- Consulting with team members between meetings for additional pertinent case information; and
- Scheduling regular meetings (annual, semi-annual, quarterly) to meet with the county director and/or APS staff to review team issues.

Team Chairperson

Some AP Teams may establish a chairperson position to be held by a team member who is not employed by the County Department of Social (Human) Services, while other AP Teams

establish the chairperson position to be held by a County Department staff person. Some county departments choose to combine the team coordinator and chairperson responsibilities into one position held by a County Department staff person. The chairperson position provides the county program an excellent opportunity to optimize the contributions to the AP Team by members who have a passion for protecting at-risk adults. The team chairperson may volunteer, be appointed by the county department, or elected by the AP Team.

Duties of the Team Chairperson

The team chairperson works closely with the team coordinator in organizing and facilitating team meetings. The duties of the team chairperson may vary according to the unique needs of each AP Team. The team chairperson's duties include, but are not limited to, the following:

- Providing input into the development of the meeting agenda;
- Overseeing the meeting process;
- Bringing pertinent protection issues to the team's attention;
- Maintaining the meeting structure and time schedule;
- Coordinating with county staff on maintaining and distributing meeting minutes; and
- Initiating and monitoring membership letters of appointment and termination.

Team Members

The collaborative nature of the work necessary to address mistreatment and self-neglect issues of at-risk adults requires that personnel from key service agencies be involved. Each AP Team should strive to have team members representing the following professional groups, as outlined in the Colorado Department of Human Services Staff Manual, Volume 7, Section 7.111. The team coordinator and county director must determine which professional groups are most appropriate for representation on the AP Team.

- Mental Health
- Health Care Providers
- Hospital Discharge Planners
- Law Enforcement
- Home Health Providers
- Physicians
- Private Attorneys
- Long Term Care Ombudsmen
- Banks and Financial Institutions
- Senior Centers
- District Attorneys
- Legal Services
- Alcohol Treatment
- Public Housing
- Long Term Care Providers
- Area Agencies On Aging
- Community Centered Boards
- Social Services
- Other professional groups with a special interest in at-risk adults

The effectiveness of an AP Team is determined by several variables. These include each member's:

- Commitment to learn about adult mistreatment and self-neglect issues;
- Willingness to contribute their time, expertise, and resources toward review of:
 - The processes used to report and investigate reports of mistreatment and self-neglect of at-risk adults,
 - The provision of protective services, and
 - Case planning.
- Dedication to collaborative solutions to case problems; and
- Willingness to assist with community education, whether by providing training or assisting with identification of topics for training to be completed by the county department.

Recruiting Members

The recruitment of team members may be implemented in a manner that best meets the unique needs within each county. The following issues should be considered in AP Team member recruitment:

- Enlist the assistance of members from existing county or community teams, such as the county child protection team or another collaborative community service team;
- Develop and use a recruitment letter or phone call script that explains the purpose of the AP Team and provides the prospective team member with clear and realistic role expectations. A sample recruitment letter is provided in the Appendix;
- Consider for membership respected professionals with whom the coordinator or county director have personal and professional knowledge and experience;
- Ask APS staff and other team members to suggest professionals they believe will positively contribute to the collaborative work of the AP Team; and
- Balance team composition with representatives from various types of service agencies and organizations as permanent or consulting members.

During recruitment of team members, emphasis is placed on the unique contribution of each professional representative. For example, the message should be conveyed to prospective team members from law enforcement and the district attorney's office that each will play a critical role in reviewing cases that appear to involve criminal activities. If a case appears to involve the financial exploitation of the victim, representatives from law enforcement and from the district attorney's office could assist in determining the feasibility of a criminal investigation and the types of evidence needed to prosecute the case.

In counties with few APS cases, it may be difficult to obtain commitments from professionals to attend team meetings regularly. In such situations, professionals may be enlisted as consultants for only those APS cases that deal with issues pertaining to their respective professional expertise. For example, the team coordinator may request a physician's attendance at a monthly team meeting, or that portion of the meeting during which a particular case will be reviewed involving questions about the decision-making capacity of the victim. The team coordinator who works creatively with community professionals in order to engage them in the team's work with APS cases, can provide

efficient ways to maintain participation from professionals on the AP Team, while communicating respect for their staffing and time constraints.

Conflicts of Interest

Caution should be used regarding potential conflicts of interest among team members. If a team member is a person in private business, it is best to clarify in writing that such a potential conflict exists. Members cannot solicit customers for their private business from the clients and families discussed at the team meetings or from agencies represented on the AP Team. (A sample Conflict of Interest Disclosure form is included in the Appendix.) The AP Team or APS program staff may request services of a private business for an APS client when those services are determined by the team or the APS program to be in the client's best interest.

Members' Roles

Team members representing a wide range of service disciplines often have questions regarding their role on the AP Team. Questions commonly asked are:

- What will the AP Team expect of me?
- Do I know enough about adult protection to significantly contribute to the AP Team?

The roles of AP Team members outside the county department include, but are not limited to:

- Assisting with the development of team policies, goals, and objectives;
- Providing professional expertise and opinions as pertinent to each case review;
- Educating other team members about their respective service systems; and
- Assisting the county department to meet the statutory requirements of the AP Team.

The roles of county department staff on the AP Team include, but are not limited to:

- Defining the at-risk adult population;

- Presenting cases to the AP Team by providing information on risk factors, profiles of alleged victims, and profiles of alleged perpetrators;
- Providing information about existing community situations and resources;

- Educating other team members about parameters of adult protective services; and
- Educating other team members about the principles of protective service practice.

Each APS case will present a unique set of circumstances to the AP Team and will require an equally unique response from the diverse team membership. For example, APS cases involving self-neglect may require input from team members with information about medical conditions and services, county and municipal zoning issues, and mental health issues and “hold” procedures. Cases involving caregiver neglect and financial exploitation will require input from team members with information about home health services, financial management, and criminal investigation and prosecution.

Membership Agreement

The county APS program team coordinator should require team members to sign a “membership agreement” that affirms their commitment and the commitment of the agency each represents. The membership agreement may serve as a means to clarify team membership expectations, and to highlight the statutory citations that form the basis for confidentiality requirements. The membership agreement is not intended to be a legal document or binding contract that carries legal repercussions should its “terms” be violated. An example of a team membership agreement is provided in the Appendix.

V. TEAM MEETINGS

Well-structured team meetings produce the most efficient and productive use of the county and community resources. The procedures listed below can prove helpful in building and maintaining a well functioning AP Team. Sample forms discussed in this section are provided in the appendix.

Organizational Meeting

It is customary for county departments to invite prospective AP Team members to an organizational meeting at which information is provided about the team function and team membership expectations. The following guidelines for an organizational meeting will assist the county at this initial stage of team development:

- Send a concise meeting agenda to prospective team members in advance of the meeting;
- Set and respect the time frame for the meeting (usually 60 to 90 minutes);
- If possible, include a presentation regarding team functions from a state APS staff person or the team coordinator from another county;
- Plan time for a discussion of questions and concerns;
- Obtain a commitment from guests to participate in the new AP Team;
- Appoint two or three interested team members to assist with the development of draft by-laws and a draft confidentiality agreement;
- Obtain a commitment from the county attorney to review the by-laws and confidentiality agreement prior to the subsequent meeting;
- Set the agenda for the first team meeting, including review of draft by-laws and confidentiality agreements; and
- Set the time and date of the first team meeting.

First Team Meeting

The first team meeting traditionally serves to assist in the organization of the AP Team. Some counties prefer to have more than one organizational meeting in order to clarify the roles of members and to alleviate any misconception of the scope of APS responsibility and intervention in cases of mistreatment and/or self-neglect.

The development of a team handbook, while not required, should be considered at the first meeting. Team handbooks contain copies of statutes pertinent to the at-risk adult population and other documents and resource materials beneficial to the team members. The “APS Tool Box” and this guide contain many resources and training materials that could be included and/or referenced in the county AP Team handbook.

AP Teams may review an APS case at the first team meeting, if appropriate. Whether or not a case review is scheduled at the first meeting, the following activities will assist in making this first team meeting efficient and productive.

- Adhere to a set agenda and time frames;
- Review, discuss, and amend, if necessary, drafts of by-laws and confidentiality agreements;
- Accept by-laws and confidentiality agreements, pending approval by the county attorney;
- Determine the contents of the team handbook, if one is to be developed, and enlist a small committee to put it together;
- Determine the format for APS case information to be provided to the team members;
- Present a training video, such as “Serving the Victims of Elder Abuse;” and/or
- Schedule the date and time for the next team meeting and first/next APS case review.

Second Team Meeting

The second team meeting provides participants with opportunities to continue to clarify the content and substance of adult protective services work. This sets the standard for future team

meetings by incorporating the case review process as an established portion of the agenda. Activities for the second team meeting are suggested as follows:

- Adhere to the set agenda with some flexibility within the time frames to accommodate APS case reviews;
- Review, discuss, and accept the AP Team handbook committee recommendations and products;
- Review the “Indicators of Abuse” information, located in the APS Tool Box, or provide a brief training video, as time permits; and/or
- Present an APS case for team review. Procedures to adhere to when reviewing an APS case may include:
 - o Use of initials or other identifiers to preserve confidentiality;
 - o Provision of a summary of county actions already taken on the case, for example: “The criminal issues involved in this case have been discussed with law enforcement.” Then ask the law enforcement officer to review his/her findings;
 - o Presentation of specific questions to the AP Team about the APS case, such as: “Are there additional resources in our county that we should consider for this client?”
 - o Limit each APS case review to 10-20 minutes, depending upon the status and scope of issues involved in the case;
 - o When no current APS case is available for review, a closed APS case may be reviewed by the AP Team as a learning tool for exploring avenues that were or could have been taken to best serve the client.

Subsequent Team Meetings

Subsequent team meetings best serve the needs of the county APS program and APS clients when team members have opportunities to appropriately contribute their expertise to case reviews and to learn from others’ contributions. AP Team meetings that best maintain members’ interest and commitment are those that routinely provide educational and training opportunities during the regular meeting time. During all team meetings, the county program staff will model and facilitate professional respect among team members and other community service providers.

Consistently adhering to the following practices will assist the county department with the long-term maintenance of the county AP Team.

- Follow a set agenda and time frame throughout the year;
- Begin discussions to meet all AP Team purposes, as defined in statute;
- Provide a variety of educational and training experiences related to the protection of at-risk adults, such as guest speakers from related professions (state and local) or training videos on APS topics of interest to the team;
- Allow time to discuss service gaps, problems, and constructive solutions to such issues at the local/county level;
- Provide opportunities for team members to share, either openly or confidentially, their opinions regarding the team's strengths, needs, and challenges with the team coordinator;
- Use team members' responses to the Team Self-Assessment Tool to assess the AP Team functioning;
- Address issues identified during a self-assessment, encouraging team members to suggest strategies to sustain and/or improve the team process.

Team Challenges and Evaluations

Each AP Team has a fluid “personality” that results from team leadership and member composition. Support for and participation in the AP Team may vary as years pass, and as leadership and membership changes occur. The Team Self-Assessment Tool should be used on an annual or as needed basis to assess, improve, and maintain AP Team functioning. Discussions and responses to the assessment tool results should remain impersonal, i.e., no individual should be singled out for blame. Problems are best resolved by using constructive comments and suggestions. Prompt discussions of and responses to the team strengths and challenges identified in a team assessment will encourage team members to suggest strategies to sustain and/or improve the team process.

Challenges may develop within the AP Team that can significantly impact team functioning. The following information provides suggested responses to common team challenges of attendance, professional relationships, and communication issues.

- **Meeting Attendance**

If attendance at team meetings begins to fall off or has never reached an acceptable level, one or more of the following responses have effectively addressed this issue for AP Teams:

- o **Meet with team members outside of the team environment.**

The team coordinator or other active team member(s) could schedule a professional or casual meeting with the professional who regularly misses team meetings, to better understand and respond to the reason(s) that team member has stopped attending meetings.

- o **Invite and encourage team members to attend trainings that pertain to the mistreatment and self-neglect issues of at-risk adults.**

The team coordinator or chairperson may wish to invite team members to training opportunities at the state and local levels that will provide them with more information about at-risk adults.

- o **Individually invite professionals to team meetings to review one or more specific APS cases that require that team member's unique professional expertise.**

The team coordinator or chairperson may personally invite team members who miss meetings to attend team meetings at which topic areas pertinent to their expertise will play an important role during the APS case review. Some team members may feel that the APS case issues being discussed have little or nothing to do with their respective professions or services. For example, many APS cases involve self-neglect, therefore there is no "suspect" or "perpetrator" to be charged with a crime. Since self-neglect is largely a civil issue, the district attorney may feel he/she has little to contribute to such a case. Many AP Team members prefer to attend all team meetings and comment about how much they learn about the at-risk adult population and community responsibilities; while other AP Team

members, at the same meetings, may feel uncomfortable spending their or their agency's time attending meetings to which they have little to contribute. An appropriate "special invitation" of a team member to a specific meeting at which his or her expertise is critical to the case review, conveys respect for that professional's time and expertise, and may provide the impetus for more frequent team participation by the member.

- **Inter-Personal Conflicts Within the AP Team**

The unique and combined professional perspectives and personalities of team members contribute to the success and struggles of an AP Team. Additionally, staff changes and turnover can significantly impact the "climate" at team meetings due to the different philosophies and professional backgrounds of new team members. County staff should be sensitive to issues that may hinder communication and information exchange during APS case reviews. The team chairperson or coordinator may address these issues by promoting professional meeting etiquette as a part of the "rules of conduct" for team meetings, such as each person's opinions are heard and respected. Time limits for each team member's input may need to be set and adhered to if one or more team members tend to monopolize the review process. Additionally, avoid allowing one team member to tell another team member "how to do his or her job." Should such concerns arise, putting the observation in the form of a non-offensive question will help to avoid ill feelings. For example, if the current case under review is very similar to a previous case during which law enforcement was able to make an arrest, but the officer believes that in this case there is nothing that law enforcement can do, the question could be asked of the officer, "From a law enforcement perspective, Officer Jones, how is this case different than the previous case, in which you were actually able to arrest the perpetrator?"

APPENDIX

The documents and information included in the Appendix provide team members with sample team documents. Many of the sample team documents have been adapted from the county documents of existing AP Teams. Team coordinators are encouraged to use the sample documents in the development of documents for their AP Team.

Additionally, the APS statute and rules and a list of other statutes that pertain to at-risk adults are included in the Appendix.

Team coordinators are encouraged to use materials from the APS Tool Box, the APS website (www.coloradoaging.com), and the Colorado Coalition for Elder Rights and Adult Protection (CCERAP) website (www.ccerap.org) for training and resource materials that may be used in the AP Team Handbook, for AP Team educational opportunities, and for community educational events.

SAMPLE MEMBERSHIP RECRUITMENT SCRIPT

* This script is meant to provide the recruiter with information to cover during a personal or phone conversation or in a letter of invitation to prospective team members. It may be reviewed and used as a guide in devising a script or outline most appropriate for each developing AP Team.

Good *morning/afternoon*. This is _____ from the _____ County Department of Social (Human) Services. I'm calling about a new team development effort that our agency is undertaking. Do you have a few minutes now for me to talk to you about it?

As you (*may*) know, _____ County Department of Social (Human) Services is the lead agency for adult protective services (*APS*) for our county. Our APS caseworkers receive and respond to reports of the mistreatment and self-neglect of older adults and adults with disabilities. Cases involving vulnerable adults are often complex and require the expertise of professionals from many different areas of service. We are developing a volunteer adult protection team, called an "AP Team," to help the County provide the best possible response and services in these most difficult cases. You were recommended to serve on the AP Team by _____ because of your background in (*identify the specific areas of expertise*). As a team member you will help our county department respond to these cases by suggesting strategies for interventions, actively taking part in the interventions when appropriate, and assisting in the development of comprehensive service plans for adult victims.

The AP Team will be composed of professionals from several professional areas, such as: medical, legal, law enforcement, mental health, domestic violence, senior and disability services, and finance professionals. It will be a well-rounded AP Team that will provide a great deal of assistance to the APS caseworkers.

Choose most appropriate option(s): If you accept this invitation to consider team membership, you are invited to attend an organizational meeting on _____. As a team member, you will attend regular (*monthly, bi-monthly, quarterly*) meetings, and serve on the AP Team for a specified period of time. The team members will agree upon the length of time members will serve on the AP Team. Customary team membership terms are for one to two years. Persons

SAMPLE MEMBERSHIP RECRUITMENT SCRIPT

who have served on other AP Teams in Colorado have found it to be a very rewarding and informative experience. Would you be interested in learning more about this AP Team? If “Yes,” skip to A below. If “I’m not sure,” skip to B below. If “No,” skip to C below.

- A. Thank you for your support! At the organizational meeting, we will discuss Colorado laws pertaining to the abuse of at-risk adults, how our county APS program responds to referrals, and a more detailed explanation of the responsibilities of team members. We would be honored to have you as a member of the AP Team. I look forward to seeing you at the organizational meeting. Thanks for your time.
- B. If you would like to think more about this invitation, I’ll call back in a few days to answer any questions. If you have questions now, I will be glad to answer them. Before you make your decision, please come to the organizational meeting on _____ where we will be better able to answer your questions. At the meeting, we will provide information on the Colorado laws pertaining to the abuse of at-risk adults, how our county APS program responds to referrals, and a more detailed explanation of how the members of the AP Team will work together to review APS cases and better protect the vulnerable adults in _____ County. We would be honored to have you as a member of the AP Team. I hope to see you at the organizational meeting. Thanks for your consideration of the opportunity and for your time.
- C. I am sorry to hear that you do not feel you should serve on this AP Team. Would you mind sharing with me why you cannot accept this invitation? Would you or a member of your staff be interested in attending the organizational meeting on _____? At this meeting we will provide information on the Colorado laws pertaining to the abuse of at-risk adults, how our county APS program responds to referrals, and a more detailed explanation of how the members of the AP Team will work together to review APS cases and better protect the vulnerable adults in _____ County. We would be honored to have you as a member of the AP Team. I hope to see you at the organizational meeting. Thanks for your consideration of this opportunity and for your time.

SAMPLE MEMBERSHIP AGREEMENT

The purpose of the _____ County Adult Protection Team (AP Team) is to: 1) review the processes used to report and investigate reports of mistreatment or self-neglect of at-risk adults; 2) review the provision of protective services to at-risk adults; 3) facilitate interagency cooperation; and 4) to provide community education on mistreatment and self-neglect of at-risk adults. The AP Team will work to coordinate protective services within the community service delivery system, including team member agencies and other local service agencies, to provide and implement care plans for at-risk adult victims of mistreatment and self-neglect.

As a member of the AP Team, I agree to:

1. Commit the time to fully participate in the team meetings on a regular basis.
2. Attend regularly scheduled team meetings, except for unavoidable absences.
3. Learn as much as possible about at-risk adults and how to respond to adult victims.
4. Provide my professional opinion and advice on how to proceed with APS cases presented for review. Attempt to find appropriate answers to questions in my field of expertise.
5. Advise and assist in the development and implementation of procedures designed to integrate the efforts of the AP Team and other local agencies.
6. Assist, to the extent possible, in educating my professional colleagues and the public about the problems and issues surrounding the mistreatment and self-neglect of at-risk adults, and about the service parameters of the county adult protective services program.
7. Advocate for better alternatives for at-risk adults in need of protective services.
8. Respect and maintain the confidentiality of all clients served by the county APS program.
9. Represent _____(agency name) on the AP Team, for a term established in the team by-laws.

Signature – County Department Representative Date

Signature – APS AP Team Member Date

Member Organization’s Street Address

Member Organization’s Mailing Address City Zip Code

Phone Fax Email

SAMPLE BY-LAWS

BY-LAWS Adult Protection Team _____County

Adopted on: _____ by _____ County Department of Social (Human) Services

PURPOSE OF THE AP TEAM

The purpose of the _____ County Adult Protection Team (AP Team) is to serve as an advisory body to the _____ County Department of Social (Human) Services' adult protective services staff, to "review the processes used to report and investigate reports of mistreatment or self-neglect of at-risk adults; review the provision of protective services for such adults; facilitate interagency cooperation; and provide community education on mistreatment and self-neglect of at-risk adults." Section 26-3.1-103(3), C.R.S.

The AP Team serves:

- To provide a forum for selected referrals and discussion of other agency and community services for at-risk adults.
- To coordinate services and information as they relate to specific clients.
- To prevent duplication of services by networking and sharing information and resources.
- To promote interagency education by providing team members an opportunity to share information regarding specific service areas of expertise.
- To review adult protective service cases presented by the adult protective services caseworkers, for continued departmental and other agency involvement and intervention, both during the assessment and the on-going case phases.
- To increase public knowledge of adult protection and the at-risk adult population by providing community education on mistreatment and self-neglect of at-risk adults.
- To identify gaps in existing service systems.
- To identify service needs within the community.

SAMPLE BY-LAWS

- To review applicable regulations and policy changes that may impact at-risk adults.
- To establish protocols between agencies that serve at-risk adults.
- To review processes used to report and investigate mistreatment and self-neglect of at-risk adults.

TEAM MEMBERSHIP

Membership of the AP Team will consist of a maximum of _____ individuals. Suggested membership includes, but will not be limited to, representatives of the following professions (CDHS Staff Manual, Volume 7, Section 7.111, E, 1):

- Alcohol treatment
- Long term care ombudsmen
- Area agencies on aging
- Mental health
- Banks and financial institutions
- Physicians
- Community center boards
- Private attorneys
- District attorneys
- Public housing
- Health care providers
- Senior centers
- Hospital discharge planners
- Social services
- Law enforcement
- Home health providers
- Legal services
- Long term care providers
- Other special interest groups

Team membership will be voluntary. Members are required to sign a confidentiality agreement and are expected to strictly adhere to that agreement to assure the confidentiality of referral information and information contained in specific cases. Team members will renew and re-sign these agreements every six months or annually (*choose option that best meets county's needs*). Guest professionals will sign a confidentiality agreement at the beginning of each meeting they are invited to attend.

Where applicable, the AP Team will ask selected agencies for support by requesting that each agency director appoint a representative to the AP Team, giving that representative the authority to act in an advisory capacity, and to commit to the provision of services or other action needed from his/her agency. Each team member will secure authority from his/her agency to act in an advisory capacity while serving on the AP Team. Each team member will secure authority from his/her agency to commit to review the provision of protective services and other action(s) needed from his/her agency.

SAMPLE BY-LAWS

As authorized employees or volunteers to the _____ County Department of Social (Human) Services, team members are governed by the rules and regulations of the Colorado Department of Human Services. Liability coverage will be provided by the county up to the limits of governmental immunity, as authorized by Section 24-10-101, C.R.S., et. seq. Members may nominate an alternate from their own agency who must receive prior approval by the AP Team.

CONFLICT OF INTEREST

Conflict of interest refers to a situation in which a team member's or prospective team member's personal or business interests have the potential to impair his/her judgment in carrying out the team member's responsibilities. Team members may have an ongoing potential for conflict of interest in APS cases, such as home health providers, or may have a case-limited conflict of interest, such as a personal relationship with an APS client and/or client's family.

Each situation that could raise conflict of interest questions will be considered by the County Department of Social (Human) Services director on its own merit. When it appears that a team member has potential conflict of interest that could raise questions about the team member's impartiality during case review and planning, the team member will complete a Conflict of Interest form for review by the county director.

The county director, or the director's designee, will determine the impact, if any, of the potential conflict of interest. This determination will establish the team member's level of participation on the AP Team. Participation may proceed without restrictions, with specified limitations, or the team member or prospective team member may be prohibited from participating on the team.

TERMS OF OFFICE

Appointment will be for a period of two years unless the member resigns. Each member will be asked by the AP Team to recommit to team membership every two years.

SAMPLE BY-LAWS

TEAM COORDINATOR DUTIES

The team coordinator will be an adult protective services program supervisor, lead worker, or other employee from the _____ County Department of Social (Human) Services. The team coordinator duties include:

- Recruiting and convening members of the AP Team;
- Assisting with drafting the team by-laws and confidentiality agreements;
- Assisting with drafting the team membership agreements;
- Determining criteria to select APS cases that are most appropriate for review;
- Assisting with preparing cases for presentations;
- Acting as liaison between the APS caseworkers and other team members by soliciting feedback on the team process from both groups;
- Acting as liaison between the APS caseworkers and other team members for development of community educational events and materials;
- Assuming or designating administrative duties, including:
 - o Planning, organizing, and facilitating team meetings;
 - o Notifying members of meeting schedules;
 - o Preparing, reviewing, and finalizing meeting agendas;
 - o Summarizing cases for review;
 - o Finding relevant articles, videos, and guest speakers for presentations;
 - o Assuring that APS provides case updates on previously reviewed cases;
 - o Assisting the APS unit in developing brief scenarios of new cases;
 - o Providing all team members with information needed for each meeting, such as handouts for special presentations;
 - o Assigning note taking duties and, if minutes are kept, distributing minutes from the previous meeting;
- Following up on recommendations by team members;
- Consulting with team members between meetings for additional pertinent case information; and

SAMPLE BY-LAWS

- Scheduling regular meetings (annual, semi-annual, quarterly) to meet with the county director and/or APS staff to review team issues.

TEAM CHAIRPERSON DUTIES

The team chairperson will be a member of the AP Team who may or may not be employed by the county department. The chairperson may volunteer, be appointed, or be elected by the AP Team. The team chairperson duties include:

- Providing input into the development of the meeting agenda;
- Overseeing the meeting process and follow the agenda;
- Bringing pertinent protection issues to the team's attention;
- Maintaining the meeting structure and time schedule;
- Coordinating with county staff on maintaining and distributing of meeting minutes;
and
- Initiating and monitoring membership letters of appointment and termination.

INDIVIDUAL MEMBERS' DUTIES

Individual team members' duties include:

- Committing to at least two hours per team meeting;
- Assisting with the development of team policies, goals, and objectives;
- Providing professional expertise and opinions as pertinent to each case review;
- Educating other team members about their respective service systems; and
- Assisting with identification of topics, planning, and development of community educational events.

TEAM STRUCTURE

The team meeting will be structured as follows:

- Team meetings will be scheduled on a monthly, bi-monthly or quarterly basis.

SAMPLE BY-LAWS

- Emergency meetings may be called as needed to provide support, advice, and guidance to the County Department.
- Regular meetings will be scheduled for two hours monthly.
- Recommendations by the AP Team are not mandates to the County Department of Social (Human) Services or any agency, but will be considered advisory to the County Department and other agencies.
- The AP Team can ask that a case review be repeated and information updated at a later date.
- When consensus cannot be reached among team members regarding decisions or actions, a vote by the majority of the members present shall prevail.
- It is extremely important that members understand the law as it relates to confidentiality in adult protection cases and agree to follow team confidentiality guidelines. Team members and alternates will be required to sign and abide by the confidentiality agreement.
- Referrals to the AP Team will be made through a process determined by the designated County Department staff person, i.e., the county director, the team coordinator, or the team chairperson.
- Each meeting will be public to the extent required by the Colorado Open Meetings Act, Section 24-6-401, C.R.S., et seq., and confidential in accordance with Section 26-3.1-102(7), C.R.S. and Section 26-3.1-204(7), C.R.S. The AP Team will operate under Executive Session during specific adult protection case reviews.

TEAM MEMBER RESIGNATION AND TERMINATION

- Team members resigning from the AP Team will provide 30 days notice to the County Department of Social (Human) Services prior to the date of resignation.
- Whenever possible, the agencies or organizations being represented by the resigning team member will designate another representative from the agency or organization to replace the resigning team member on the AP Team.
- The County Department of Social (Human) Services may request that a member resign and/or terminate membership for violating the terms of the Confidentiality Agreement,

SAMPLE BY-LAWS

for unprofessional or unethical conduct, and/or other behaviors or issues determined by the county department to be unacceptable for a team member.

- Requests for resignation of a team member will be made to the Director of the County Department of Social (Human) Services.
- When a team member resigns, a letter advising of this decision will be submitted to the team coordinator and/or chairperson.
- When team membership is terminated, a letter advising of this decision will be sent to the member by the team coordinator.

SAMPLE CONFIDENTIALITY AGREEMENT

Acknowledgment Of Confidentiality Concerning the Adult Protection Team

I, the undersigned member of the _____ County Adult Protection Team, herein referred to as the “AP Team,” acknowledge that I have been informed and am aware of the confidential nature of the information provided me as a member of the AP Team. I am advised and aware that:

1. Reports and records concerning at-risk adult mistreatment or self-neglect shall be confidential and are not public information. Any information received during a team meeting shall be considered confidential and only shared with team members and presenters during team meetings, with County Department of Social (Human) Services’ staff, and with law enforcement and the District Attorney’s office in the _____ judicial district, as provided in Section 26-3.1-102, C.R.S.
2. Disclosure of the name and address of the informant, the at-risk adult or member of said at-risk adult’s family and other identifying information involved in such reports and records shall be permitted only when authorized by a court for good cause and shall not be disclosed outside of team meetings, except as provided in Section 26-3.1-102(7)(b), C.R.S. and Section 26-3.1-204(7)(b), C.R.S., copies of which have been provided to me.
3. Violation of the confidentiality requirements, detailed in Section 26-3.1-102(7), and Section 26-3.1-204(7), C.R.S. constitutes a class 2 petty offense and upon conviction shall be punished by a fine of not more than \$300.00. In addition, a breach of confidentiality shall result in termination as a member of the AP Team.
4. Nothing in this Agreement shall prevent me from commenting publicly about general trends or concerns perceived with the County Department of Social (Human) Services or state laws relating to adult protection. _____ County will not indemnify me, defend me, or contribute financially to my defense should civil or criminal claims be made against me if I choose to speak publicly concerning my service on the AP Team.

Adult Protection (AP) Team Member

Date

SAMPLE CASE PRESENTATION WORKSHEET

Case Presentation Worksheet Adult Protection Team (AP Team)

Team Member's Name: _____

Team Member's Agency/Organization: _____

Phone Number: _____ E-mail: _____

Client identifier (first name/initial/pseudonym): _____ Age/DOB: _____

1. Brief summary of current situation or problem:

2. Current household composition and living arrangement:

3. Current support system, if any:

SAMPLE CASE PRESENTATION WORKSHEET

4. Health and/or disability status:

5. What interventions have been tried, and with what results?

6. What specific questions does the county have for the AP Team?

SAMPLE TEAM SELF-ASSESSMENT TOOL

Please rate (circle) on a 1-4 scale, the level at which you feel your AP Team, herein referred to as the "AP Team," is functioning in each of the following areas. The ratings are as follows:

1 – Totally disagree
2 – Mostly disagree

3 – Mostly agree
4 – Totally agree

1. I am notified about team meetings in a timely manner.
1 2 3 4
2. I am notified when and where the team meetings take place.
1 2 3 4
3. I understand what the goals and objectives of our AP Team are regarding APS case review.
1 2 3 4
4. Our AP Team is successful in meeting its goals and objectives.
1 2 3 4
5. There is adequate professional representation on the AP Team to provide a true multi-disciplinary approach to case reviews.
1 2 3 4
6. I clearly understand what my role is at team meetings.
1 2 3 4
7. Team meetings are well run by the chairperson and the county.
1 2 3 4
8. Team meetings provide educational programs that help me better understand safety and protection issues for at-risk adults.
1 2 3 4
9. I have a clear understanding of the service parameters of the APS program.
1 2 3 4
10. Team meetings provide educational programs that help the community better understand safety and protection issues for at-risk adults.
1 2 3 4
11. There is adequate time and opportunity at team meetings for me to share my expertise during case discussions.
1 2 3 4

SAMPLE TEAM SELF-ASSESSMENT TOOL

12. The AP Team is supportive of the information I provide from my agency's perspective.
1 2 3 4
13. Suggestions from team members offered to me as a representative of my agency during meetings are constructive in nature.
1 2 3 4
14. Team meetings are well worth my (and my agency's) time.
1 2 3 4

Please check any of the following areas that you believe require further development by the AP Team:

15. _____ More diverse professional agency representation on the AP Team
Suggestions: _____

16. _____ More opportunity for team member discussion and input on reviewed case(s)
Suggestions: _____

17. _____ More discussion of case issues
Suggestions: _____

18. _____ More educational programs that pertain to APS and at-risk adult issues
Suggestions: _____

19. _____ Other: _____

20. Please indicate aspects of the team meetings that you find particularly helpful and/or interesting.

21. Please indicate problems or challenges that the AP Team faces.

SAMPLE CONFLICT OF INTEREST DISCLOSURE

Conflict of interest refers to a situation in which an Adult Protection (AP) team member's or prospective team member's personal or business interests have the potential to impair his/her judgment in carrying out the team member's responsibilities. Team members may have an ongoing potential for conflict of interest in APS cases, such as a member representing a particular service agency, or may have a case-limited conflict of interest, such as a personal relationship with an APS client and/or client's family. When it appears that a team member has a potential conflict of interest that could raise questions about the team member's impartiality during case review and planning, the team member will complete this Conflict of Interest Disclosure for review by the County Department of Social (Human) Services director or designee.

.....
Name of Disclosing AP Team Member:

Ongoing Conflict Of Interest

Please describe the nature of the potential conflict:

Please describe measures proposed to mitigate the potential conflict:

Situational Conflict Of Interest

Please describe the nature of the potential conflict:

Please describe measures proposed to mitigate the potential conflict:

.....
Disposition: (To be completed by the County Department's director or director's designee.)

Conflict of interest is unsupported.

Conflict of interest can be mitigated with these specified limitations:

Conflict of interest prohibits participation in case review of _____.

Conflict of interest prohibits prospective member's participation on the team.

County Department Director (or Designee) Signature and Date

Protective Services For Adults At Risk Of Mistreatment Or Self-Neglect

Part 1 – Protective Services For At-Risk Adults

26-3.1-101. Definitions.

As used in this article, unless the context otherwise requires:

(1) "At-risk adult" means an individual eighteen years of age or older who is susceptible to mistreatment as such term is defined in subsection (4) of this section or self-neglect as such term is defined in subsection (7) of this section because the individual is unable to perform or obtain services necessary for the individual's health, safety, or welfare or lacks sufficient understanding or capacity to make or communicate responsible decisions concerning the individual's person or affairs.

(2) "Caretaker" means a person, as such term is defined in subsection (5) of this section, who is responsible for the care of an at-risk adult, as such term is defined in subsection (1) of this section, as a result of a family or legal relationship or who has assumed responsibility for the care of an at-risk adult.

(3) "Least restrictive intervention" means acquiring or providing services, including protective services, for the shortest duration and to the minimum extent necessary to remedy or prevent situations of actual mistreatment or self-neglect.

(4) "Mistreatment" means an act or omission which threatens the health, safety, or welfare of an at-risk adult, as such term is defined in subsection (1) of this section, or which exposes the adult to a situation or condition that poses an imminent risk of death, serious bodily injury, or bodily injury to the adult. "Mistreatment" includes, but is not limited to:

(a) Abuse which occurs:

(I) Where there is infliction of physical pain or injury, as demonstrated by, but not limited to, substantial or multiple skin bruising, bleeding, malnutrition, dehydration, burns, bone fractures, poisoning, subdural hematoma, soft tissue swelling, or suffocation;

(II) Where unreasonable confinement or restraint is imposed; or

(III) Where there is subjection to nonconsensual sexual conduct or contact classified as a crime under the "Colorado Criminal Code", title 18, C.R.S.;

(b) Caretaker neglect which occurs when adequate food, clothing, shelter, psychological care, physical care, medical care, or supervision is not secured for the at-risk adult or is not provided by a caretaker in a timely manner and with the degree of care that a reasonable person in the same situation would exercise; except that the withholding of artificial nourishment in accordance with the "Colorado Medical Treatment Decision Act", article 18 of title 15, C.R.S., shall not be considered as abuse;

(c) Exploitation which is the illegal or improper use of an at-risk adult for another person's advantage.

(5) "Person" means one or more individuals, limited liability companies, partnerships, associations, corporations, legal representatives, trustees, receivers, or the state of Colorado, and all political subdivisions and agencies thereof.

(6) "Protective services" means services provided by the state or political subdivisions or agencies thereof in order to prevent the mistreatment or self-neglect of an at-risk adult. Such services include, but are not limited to: Receiving and investigating reports of mistreatment or self-neglect, the provision of casework and counseling services, arranging for coordinating, delivering where appropriate, and monitoring services, including medical care for physical or mental health needs, protection from mistreatment, and assistance with application for public benefits, referral to community service providers, and initiation of probate proceedings.

(7) "Self-neglect" means an act or failure to act whereby an at-risk adult substantially endangers the adult's health, safety, welfare, or life by not seeking or obtaining services necessary to meet the adult's essential human needs. Choice of lifestyle or living arrangements shall not, by itself, be evidence of self-neglect.

26-3.1-102. Reporting requirements.

(1) (a) An immediate oral report of abuse should be made or caused to be made within twenty-four hours to the county department or during non-business hours to a local law enforcement agency responsible for investigating violations of state criminal laws protecting at-risk adults by any person specified in paragraph (b) of this subsection (1) who has observed the mistreatment or self-neglect of an at-risk adult or who has reasonable cause to believe that an at-risk adult has been mistreated or is self-neglected and is at imminent risk of mistreatment or self-neglect.

(b) The following persons are urged to make or initiate an initial oral report within twenty-four hours followed by a written report within forty-eight hours:

(I) Physicians, surgeons, physicians' assistants, or osteopaths, including physicians in training;

(II) Medical examiners or coroners;

(III) Registered nurses or licensed practical nurses;

(IV) Hospital and nursing home personnel engaged in the admission, care, or treatment of patients;

(V) Psychologists and other mental health professionals;

(VI) Social work practitioners;

(VII) Dentists;

(VIII) Law enforcement officials and personnel;

(IX) Court-appointed guardians and conservators;

(X) Fire protection personnel;

(XI) Pharmacists;

(XII) Community centered board staff;

(XIII) Personnel of banks, savings and loan associations, credit unions, and other lending or financial institutions;

(XIV) State and local long-term care ombudsmen;

(XV) Any caretaker, staff member, or employee of or volunteer or consultant for any licensed care facility, agency, home, or governing board.

(c) In addition to those persons urged by this subsection (1) to report known or suspected mistreatment or self-neglect of an at-risk adult and circumstances or conditions which might reasonably result in mistreatment or self-neglect, any other person may report such known or suspected mistreatment or self-neglect and circumstances or conditions which might reasonably result in mistreatment or self-neglect of an at-risk adult to the local law enforcement agency or the county department. Upon receipt of such report, the receiving agency shall prepare a written report within forty-eight hours.

(2) Pursuant to subsection (1) of this section, the report shall include: The name and address of the at-risk adult; the name and address of the at-risk adult's caretaker, if any; the age, if known, of such at-risk adult; the nature and extent of such at-risk adult's injury, if any; the nature and extent of the condition that will reasonably result in mistreatment or self-neglect; and any other pertinent information.

(3) A copy of the report prepared by the county department in accordance with subsections (1) and (2) of this section shall be forwarded within twenty-four hours to the district attorney's office and the local law enforcement agency. A report prepared by the local law enforcement agency shall be forwarded within twenty-four hours to the county department and to the district attorney's office.

(4) No person, including a person specified in subsection (1) of this section, shall knowingly make a false report of mistreatment or self-neglect to a county department or local law enforcement agency. Any person who willfully violates the provisions of this subsection (4) commits a class 3 misdemeanor and shall be punished as provided in section [18-1.3-501](#), C.R.S., and liable for damages proximately caused thereby.

(5) Any person, except a perpetrator, complicitor, or coconspirator, who makes a report pursuant to this section shall be immune from any civil or criminal liability on account of such report, testimony, or participation in making such report, so long as such action was taken in good faith and not in reckless disregard of the truth or in violation of subsection (4) of this section.

(6) No person shall take any discriminatory, disciplinary, or retaliatory action against any person who, in good faith, makes a report of suspected mistreatment or neglect of an at-risk adult.

(7) (a) Except as provided in paragraph (b) of this subsection (7), reports of the mistreatment or self-neglect of an at-risk adult, including the name and address of any at-risk adult,

member of said adult's family, or informant, or any other identifying information contained in such reports, shall be confidential, and shall not be public information.

(b) Disclosure of the name and address of an at-risk adult or member of said adult's family and other identifying information contained in a report shall be permitted only when authorized by a court for good cause. Such disclosure shall not be prohibited when a criminal complaint, information, or indictment based on the report is filed or when there is a death of a suspected at-risk adult from mistreatment or self-neglect and a law enforcement agency files a formal charge or a grand jury issues an indictment in connection with the death.

(c) Any person who violates any provision of this subsection (7) is guilty of a class 2 petty offense and, upon conviction thereof, shall be punished by a fine of not more than three hundred dollars.

26-3.1-103. Investigations.

(1) The agency receiving a report of mistreatment or self-neglect of an at-risk adult shall make a thorough investigation immediately upon receipt of a report. The immediate concern of the report shall be the protection of the at-risk adult. The investigation shall, at a minimum, include a face-to-face interview of the at-risk adult alleged to be mistreated or self-neglected. The county department shall arrange for its investigation to be conducted by persons trained to conduct such investigations.

(2) It is the general assembly's intent that, in each county of the state, law enforcement agencies, county departments of social services, and any other agencies responsible under federal law or the laws of this state to investigate mistreatment or self-neglect of at-risk adults develop and implement cooperative agreements to coordinate the investigative duties of the agencies and that the focus of such agreements shall be to ensure the best protection for at-risk adults. The agreements shall provide for special requests by one agency for assistance from another agency and for joint investigations.

(3) Each county or contiguous group of counties in the state in which a minimum number of reports of mistreatment or self-neglect of at-risk adults are annually filed shall establish an at-risk adult protection team. The State Board shall promulgate rules to specify the minimum number of reports that will require the establishment of an adult at-risk protection team. The at-risk adult protection team shall review the processes used to report and investigate mistreatment or self-neglect of at-risk adults, review the provision of protective services for such adults, facilitate interagency cooperation, and provide community education on the mistreatment and self-neglect of at-risk adults. The director of each county department is directed to create or coordinate a protection team for the respective county in accordance with rules adopted by the state board of human services, which rules shall govern the establishment, composition, and duties of the team and shall be consistent with this subsection (3).

26-3.1-104. Provision of protective services for at-risk adults - consent - nonconsent - least restrictive intervention.

(1) If the county director or such director's designee determines that an at-risk adult is being mistreated or self-neglected, or is at risk thereof, and the at-risk adult consents in writing to

protective services, the county director or designee shall immediately provide or arrange for the provision of protective services.

(2) If the county director or designee determines that an at-risk adult is being or has been mistreated or self-neglected, or is at risk thereof, and if the at-risk adult does not consent to the receipt of protective services, the county director is urged, if no other appropriate person is able or willing, to petition the court, pursuant to part 3 of article 14 of title 15, C.R.S., for an order authorizing the provision of specific protective services and for the appointment of a guardian, for an order authorizing the appointment of a conservator pursuant to part 4 of article 14 of title 15, C.R.S., or for a court order providing for any combination of these actions.

(3) Any protective services provided pursuant to this section shall include only those services constituting the least restrictive intervention.

26-3.1-105. Rules and regulations.

The state department shall promulgate appropriate rules and regulations for the implementation of this article.

26-3.1-106. Limitation.

Nothing in this article shall be construed to mean that a person is abused, neglected, exploited, or in need of emergency or protective services for the sole reason that he or she is being furnished or relies upon treatment by spiritual means through prayer alone in accordance with the tenets and practices of that person's recognized church or religious denomination, nor shall anything in this article be construed to authorize, permit, or require any medical care or treatment in contravention of the stated or implied objection of such a person.

SECTION 7.100
"Table of Contents"

7.100	PROGRAM AREA 2: PROTECTION OF AT-RISK ADULTS UNABLE TO PROTECT THEIR OWN INTERESTS
7.101	Program Definition
7.102	Definitions
7.103	Target Population
7.104	Interagency Coordination
7.105	Intake
7.106	Assessment and Response
7.107	Investigation
7.108	Case Plan and Provision of Services
7.109	Reassessment
7.110	Case Closure
7.111	Multi-Disciplinary Teams
7.112	Intercounty Case Transfers
7.113	Least Restrictive Intervention
7.114	Court Intervention
7.115	Documentation

7.100 PROGRAM AREA 2: PROTECTION OF AT-RISK ADULTS UNABLE TO PROTECT THEIR OWN INTERESTS

7.101 Program Definition

Rev. eff. 1/1/06 This program is designed to intervene with, or on the behalf of, at-risk adults to correct or alleviate situations in which actual or imminent danger of abuse, neglect, exploitation (herein known as mistreatment), or self-neglect exists and to utilize support systems to provide continuing safety from the incident(s) of mistreatment or self-neglect.

7.102 Definitions

Rev. eff. 1/1/06 The definitions set forth in Section 26-3.1-101, C.R.S., shall apply to these rules.

7.103 Target Population

- Rev. eff. 1/1/06
- A. Protective services to at-risk adults are provided without regard to income or resources.
 - B. At-risk adults 18 years of age and older who are unable to protect their own interests, and who are:
 - 1. In need of assessment for protection; and/or,
 - 2. In need of short term services due to a report of actual or potential mistreatment or self-neglect; and/or,
 - 3. In need of ongoing protection as the result of documented evidence of mistreatment or self-neglect.
 - C. At-risk adults for whom the county department has been appointed guardian and/or conservator.
 - D. At-risk adults for whom the county department is designated as representative payee.
 - E. At-risk adults who are residents of long term care facilities, such as nursing homes, assisted living residences, adult foster care, and personal care boarding homes, who must relocate due to the closure of the facility and:
 - 1. For whom the county department has been appointed guardian and/or conservator; or
 - 2. Who are in need of protective services due to a lack of case management and/or assistance from any other reliable source.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	

COLORADO DEPARTMENT OF HUMAN SERVICES
STAFF MANUAL VOLUME 7
SOCIAL SERVICES

7.104 Interagency Coordination

Rev. eff. A. 1/1/06 The county department, in conjunction with local law enforcement agencies and the Office of the District Attorney, shall develop a cooperative agreement regarding the investigative duties of each agency. The focus of such agreements shall be the coordination of investigations and protective services that promotes the protection of at-risk adults. The agreement shall, at a minimum, include:

1. A process outlining the role of law enforcement receiving, assessing, referring, and responding to reports received during the county department's non-business hours, if applicable;
2. A procedure regarding the county department's submission of written and/or verbal reports of mistreatment and self-neglect to local law enforcement agencies and to the Office of the District Attorney;
3. Procedures for the provision of assistance from one agency upon the request of the other agency; and,
4. Procedures to coordinate investigative duties.

B. The county department shall collaborate with other government and community agencies to coordinate services that promote the protection of at-risk adults.

7.105 Intake

Rev. eff. A. 1/1/06 The county department shall receive oral or written reports of at-risk adult mistreatment and/or self-neglect, pursuant to Section 26-3.1-101, C.R.S., et seq.

B. The county department shall have an established process during business and non-business hours for receiving such reports.

C. The county department staff shall secure intake information to, at a minimum, include:

1. The adult's information, such as name, gender, date of birth or approximate age, address, current location if different from permanent address, and phone number;
2. The reporter's information, unless the reporter requests anonymity, such as name, phone number, address, relationship to client and, if applicable, the reporter's agency or place of business;
3. Allegations of mistreatment or self-neglect;
4. Safety concerns for the adult;
5. Safety concerns for the caseworker; and,
6. The alleged perpetrator's information, such as name, gender, address, phone number, and relationship to the client.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	

COLORADO DEPARTMENT OF HUMAN SERVICES
STAFF MANUAL VOLUME 7
SOCIAL SERVICES

7.105 Intake (continued)

- D. The county department shall screen the report to determine whether:
 - 1. The adult meets the definition of an at-risk adult as defined in Section 26-3.1-101, C.R.S.; and,
 - 2. The allegations involve mistreatment and/or self-neglect as defined in Section 26-3.1-101, C.R.S.
- E. For reports not meeting the guidelines set forth in Section 7.105, D, and therefore not requiring an investigation, the county department may provide appropriate information and referral(s) to the reporting party. Either casework or supervisory staff may inform the reporting party of the decision not to investigate.
- F. The county department shall document intake information within two working days of the receipt of the report.

7.106 Assessment and Response

Rev. eff. A. For reports meeting the guidelines set forth in Section 7.105, D, the county department shall
1/1/06 immediately assess the allegation(s) in order to determine the level of risk to the client.

- B. Upon completion of the initial assessment, the county department shall:
 - 1. Determine a timeframe for investigation based upon the following definitions of risk:
 - a. "Clear and imminent danger": Factors present indicate the client is in immediate danger due to the severity of the mistreatment or self-neglect, or due to the vulnerability or physical frailty of the client (see Section 7.106, C).
 - b. "Urgent risk": Factors present indicate the client is at significant but not immediate risk of harm due to the severity of the mistreatment or self-neglect, or due to the vulnerability or physical frailty of the client (see Section 7.106, D).
 - c. "Moderate risk": Factors present indicate the client is not in imminent danger or urgent risk of harm but the potential for harm is present (see Section 7.106, E).
 - 2. Determine whether an investigation should be made in conjunction with law enforcement and/or personnel from other agencies.
 - 3. Document all actions related to client contact, including barriers to completing the contact, if applicable.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	

COLORADO DEPARTMENT OF HUMAN SERVICES
STAFF MANUAL VOLUME 7
SOCIAL SERVICES

- 7.106 Assessment and Response (continued)
- C. When the report indicates that there is clear and imminent danger to the client, the county department shall make a face-to-face contact with the client immediately, and further clarify and investigate the level of risk of mistreatment and/or self-neglect to the client.
 - D. When the report indicates urgent risk to the client, the county department shall make a face-to-face contact with the client within 24 hours and further clarify and investigate the level of risk of mistreatment and/or self-neglect to the client.
 - E. When the report indicates moderate risk to the client, the county department shall make a face-to-face contact with the client no later than three working days after the county department's receipt of the report, and further clarify and investigate the level of risk of mistreatment and/or self-neglect to the client.
 - F. When the report originally appears to indicate a need for a face-to-face investigation but further assessment determines that a face-to-face contact is not required to resolve potential risk, the county department may provide telephone assistance, such as:
 - 1. A referral to community service providers; and/or,
 - 2. Information to the client and/or reporter enabling him/her to secure services or legal authority to address the client's needs; and/or,
 - 3. Communication with service providers and coordination of existing services.

7.107 Investigation

Rev. eff. A.
1/1/06 If a face-to-face visit occurs, the county department shall open the case for further investigation and provision of protective services. The investigation shall include, at a minimum, evaluation of the following:

- 1. Indicators of mistreatment or self-neglect.
- 2. Level of risk to the client.
- 3. Details of the allegations, including the person(s) or situation(s) causing the risk to the client.
- 4. The reason(s), if any, the client is unable to act on the client's own behalf, including:
 - a. The capacity to make decisions; and,
 - b. Other risk factors impacting the client's ability to act.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	

COLORADO DEPARTMENT OF HUMAN SERVICES
STAFF MANUAL VOLUME 7
SOCIAL SERVICES

7.107 Investigation (continued)

- B. Additionally, the investigation shall include evaluation and written documentation of the following, as applicable:
1. Physical status, including the client's ability to perform various activities of daily living and any indicators of physical (including sexual) trauma to or neglect of the client.
 2. Environmental status, including the conditions within the client's residence, and the functionality of heating, plumbing, and electrical systems.
 3. Financial status, including the client's income, sources of income, status of bank accounts, monthly bills, assets, and the existence of others assuming authority over the client's finances.
 4. Medical status, including the client's current and previous medical conditions, hospitalizations, and prescribed medications.
 5. Mental status, including the client's capacity to make decisions; ability to receive or communicate information; behaviors that threaten the safety of the client or others; a history of mental health conditions, hospitalizations, and medications; and, the existence of others with legal authority for decision-making for the client.
 6. Support system status, including family members, friends, caregivers, involvement with organizations, health providers, and legal representation.
- C. When it is determined through an investigation that risk of mistreatment and/or self-neglect to the client exists, a plan shall be developed for the provision of ongoing protective services.

7.108 Case Plan and Provision of Services

Rev. eff. A. 1/1/06 The client's written consent is required for the provision of ongoing protective services. If written consent cannot be obtained, verbal consent shall be obtained. The receipt of verbal consent and the reason written consent could not be obtained shall be documented in the case record.

- B. If a client is at risk for harm, refuses to consent to services, and is suspected to lack capacity to make decisions, the county department is urged to pursue court intervention as outlined in Section 7.114.
- C. If a client is suspected to lack capacity and court intervention has been initiated, the county department may continue to assess the client's situation and offer services.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	

7.108 Case Plan and Provision of Services (continued)

- D. The case plan shall, at a minimum, include the following:
 - 1. The client’s service needs to reduce risk;
 - 2. Goals for implementing services, including the proposed activities of the caseworker, client, community agencies, and informal support systems; and,
 - 3. The date the client consented to the protective services and the service goals outlined in the case plan.
- E. The county department shall maintain ongoing client contact.
 - 1. In situations in which there are continuing factors of client risk and vulnerability, a face-to-face client contact shall be made by the county department at least every thirty calendar days.
 - 2. In situations in which the client resides in a supervised in-home or facility setting that reduces the possibility of further mistreatment or self-neglect, a face-to-face contact with the client shall be made by the county department at least every sixty calendar days. A face-to-face or telephone contact shall be made with the caretaker or responsible collateral at least once during the sixty day period.

7.109 Reassessment

Rev. eff. 1/1/06 A written reassessment shall be completed at least once every six months and at the time of case closure. The reassessment shall include all of the following:

- A. A reassessment of the client’s status as outlined in Section 7.107.
- B. A reassessment of the client’s case plan as outlined in Section 7.108, A – C.
- C. Documentation of services provided or arranged, including the date of implementation.
- D. Case plan goals that have not been achieved and the reasons for not achieving the goals.
- E. Documentation of new client needs and goals for meeting the needs.
- F. The ongoing service plan and time frame for achieving remaining and/or new goals.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	
COLORADO DEPARTMENT OF HUMAN SERVICES STAFF MANUAL VOLUME 7 SOCIAL SERVICES				

7.110 Case Closure

Rev. eff. A. Cases not requiring additional protective assessment or ongoing intervention shall be closed within sixty calendar days of the last phone, mail, or face-to-face contact with the client.
1/1/06

B. Cases in which the client is relocated to a nursing home may remain open for evaluation of the continuing need for this level of care for no longer than six months, unless the county department has a court appointed guardianship or conservatorship, in which situation the case shall remain open for the duration of the court order.

C. Case closure may occur for any or all of the following reasons:

1. The client does not meet the definition of an at-risk adult.
2. The allegations are determined to be unfounded.
3. The assessment uncovers situations of actual or potential mistreatment or self-neglect and the client is competent to make decisions and refuses services. Whenever possible, a signed statement shall be obtained from the client affirming that the client is aware of the situation which places the client at risk, the possible consequences if the situation continues, and the client's refusal of services.
4. If, after repeated and documented efforts, the whereabouts of the client cannot be established.
5. The client no longer needs protective services.
6. Service goals are completed.
7. Repeated efforts at service delivery have proven to be ineffective and no additional alternatives exist.
8. The client died. The case may remain open for as long as activities related to the settlement of the client's estate continue.

D. At the time of case closure, a final summary shall be written which shall include:

1. An assessment of the client's status as outlined in Section 7.107;
2. An evaluation of the client's risk factors and associated risk level;
3. A summary of the client's service plan, including goals achieved and goals not achieved; and,
4. The reason(s) for case closure.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	

COLORADO DEPARTMENT OF HUMAN SERVICES
STAFF MANUAL VOLUME 7
SOCIAL SERVICES

7.111 Adult Protection (AP) Teams

- Rev. eff. 10/1/07
- A. The director of each county department with ten (10) or more reports of at-risk adult mistreatment and/or self-neglect in the prior State Fiscal Year is required to establish or coordinate an at-risk adult protection team.
1. The county may establish its own AP Team or may coordinate with another contiguous county(ies) that is required to coordinate an AP Team.
 2. Teams shall meet quarterly, at a minimum.
 3. The role of the adult protection team shall be advisory only.
- B. The purpose of the AP team shall be to:
1. Review the processes used to report and investigate mistreatment and self-neglect of at-risk adults;
 2. Review the provision of protective services to at-risk adults;
 3. Facilitate interagency cooperation regarding services to at-risk adults; and
 4. Provide community education on the mistreatment and self-neglect of at-risk adults. The team, or designee, shall:
 - a. Determine the topic to be presented, based upon county or community need;
 - b. Use materials developed by the county, the state, national associations, or other professional adult protective services agencies;
 - c. At a minimum, provide three events per fiscal year, in any combination of the following:
 - 1) A live presentation to a community or professional group;
 - 2) Participation in a senior or community forum, such as:
 - a. Providing an article for a newsletter or local community newspaper; or
 - b. Providing brochures or other written materials at a county or other community event;
 - 3) Sponsorship of a community Elder Abuse Awareness Day or similar event.
- C. The director of the county department or the director's designee shall identify and recruit team members consistent with professional groups as specified in Section 26-3.1-102(1)(b), C.R.S., and other relevant community agencies or individuals.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	8/3/2007	Adopted:	11/4/2005	2
Effective Date:	10/1/2007	Effective Date:	1/1/2006	

COLORADO DEPARTMENT OF HUMAN SERVICES
STAFF MANUAL VOLUME 7
SOCIAL SERVICES

- D. Each team member shall be advised of the confidential nature of his/her responsibilities in accordance with Section 26-3.1-102(7), C.R.S., and shall be required to sign a confidentiality agreement.
- E. The team shall develop and adopt written by-laws that minimally include the team's:
1. Purpose, as outlined in statute;
 2. Structure, including:
 - a. Meeting facilitation;
 - b. Frequency of meetings; and
 - c. Composition of the team.
 3. Rules for membership, including:
 - a. Members' duties;
 - b. Terms of office; and
 - c. Process for resignation and causes for termination from the team.
 7. Process for handling potential conflict of interest.
- F. Utilizing a state developed report form, the team or the county shall produce an annual adult protection team report that shall:
1. Be completed not later than August 31 for the prior state fiscal year;
 2. Be submitted to the state, upon request; and
 3. Minimally be kept for three years.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	8/3/2007	Adopted:	11/4/2005	2
Effective Date:	10/1/2007	Effective Date:	1/1/2006	

COLORADO DEPARTMENT OF HUMAN SERVICES
STAFF MANUAL VOLUME 7
SOCIAL SERVICES

7.112 Intercounty Case Transfers

Rev. eff. A. When a client relocates to a new county, the case shall be transferred to the receiving
1/1/06 county, except in situations as outlined in Section 7.112, B.

1. Within three (3) working days after the county department’s decision to transfer a case, the county department of former residence shall notify the receiving county department of the client’s relocation.
2. In situations where a case has been transferred, case record information shall be supplied to the receiving county department within fifteen (15) working days from the day that the former county notified the receiving county of the transfer.
3. The receiving county will consider the transfer as a new report and will establish a timeframe for investigation as specified in Section 7.106, B.
4. If, after repeated and documented efforts, the receiving county department is unable to locate the client, the receiving county department shall notify the former county department and the case may be closed.

B. When a client relocates to a new county, the case may remain with the former county department if:

1. Transfer would adversely affect the client’s health, safety, or welfare; and/or,
2. The case is within three months of resolution and the former county department chooses to retain the case; and/or,
3. The former county department holds representative payeeship and chooses to retain the case; and/or,
4. The former county department holds guardianship or conservatorship.
 - a. As specified in a written agreement, either the former or receiving county department may provide protective services.
 - b. Either county department may, with the agreement of the receiving county department, petition the court for a transfer of guardianship and/or conservatorship to the receiving county department.

7.113 Least Restrictive Intervention

Rev. eff. A. Unless the client has been adjudicated incapacitated by the court, the final decision as to
1/1/06 acceptance of protective services and services provided by collaborating agencies shall rest with the client.

B. Protective services provided to and other services arranged for the client shall be those services provided for the shortest duration and to the minimum extent necessary to meet the needs of the client.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	

COLORADO DEPARTMENT OF HUMAN SERVICES
STAFF MANUAL VOLUME 7
SOCIAL SERVICES

7.114 Court Intervention

Rev. eff. A.
1/1/06

When it appears that the client is at risk for mistreatment and/or self-neglect and to lack sufficient capacity to consent to services, the county department is urged to petition the court for an order authorizing the provision of specific protective services and for the appointment of a guardian and/or conservator.

B. Prior to reaching a decision to petition the court, the following factors shall be investigated and documented:

1. No other method of intervention will meet the client's needs.
2. The degree of incapacity, as supported by medical or psychiatric evidence, and the degree of risk as supported by investigative evidence warrants this action.
3. The suspected incapacity of the client and the degree of risk, as supported by the investigative evidence, warrants this action and medical or psychiatric evidence of incapacity cannot be obtained without court intervention.
4. The type of court intervention sought shall be the least restrictive intervention required to meet the needs of the client.

C. In the absence of other responsible parties, such as family or friends, county departments are urged to accept guardianship and/or conservatorship for at-risk adults who lack sufficient capacity to make decisions.

1. The county department shall consult with an attorney prior to filing a petition.
2. The county department shall provide all information deemed necessary by legal counsel.
3. A representative of the county department shall be prepared to testify in support of the petition.
4. When a county department is appointed by the court to act as guardian or conservator, certified copies of the letter of appointment shall be maintained in the client record.
5. The county department shall petition the court to vacate the appointment at such time as court ordered intervention is no longer necessary or the county department is no longer able to fulfill the obligations of the role assigned by the court.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	

COLORADO DEPARTMENT OF HUMAN SERVICES
STAFF MANUAL VOLUME 7
SOCIAL SERVICES

7.115 Documentation

- Rev. eff. 1/1/06
- A. All information and activities regarding the report, assessment, investigation, and intervention shall be thoroughly documented using forms and the data system(s) prescribed by the State.
 - B. Information and activities which cannot be documented using forms and the data system(s) prescribed by the State shall be documented in a hard copy client file.

THIS REVISION:	VII-05-7	LAST REVISION:	VII-98-2	REVISION NUMBER
Adopted:	11/4/2005	Adopted:	9/4/98	1
Effective Date:	1/1/2006	Effective Date:	11/1/98	

COLORADO DEPARTMENT OF HUMAN SERVICES
 STAFF MANUAL VOLUME 7
 SOCIAL SERVICES

**STATUTES AND REGULATIONS PERTAINING
TO AT-RISK ADULTS**

State Statutes

Criminal

Wrongs to At-risk Adults
Section 18-6.5-101, C.R.S., et seq.

Probate

Guardianship of Incapacitated Person
Section 15-14-301, C.R.S., et seq.

Protection of Property of Protected Person
(Conservatorship)
Section 15-14-401, C.R.S., et seq.

Advance Directives

Power of Attorney (General)
Section 15-14-601, C.R.S., et seq.

Directive Relating to Cardiopulmonary
Resuscitation
Section 15-18.6-101, C.R.S., et seq.

Colorado Medical Treatment Decision Act
(Living Will)
Section 15-18-101, C.R.S., et seq.

Proxy Decision Makers for Medical
Treatment
Section 15-18.5-101, C.R.S., et seq.

Civil

Power of Attorney (Medical Durable)
Section 15-14-501, C.R.S., et seq.

Civil Protection Orders
Section 13-14-101, C.R.S., et seq.

Special Populations

Alcoholism and Intoxication Treatment
Section 25-1-301, C.R.S., et seq.

Care and Treatment of the Mentally Ill
Section 27-10-101, C.R.S., et seq.

Care and Treatment of the Developmentally
Disabled
Section 27-10.5-101, C.R.S., et seq.

Federal Regulations

**HIPAA (Health Insurance Portability and
Accountability Act)**

Public Law 104-191, 104th Congress

Social Security Representative Payee
Regulations Code of Federal Regulations
20CFR404.2001