

Overview of Use of Tools in APS Practice

March 2023



Introduction

A search of the *Journal of Elder Abuse & Neglect* reveals that it has published 248 articles that use the word “tool.” Scrolling through the list of articles provides a sense of the importance of the nature of tools in APS practice.

As part of the recently completed, soon to be published *National APS Process Evaluation* (“Evaluation”), the Adult Protective Services Technical Assistance Resource Center (APS TARC) asked state APS programs questions in a survey centered around practice (“APS Practice Survey”), administered in the spring of 2021, about their use of tools. The purpose of this brief is to contextualize, summarize, and provide additional analysis of data that were included in the evaluation report.

This brief provides an overview of the current use of tools in APS to help programs understand how they are used in different areas of APS practice. It is not a comprehensive description of all available tools.

Background

The Administration for Community Living (ACL) recognizes the importance of tools within APS practice. Specifically:

- The ACL [Research Agenda for Adult Protective Services](#) identified use of tools as a theme (see [Theme 8](#)).
- The National Adult Maltreatment Reporting System (NAMRS) has one general question on use of tools in the Agency Component portion.
- In 2018, ACL contracted with New Editions Consulting, Inc. to create the [Adult Maltreatment Screening and Assessment Tools Inventory](#) (“Tools Inventory”) to identify and describe tested screening and assessment tools related directly to adult maltreatment for use by professionals in the field who interact directly with clients. The Tools Inventory comprises 46 tools, with the following information for each tool: maltreatment type, intended audience, number of items, format, how administered, amount of training required, copyright status, and contact information for the tool developer. The Inventory also provides an overall rating of the tool’s evidence.
- Finally, APS TARC has also recognized the importance of tools to APS practice. The textbox on the following page lists resources from APS TARC on the topic.

APS TARC Webinars That Address Tools

- [An Introduction to the Adult Maltreatment Screening and Assessment Tools Inventory](#)
- [Forensic Accounting: Tools for Financial Exploitation Investigations \(Part 1\)](#)
- [Using Standardized Tools in APS Case Management and Supervision](#)

What Is a Tool?

APS programs collect information at every stage of a case: intake/pre-screening, investigation, services, and quality assurance. Much of this information is collected in a structured manner, such as a form, to ensure consistent information is collected across cases. The APS Practice Survey includes many questions about the use of tools, and in the instructions explains that, “A tool is more than simply a form to collect information; it is a structured document or process designed to assist the worker with decision-making at critical case junctures, such as evaluation of client cognitive capacity or level of risk.”¹¹

Why Use a Tool?

An important finding of the *Evaluation* was the strong desire expressed by APS programs for increased consistency and quality of practice. Tools are one means of achieving this. While experienced caseworkers may find them to be more of a burden than a help, tools provide potential program management advantages.

As staff turnover increases, resulting in less experienced staff working cases, the need for tools increases. A tool ideally fills in the gap of knowledge

and ability among less experienced staff. It helps ensure expertise beyond professional education and APS training and is built into the information collection and decision-making processes, particularly for difficult and complex issues such as client decision-making ability. It does this by translating research and experience into information collection requirements and building decision criteria through a scale or score into the tool. The primary limitation of tools is that the scale or score is only as good as the quality of the information used to create it, and this information may be manipulated to achieve a desired decision. Appendix A provides a more in-depth discussion of why the use of tools is important.

APS Evaluation

The APS Process Evaluation asked practice questions in each of the following domains of APS practice about use of tools: intake, investigation, and post-investigation services. Several questions asked specifically about tool use. Additionally, the survey asked about obstacles to program improvement and recent innovations, to which many respondents mentioned tools. Appendix B provides the text of each survey question about tools. This report summarizes the information regarding tools.

Overview of Analyses

The following first analyzes the information about tools across the service domains from the evaluation and then for each domain separately. For each of these domains, the analysis summarizes the use of the different types of tools, the qualitative responses to the open-ended questions, and the relationship of the use of tools to the system

¹¹ Even with this definition, survey respondents may have varied in their interpretations of what constitutes a tool in APS practice.

outcomes. All data are from the practice survey unless otherwise noted.

Cross-Domain Analysis

Exhibit 1 shows, by domain, the number of programs that use various types of tools. The most

frequently used type of tool is an intake assessment (45 programs). The least frequently used type of tool assists with determining legal competency (four programs). No other type of tool is used by the majority of APS programs.

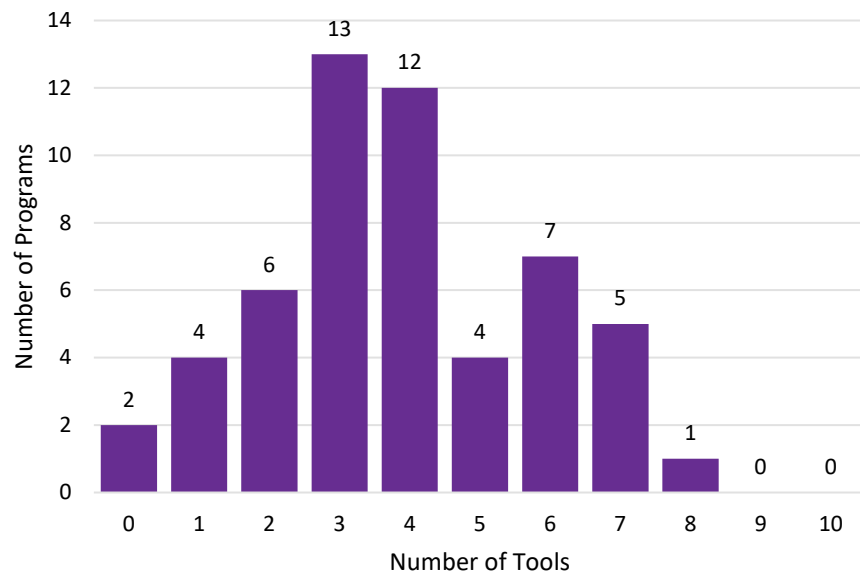
Exhibit 1 - Number of Programs for Each Type of Tool Across All Domains

Type of Tool	Number of Programs That Use It
Intake Assessment	45
Investigation Tools	
<i>Client Assessment (one or more of following)</i>	40
Specific for emergency/safety needs	16
General used for emergency/safety needs	25
Holistic for client assessment	18
<i>Client Decision-Making (one or more of following)</i>	27
Capacity decision-making	26
Competency decision-making	7
<i>Case Disposition</i>	22
Services Tools	
Determine whether services are needed	21
Develop service plans	21
Determine frequency of contacts for monitoring services	7

As shown in Exhibit 2, one APS program uses eight tools, two programs do not use any tools, and the most frequent number of tools used is three. Across all the domains, on average, each APS program uses four tools.

NAMRS collects information about use of tools “throughout the state.” Out of 55 reporting entities, 45 indicate that they use a tool. Appendix C provides the responses of two different states as an example of how an APS program may use a variety of tools.

Exhibit 2 - Total Number of Tools Used by APS Programs Across All Domains



Intake Tools

As noted above in Exhibit 1, the tool used most frequently by APS programs is an intake assessment. Forty-five APS programs (83%) use a tool for intake to collect information investigators need and to determine whether to accept the intake. Since many APS programs use specialized (not APS) intake staff to receive intakes, a tool helps ensure quality control from a program perspective.²

The practice survey asked programs about recent obstacles and innovations in intake. Tools were cited 17 times by APS programs as a recent innovation to enhance intake decision-making.

The survey also asked programs to provide the name of the intake tool and a brief description of it. Responses include tools provided by case management system vendors, specific tools developed for intake by a vendor, or state-specific

tools (such as “SOC341” or “Standardized adult intake template, no particular name per se”). The comments indicated tools are usually built into data systems. For example, one program described its tool as follows: “Intake Specialists may use the APS Eligibility Matrix as a guide to help determine if a report meets the APS eligibility criteria for services. The APS Eligibility Matrix includes the following domains for determining eligibility: maltreatment type, disability and conditions, and vulnerability.”

Investigation Tools

Overall

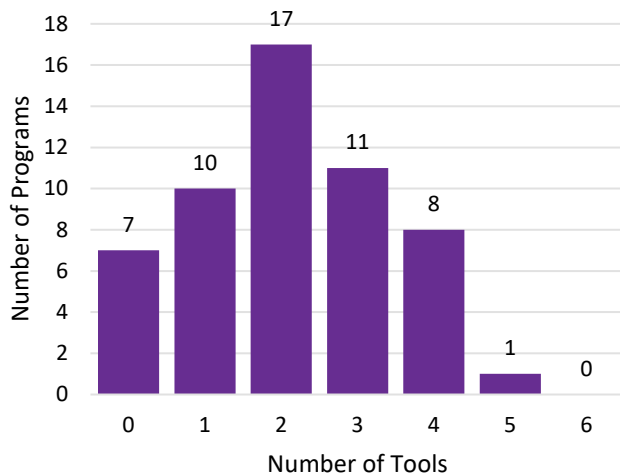
The practice survey asked about six tools in three areas related to investigations: assessments of a client’s need, assessments related to decision-making ability, and determining a case disposition.

² According to the *National APS Process Evaluation*, APS intakes are conducted exclusively by APS staff in 10 programs, only non-APS staff conduct intakes in 20 programs, while

intakes are conducted by both APS and non-APS staff in 21 programs

As shown in Exhibit 3, no programs use all six tools, and seven programs don't use any tools. On average, programs use two out of the six tools.

Exhibit 3 - Number of Investigation Tools Used by APS Programs



Assessments of Client Needs

As shown in Exhibit 1, 40 programs use a tool of some kind to assess client needs. Specifically, programs were asked in the survey how they assessed client emergency/safety needs — if they use a tool specifically for that purpose or a more general assessment tool — and if they use a tool to conduct a holistic client assessment. As shown in Exhibit 4, more programs use tools to determine emergency/safety needs — 25 use a general tool, 16 use a specific tool — than to conduct holistic assessments (18). The survey data indicates more programs rely on program-specific training than tools for client assessments or general social work training alone.

In response to the question regarding what tools APS programs use, programs identified numerous tools to conduct these assessments. As with intake tools, some are provided by case management vendors and several others use tools that were designed by the state program. As with intake tools,

the investigation tools are usually built into the state's case management system. The most frequent innovation in client assessments cited by programs in the survey was the use of tools. As an example, the text box on this page lists some of the responses.

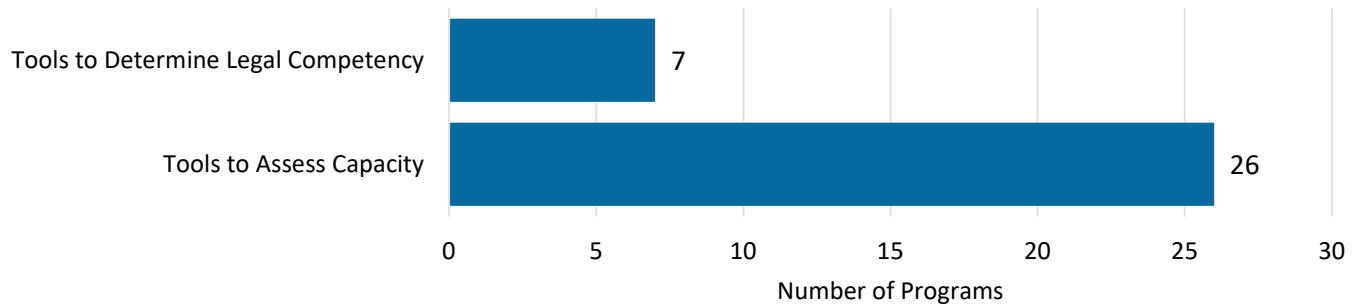
Innovations in the Use of Tools to Improve Client Assessments

Programs reported the following recent policy improvements (exact quotes):

- Documents/tools to aid in consistency
- Created an assessment tool for financial exploitation called the FEIST
- Implemented a new NCCD Safety and Risk Assessment along with training funded by ACL Grant
- Revised Risk Assessment used to reflect actual areas which can be addressed
- Several counties piloting Older Adult Nest Egg (OANE) Tool
- Standardized mental status screening
- Use of the [State] Practice Model, which is a strengths-based practice of casework that focuses on locating and/or supporting resources that are currently in the adult's life

Client Decision-Making Assessment Tools

In the practice survey, several APS programs identified a common obstacle of a “lack of consistency” in determining client’s decision-making ability. Despite this concern, as shown in Exhibit 1 (above), only 27 programs use a tool to assist with determining client decision-making. Twenty-one programs indicate they use one tool, almost always to assist with capacity assessment. Only six programs indicated they use a tool to assist with

Exhibit 5 - Use of Tools to Determine Client Decision-Making

both types of assessments. Exhibit 5 shows the number of programs that use a tool for each type of decision-making assessment.

A wide variety of tools are used by APS staff to make an initial determination of cognitive capacity, of which the St. Louis University Mental Status Examination (SLUMS) is used the most.

The most frequently used tools are:

- SLUMS
- Interview for Decisional Abilities (IDA)
- Montreal Cognitive Assessment (MoCA)
- Mini Mental State Exam (MMSE)
- CLOX
- Mini-Cog

States may also have their own tools for capacity assessment. Like the emergency/safety assessment tool, the client capacity tools may be built into case management systems.

The evaluation report compared the percentage of clients found to be victims in programs that use capacity assessment tools and those that do not. There was not much difference in the percentage and the effect size was small. Programs that use a tool to assess legal competency have a lower percentage of clients found to be victims and the effect is moderate.

Disposition

As shown in Exhibit 1, only 22 APS programs use a formalized process or tool for determining case findings/dispositions. The survey responses indicated that instead of a tool, programs rely on caseworker training to interpret policy — found in law and policy manuals and sometimes built into case management systems — based on the standard of evidence used in the program. One program described a typical disposition determination process as follows: “The APS investigation is a formalized process used to make findings and recommendations.” Programs also rely on supervisor consultation and/or review and approval to ensure appropriate dispositions.

For programs that use a tool to determine disposition, the difference in percentage of clients found to be victims was small, as was the effect size.

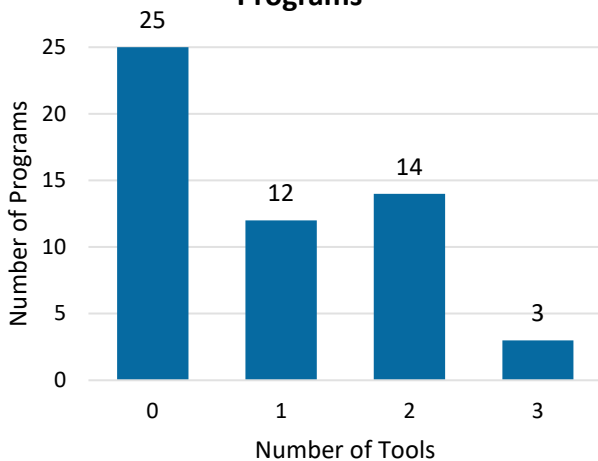
Post-investigation Services

Overall

For post-investigation services, the survey asked about tools in three areas: to determine if services are needed, to develop service plans, and to determine the frequency of service monitoring contacts. Exhibit 1 shows that 21 programs use tools for both determining if services are needed and developing service plans, with 10 programs using

them for both, and only seven programs use tools for determining the frequency of service monitoring contacts. Exhibit 6 shows that 25 programs do not use tools in any of these post-investigation functions and only three use tools for all three post-investigation functions. Exhibit 7 shows the number of programs that use each type of tool for services.

Exhibit 6 - Number of Service Delivery Tools Used by the Number of Programs



Need for Services

To decide if services are needed, only 21 programs (Exhibit 7) use a tool; most programs (43) indicated

that they rely on professional judgment, 27 indicated that APS staff consult with legal or other experts. Tools used to decide if services are needed are:

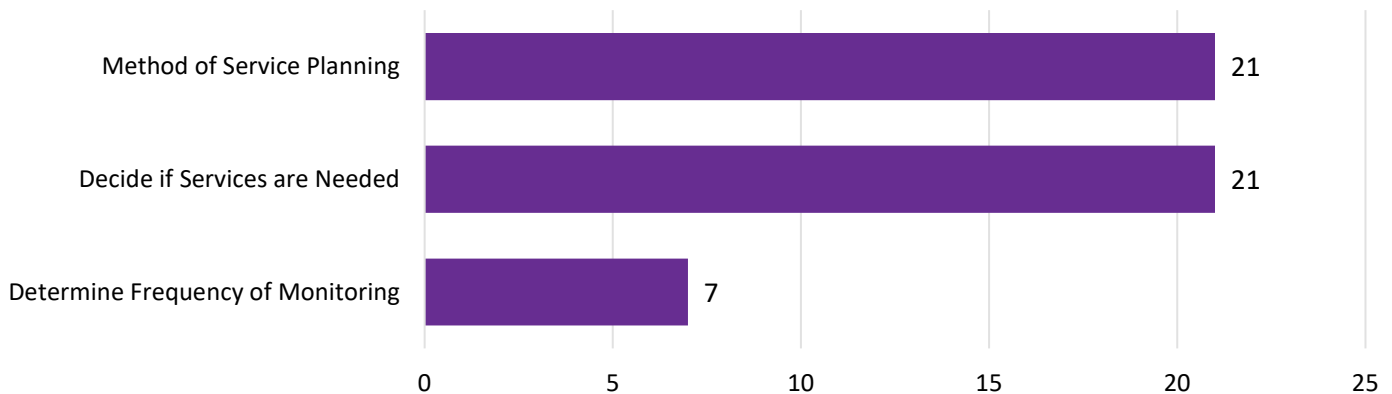
- DON-R
- Structured Decision-Making® tools including specifically the Strength and Needs Assessment
- ISO Matrix
- FEIST financial assessment
- Various state-specific tools

Developing Service Plans

Thirty-five programs develop formal (documented, written) services plans and 21 (Exhibit 9) use a specific service planning tool. The specific tool most frequently mentioned was state-specific case plans built into data systems.

A few programs cited the use of tools as a recent innovation.

Exhibit 7 - Use of Tools for Services



Conclusion

This brief highlights data from the National APS Process Evaluation regarding use of tools by APS programs. Drawing primarily from the practice survey, it provides data on how many programs use different types of tools across the different domains of APS investigations and summarizes information regarding the specific tools used. In addition, the data highlights the relationship between the use of tools and various system outcomes.

Tools are much more likely to be used in the beginning of the case (intake) than the end (determining service monitoring contacts). This suggests that priority is given to collecting consistent info at the start of the investigation in intake and assessing the client during the investigation compared to providing services at the end. That is, consistent investigations are more important and given greater attention than what happens after the investigation.

Despite the importance and complexity of determining client decision-making capacity, half of APS programs do not use tools to assist with this process.

The impact of tools on system outcomes is mixed. The qualitative comments in the survey indicate that APS programs see tools as an innovation to help improve practice.

Appendix A - Why Use a Tool?

Using a tool creates potential advantages to the APS client, APS staff, and the APS program overall in the following ways:

Tools ensure appropriate and comprehensive information is collected. If a program relies solely on computerized forms to collect information, and the information is not formally used for decision-making, then frontline staff have less incentive to collect all the information that is helpful, with the result that important information may be left out if it is not perceived as important.

Tools create consistency in decision-making. By using the same information, criteria, and rules built into a tool, frontline staff are more likely to make similar decisions in similar situations.

Tools create equity in decision-making. By creating consistency, tools help ensure that cultural or other biases do not impact individual casework decisions. This, of course, assumes that the tool itself does not contain any bias.

Tools create guidance and choice based on “objective” information: Typically, tools inform but do not make decisions. A tool will have a range of potential outcomes and will recommend which should be selected. The tool, therefore, makes sure that all the available choices are considered, often based on a numeric scale or score. Knowing this scale or score provides more objective feedback to inform decisions. Most tools provide an override feature if a caseworker does not agree with the recommendation.

Tools create protection for frontline staff and the program. Finally, consistent and appropriate use of a tool creates some degree of protection for caseworkers and the program overall from charges of inappropriate (for whatever reason) decisions.

In summary, ideally a tool applies research-based expertise to ensure appropriate information is used to make consistent decisions, offsetting caseworker gaps in knowledge or training, workload stress, or biases. The ACL APS Research Agenda also described the reason to use tools.

ACL APS Research Agenda

Section 8 – Tools (for Screening, Assessment, and Decision-Making)

“Decisions that occur at several points in the APS service process require thorough information, precise evaluation, and clear decision-making criteria to ensure alleged victims are protected as well as to promote safety after APS case closure. Systematic assessments are most critical at the time of intake, when screening for abuse is done and decisions to open and triage a case are made; at the time of the initial evaluation of safety of the alleged victim, as well as subsequent safety checks; and at the conclusion of the investigation to evaluate allegation validity and close the investigation. APS programs that provide or arrange for services post-investigation additionally make critical assessment-based decisions to shape service plans and, later, to determine eligibility for case closure.

“While APS values the expertise and ‘clinical judgment’ of APS workers, APS programs typically provide structures and tools for collecting and evaluating information and making decisions at these critical points in the APS process. This facilitates optimal decisions in an environment of high caseloads and increasingly complex case management. Quality data collected from and about these assessment and decision-making points have become critical to measuring APS outcomes, improving APS, and demonstrating effectiveness to policymakers.”

- Administration for Community Living. (2020). [Building the Evidence Base for Adult Protective Services](#).

Appendix B – APS Practice Survey Questions Involving Tools

Intake

Does the state or territory mandate use of a common intake tool or checklist for all offices receiving reports?

- Yes
- No

If yes, please provide the name of the intake tool and a brief description.

Investigation

Which of the following methods do APS investigative staff use to assess the emergency and/or immediate safety needs of clients? If applicable, please provide the name and a brief description of the emergency/safety assessment tool or general assessment tool.

- Professional judgment
- A specialized emergency/safety assessment tool
- A general assessment tool, not specific to emergency/safety
- Other

Across the state or territory, indicate how APS investigation staff are trained or equipped to assess the client's health and well-being in areas such as informal support systems, formal support systems, financial status, and environmental conditions. (If "Use of assessment tool" is selected): Please provide the name and brief description of the assessment tool(s):

- Only general social work training
- Only specific APS training
- Use of an assessment tool
- Other

If the APS investigative staff believes the client may have a reduced cognitive capacity, how do they conduct an initial screening of cognitive capacity? If a specific assessment tool/process for assessing cognitive capacity is used across the state or territory, please provide the name and a brief description:

- As part of general assessment of well-being only
- Use an assessment tool/process specific for assessing cognitive capacity

If the initial assessment of the client indicates reduced cognitive capacity and legal intervention is sought, which of the following resources does the APS program use to inform the court's determination of the legal competency of the client?

- APS does not help assess competency.
- APS has licensed professionals on staff to help assess competency.
- APS has contracts with licensed professionals to help assess competency.
- APS reaches out to non-contract community professionals to help assess competency.
- APS staff rely only on a tool to assess competency.

Across the state or territory, does APS have a formalized practice, process, or tool for determining findings of an investigation?

- Yes
- No

If yes, provide the name and describe the formalized practice, process, or tool:

Post-investigation Services

How do APS staff decide whether services are needed to address the abuse, neglect (including self-neglect), or exploitation?

- APS staff use only professional judgment to determine whether services are needed.
- APS staff use a tool that determines whether services are needed.
- APS staff use specific criteria to determine whether services are needed.
- APS staff consult with legal or other experts.
- Other (please specify below)

Which of the following methods does APS use to develop service plans?

- Develop formal (e.g., documented, written) service plans.
- Use a specific service planning tool.
- Name of tool:
- Use input from the client to help identify the appropriate interventions.
- Use input from family members/caregivers to help identify appropriate interventions.
- Use a structured approach to consider the client's concepts of safety and good outcomes.
- Use a structured approach for the client to help identify the factors that influence intervention risk and needs.
- The client formally agrees to the plan by signing it or by other means.

How do APS staff determine the frequency/amount of contacts for monitoring post-investigation service provision and status of clients?

- The number of contacts is based only on professional judgment.
- All clients receive the same number of contacts.
- The number of contacts is based on an assessment tool.

Appendix C – Examples of How States Described Their Use of Tools in NAMRS

Example State A

Included in the web-based APS Case Management System are core forms. Below are explanations of these forms:

- ANE Intake Form – form used by APS intake workers for receipt of a report of suspected or alleged abuse, neglect, or exploitation of an eligible adult.
- Client Status Form – Tool used by APS caseworkers as a summary of relevant case information collected in one place. Includes such information as client personal information, involved agencies/professionals, client living arrangements and relationships, client medical history and barriers, and client income and banking information.
- Overall Initial Risk Assessment – Tool used by APS caseworkers to list factors/variables on which the risk assessment could be based, ensure uniform/systematic method of assessing risk, brief assessment tool to evaluate the person and their environment, increase accuracy of all decisions revolving around risk assessment, make decisions based on facts rather than feelings, and provide caseworkers and supervisors a means for pertinent case information to share with other staff who assist in evaluation of the client’s needs.
- Client Assessment Form – Tool used by APS caseworkers after completion of the assessment process to indicate a decision about the abuse, neglect, financial exploitation, or self-neglect that was reported or suspected during the assessment. Includes such information as substantiation decision, indicators of abuse/neglect/exploitation/self-neglect, refuting/supporting facts of the allegations, and abuser information.
- Overall Substantiated Risk Assessment – Tool used by APS caseworkers in ongoing evaluation process in which observations and evidence are analyzed to determine extent to which the client is in danger or at risk of harm, injury, or loss. Considers client’s functional abilities, emotional status/mental functioning/depression, environment, substance abuse/other endangering behaviors, income/financial resources, formal/informal support services, and abuse factors.
- Case Plan – Tool used by APS caseworkers for the duration of the case to document goals and interventions developed. The Case Plan is based on needs identified through the comprehensive risk assessment.
- Overall Risk Assessment Update – Tool used by APS caseworkers in an ongoing evaluation process in which observations and evidence are analyzed to determine extent to which the client is in danger or at risk of harm, injury, or loss. Used to compare the most recent risk assessment to previous assessments to determine patterns or trends and needed revisions to the Case Plan. Reflects progress in the case, changed circumstances, and newly identified problems and/or needs.
- Preparation for the Assessment/Case Recording Form – Tool used by APS caseworkers as a prompt to use while preparing for the assessment. Includes such information as any previous reports, assigned

caseworker, managed care organization client, and community care program client. The Case Recording section is used to provide a chronological record of all activity associated with the assessment, casework, follow-up, and case closure completed by the caseworker.

Example State 2

An in-house Assessment has 11 elements where the client's situation is given a score of Crisis (4), Vulnerable (3), Stable (2), Thriving (1), or Not Applicable (0). Each investigation requires a Pre-Assessment to indicate the client's situation before APS involvement. A Post-Assessment is conducted if the client requires ongoing services. If the case is to be closed, it is called a Closure Assessment. This assessment will provide a contrast (numerical value) to the Pre-Assessment and show the client's improvement or regression. If the case does go to ongoing services, counselors are required to complete a Periodic Assessment no less than every six months that the case remains open. A final Closure Assessment is conducted when the case is submitted for closure.