

REPORT TO THE GOVERNOR  
FROM THE GOVERNOR'S ADVISORY COUNCIL ON AGING  
REGARDING ADULT PROTECTIVE SERVICES

FINDINGS

There Is a Large Disproportionate Increase in the Number of Protective Services Reports. Between SFY 2008-09 and SFY 2016-17, the population of North Carolinians over age 18 increased by 11%. During that same time, the number of reports to county adult protective service (APS) agencies increased by 79% to 27,483.

Funding for APS Appears to Be Decreasing. Funding for APS comes from state dollars (3%), the federal government (18%) and from the counties (79%). Prior to State Fiscal Year 2013-14 (SFY 13-14), state dollars accounted for a significant part of funding for APS. In that year, the state began using federal funding to supplant state dollars. Since then, state dollars have accounted for about 3% of total APS funding.

Federal dollars for APS come to North Carolina in the form of the Social Services Block Grant (SSBG). Some of that goes to the State Division of Aging and Adult Services (DAAS) for distribution to some of the counties. This DAAS funding has not increased in several years. In inflation-adjusted dollars, this represents a decrease. The percentage of decrease depends on which price index is used. The larger amount for APS from the federal SSBG goes to the State Division of Social Services (DSS), also for distribution to the counties.

In SFY 17-18, there was a significant increase in total funding for APS. This increase was primarily due to an increase in spending by counties of county dollars for APS, but also due to a re-allocation of funds during the year from other adult services purposes funded by SSBG. For the current fiscal year, \$21,682,289 is budgeted for total APS spending, compared to last year's actual spending of \$26,215,341. While the budget will likely be adjusted so that the actual spending this year will rise above the current budget figure of \$21,682,289, there will surely be a decrease from the \$26,215,341 spent last year and perhaps even below the lower total amount spent the year before that. This is because a decrease this year in overall SSBG funding for adult services as a whole makes it harder to re-allocate from other types of adult services to APS and because it is not sustainable for counties to keep increasing the spending of their dollars.

Large Rising Caseloads Are a Result. As a result of this tremendous increase in need (almost double over ten years) and overall decrease in state-federal funding over the years, county APS workers are stretched very thin. Caseload recommendations for APS services vary, but a 2011 workgroup of APS professionals in North Carolina pegged it conservatively at 15. Although the actual caseload numbers in North Carolina cannot be accurately ascertained at this point because the available data is not reliable, the average

caseload seems to be much higher than 15 and getting worse. For example, as of February 2018, the caseload in Johnston County was 37.

Counties Are Squeezed by Underfunded Mandate. During SFY 2011-2, \$2 million in state funding for county adult protective services was eliminated and replaced with a combination of federal SSBG funds and a 25% required county match. In other words, there was a 25% cut in funding going to counties for APS. The limited state dollars that are still being used for APS have been spent for purposes other than distribution to counties to help them provide this service. At the same time, the overall trend is for a decreasing federal share. Moreover, as described above, actual federal dollars for APS will be down significantly this year. County funds pay for about 4/5 the cost of APS. Because counties are required by state law to provide adult protective services and each county provides most of its APS funding, the significant increase in need without a commensurate increase in federal and state funding amounts to an increasingly underfunded mandate on the counties. Counties respond in two ways: (1) increasing their contributions of funding as described above, and (2) diluting APS services.

County Funding for APS Has Increased, a Challenge for Low-Wealth Counties. From SFY 2016-17 to SFY 17-18), overall county funding for APS increased \$2,245,524. This represents an increase to 79% for the counties' share of total spending on APS in North Carolina. This is particularly hard on low-wealth rural counties. Because the need for protective services correlates somewhat with lack of access to resources for individuals and families, the need for protective services is likely higher in low-wealth counties, so they must spend more of their limited county-generated dollars for this mandated service. Thus, the ten poorest counties in the state spend \$2.38\* per capita of their own money on APS compared to the state average of \$2.08\* (SFY 2017-18). The amount of per capita spending varies significantly from county to county. This may be due in part to how the funds are allocated. The limit for each county's percentage of total allocation of SSBG funding from the DSS for APS was set by a formula developed over 11 years ago. No one still working at DSS knows the basis for the formula, only the percentage result for each county. What is known is that the formula for funding from the DSS to the counties does not take into account the receipt of separate APS funds to the counties from DAAS. Fifty-two out of the 100 counties receive such DAAS funds.

Inadequate Funding Leads to Insufficient Time with Clients. APS workers should have caseloads that allow time for sustained attention and intervention. Moreover, APS workers tell us that the cases they confront in 2018 are much more complex than in the past. Complex cases require more time to understand the physical, mental, social and financial dimensions of the situation. Yet, as described above, the lack of funding leads to increasingly high caseloads. These high caseloads prevent APS workers from spending the time needed with each client. This leads to less adequate remedies and less protection for vulnerable North Carolinians.

Inadequate Funding and Absence of Training Requirements Lead also to Lack of Training for APS Staff. Lack of funding leads also to a lack of training for APS staff to ensure that they know what constitutes a valid protective services case, what and how to assess when they visit a person in the person's home and how to respond. Unlike for child protective service professionals, the state has established no requirements for the education, training, continuing education or experience of the APS staff charged

with evaluating, investigating and protecting its most vulnerable adults. Thus, there is no required training in interviewing, investigation, physical and sexual abuse, medical aspects, medical records, legal aspects, etc. The fact that some of the APS workers carry the title of social worker is no assurance. State law allows county employees to be called social workers even though they might have no social work degree or training. The most recent (SFY 2015-16) data available to us from the state Division of Aging and Adult Services (DAAS) shows wide variation in the percentage of reported cases screened in, ranging from 9% (Avery County) to 96% (Duplin County). This suggests very different understandings about what types of cases should be screened in for protective services evaluation, planning and case management. Such different understandings indicate a likely training issue. Moreover, some counties report data showing dramatic swings in reports from one year to the next. For example, between SFY 2015-16 and SFY 2016-17, the number of APS reports from Rockingham County decreased from 390 to 246, while the number from Moore County increased from 226 to 368. These changes likely reflect inadequate staff training, and could also reflect staff turnover and lack of service options.

Inadequate Funding Limits Service Options. Lack of funding also limits the types of services that APS workers can arrange for clients other than placement in facilities. More options such as transportation for medical appointments and grocery shopping, help with cooking and taking medications, personal care services attendants and monitored apartments (instead of only assisted living facilities) are needed to assist people to age in place without getting into a position where they seem to be neglecting themselves. It is also difficult to access mental health services for those in need of protective services.

Inadequate Funding Leads to Low Compensation for APS Staff. APS staff receive significantly less pay than Child Protective Services staff doing comparable work. This reflects poorly on how we value vulnerable adults and likely affects staff turnover and therefore, the quality of services.

The Public Lacks Information about Protective Services. Most North Carolinians lack information about the nature and scope of the abuse, neglect and exploitation of vulnerable adults and of the legal obligation of every person to report it.

#### REMAINING QUESTIONS

Unfortunately, there are significant gaps in the available information. As a result, we were unable to answer the following questions:

What are the outcomes, stated in specific behavioral terms, that we seek for the victims?

What are the outcomes that we have achieved?

For the large number of cases where mistreatment was confirmed, but services were not provided, what were the numbers for the following explanations: (1) services were never needed, (2) services are no longer needed, (3) person needs services, but is competent and refuses services, and (4) other?

In the judgment of the APS investigators, for those instances where caretaker neglect was confirmed, for how many could the situation be adequately ameliorated by providing training or respite for the caretaker?

For those persons where abuse, neglect or exploitation was confirmed and services were provided, what types of services are being provided and how does this vary across the state?

For those persons where abuse, neglect or exploitation was confirmed, what types of services, including mental health services, were needed, but not provided?

For each county and for the state as a whole:

- (a) What are the correct numbers of FTE staff devoted to APS?
- (b) What are the caseloads of staff?
- (c) What is the ratio of APS workers to APS supervisors?

What are the generally accepted standards for the education, training, continuing education and experience for APS professionals?

What is the percentage of current APS staff who meet those standards?

What are the options for improving the education and training for APS workers, especially in counties where there may be few, if any, credentialed people to take these positions?

What is the rate of APS staff turnover?

With regard to APS staff turnover and the relatively low pay received by APS staff:

- (a) What are the average salary, lowest salary and highest salary of APS workers?
- (b) What is the percentage of current APS staff who hope to move out of APS within three years?
- (c) Of those who hope to move out of APS within three years, for what percentage is compensation a driving consideration?

The information needed to answer these questions is not available because it is not being collected (for most of the questions) or the collected data is unreliable (for a few of the questions, e.g., staffing numbers).

## CONCLUSIONS

We conclude that the state of North Carolina is not adequately funding its system of protecting its most vulnerable citizens from abuse, neglect and exploitation. Every year we fall further behind in fulfilling our moral obligation. As a result, services are diluted by impossible caseloads, inadequate staff training, inadequate service options for meeting client needs, other related factors, increasing the burden on counties, with particularly severe strain in low wealth counties.

At some point there will be an instance of abuse, neglect or exploitation of a vulnerable adult that captures the attention of the public and government in a way that similar tragedies in the past have not. There will

be a hue and cry, and properly so, similar to what happened recently in the realm of child protective services. Perhaps something more will be done then. In the meantime, much needless suffering by additional victims will occur.

It does not have to be that way. We can all do a better job or raising this issue up. We can collect the data. We can share it more meaningfully with our legislators. In short, we can make the case and make the change.

## RECOMMENDATIONS

Based on the findings, questions and conclusions above, we make the following recommendations:

**Collect the Data.\*\*** The Department of Health and Human Services should require and ensure the collection of reliable information to answer the questions posed above, including questions regarding staff compensation and retention.

**Require Training.\*\*** The Department should require sufficient pre-service and continuing training for all county APS staff.

**Establish and Promulgate Best Practice Standards.** The Department should establish best practice standards for APS. The best practice standards should address the nature, quality and extent of required staff training, caseloads\*\*, supervisor ratios, remedial service options for clients, etc. Because these standards cannot be met in many cases now because of a lack of funding, these standards will be considered aspirational in the short term. Once promulgated, each county should develop a plan for reaching best practice status. Each county's plan will describe and justify any additional funding that is needed to reach best practice. The legislature will then have a better basis for considering funding requests. Once adequate funding is assured, these best practice standards could be mandated. The current practice of establishing minimal performance measures to reflect merely what current funding allows gives the false impression of system adequacy. It provides no impetus for system improvement or adequacy.

**Raise Public Awareness.\*\*** The state should expand its public information effort about the nature and scope of abuse, neglect and exploitation of vulnerable adults and the legal obligation to report it. This effort should include television and radio public service announcements, billboards, the use of social media and more.

**Fund Reforms with State Revenues.\*\*** To avoid further squeezing low-wealth counties or diverting limited federal funds from other underfunded programs essential to older North Carolinians, these reforms should be funded through the appropriation of additional state revenues.

**Develop a Comprehensive Funding Formula.** The state should develop a formula for funding county APS that fairly accounts for all relevant factors, including funding that currently comes through DAAS. All APS funding should be allocated and disbursed by one Division, not two. If that one division is DSS, DAAS would still have an important role to play in supporting, monitoring and enforcement with regard to APS.

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\*Per capita figures are calculated based on population data from the North Carolina State Office of Budget and Management. Some of the population data has not yet been finalized and certified as official.

\*\*The recommendations with a double asterisk are the same as or very similar to recommendations contained in the Adult Protective Services Task Force Report Pursuant to Session Law 2005-23.