



STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

RICK SNYDER
GOVERNOR

NICK LYON
DIRECTOR

June 1, 2015

Jeffrey Bankowski, Director
Office of Internal Audit Services
Office of the State Budget
George W. Romney Building
111 South Capitol, 6th Floor
Lansing, Michigan 48913

Dear Mr. Bankowski:

In accordance with the State of Michigan, Financial Management Guide, Part VII, the Department of Health and Human Services is enclosing a summary table identifying the department's responses and the corrective action plans to address findings identified in the Office of the Auditor General's Performance Audit of the Adult Protective Services Program.

If you have questions, please contact me at 517-373-4659 or hornj@michigan.gov.

Sincerely,

Signature Redacted

Julie Horn Alexander, Director
Office of Quality Assurance and Internal Control

c: Executive Office
Office of the Auditor General
House Fiscal Agency
Senate Fiscal Agency
House and Senate Appropriation Sub-Committees
House and Senate Standing Committees



Adult Protective Services Performance Audit
Audit Period: 10/01/2011 – 09/30/2014

1. Findings Agreed With – Corrective Action Implemented

4.

2. Findings Agreed With – Corrective Action Will Be Implemented

1, 2, 5, 7, 8

3. Findings Agreed with In Part – Corrective Action Implemented

None.

4. Findings Agreed with In Part – Corrective Action Will Be Implemented

3, 6 *See NOTE below.

5. Findings Agreed with In Part – No Corrective Action Will be Implemented

None.

6. Findings Disagreed With – No Corrective Action Will be Implemented

None.

*NOTE: MDHHS disagreed with the conclusions reached by the auditors regarding certain cases cited in the findings.



Finding 1: Evaluation of APS Intervention Services [material condition]

MDHHS had not fully developed and implemented a process to evaluate the effectiveness of APS intervention services. MDHHS limited its ability to identify weaknesses or gaps in the APS intervention services it provided and improve existing intervention services to better protect vulnerable adults.

A sound evaluation process should include performance indicators for measuring program inputs, outputs, and outcomes; performance standards or goals describing the desired level of performance; a data collection system to accurately gather performance data for assessment; a comparison of actual achieved outcomes related to the services and resources provided to vulnerable adults for a consistent period of time; a reporting of the comparison results to management; an analysis of the performance gaps that exist between the actual and desired performance; and proposals of modifications to improve program effectiveness. MDHHS could consider an evaluation and comparison of substantiated allegations, progress in achieving goals identified in the APS services provided to repeat APS investigation cases.

The review disclosed:

- a. MDHHS had not identified and established outcomes and performance measures for its APS intervention services. MDHHS could not evaluate and compare to the extent of which APS intervention services reduced the severity and rate of occurrence of neglect, abuse, and/or exploitation of vulnerable adults.
- b. MDHHS had not fully developed its APS risk assessment process. MDHHS was unable to utilize the results of its APS risk assessment process to evaluate the impact of its APS intervention services.

Response

MDHHS agrees with the finding.

MDHHS Status 03-12-2015

MDHHS corrective action implementation is in process.

MDHHS has established APS outcome and performance measures for standards of promptness and face-to-face contacts to ensure vulnerable adults are protected. However, OAS needs to develop outcome and performance measures for APS intervention services so it can determine the effectiveness of services and identify gaps or weaknesses in the services provided. After the outcome and performance measures are developed, a process to evaluate intervention services can be developed. OAS hopes to incorporate these into an automated system to capture the data so gaps and weaknesses can be identified and evaluated for program improvements. The planned implementation date for automation is not known at this time.

Planned Implementation Date

October 1, 2015

Responsible Administration(s)

Field Operations
Aging and Adult Services Administration

Responsible Individual(s), Name(s), Title(s)

Terry Beurer, Director, Field Operations Administration
Kari Sederburg, Director, Aging and Adult Services Administration
Business Service Center Directors
Cynthia Farrell, Program Manager, Adult Services



Finding 2: Review of Closed Investigation Cases [material condition]

APS supervisors did not review all closed APS investigation cases. APS Manual Section 205 requires APS supervisors to review all closed APS investigation cases. MDHHS management's goal is for APS supervisors to review all closed APS investigation cases within 30 days from the date of closure.

MDHHS did not ensure that APS supervisors conducted reviews of closed APS investigation cases that effectively detected unaddressed allegations, incomplete APS client service plans, and missed monthly, face-to-face contacts with APS clients. APS supervisors are required to review each closed APS investigation case to ensure that APS caseworkers addressed all allegations stated in the referral or identified in the investigation, completed service plans, and maintained monthly face-to-face contact with the client.

Response

MDHHS agrees with the finding.

MDHHS Status 03-12-2015

MDHHS corrective action implementation is in process.

MDHHS issued FOA Memo 2014-20, Case Reading of APS Closed Cases, to highlight the requirement that supervisors must complete a case read of all closed cases and includes expectations for APS staff.

Changes have been made to the APS Case Reading Report (MDHHS-4479) to capture additional information. The APS Case Reading Report includes areas for the supervisor to indicate the case was reviewed for monthly face-to-face contacts, that all allegations of harm were addressed, required referrals to law enforcement were made, risk assessments were completed and updated, services were provided, verified, and documented in ASCAP, if services were offered and refused, and if legal (court) intervention occurred. The APS Case Reading Report (MDHHS-4479) will continue to evolve as policy changes are made so relevant information is captured and documented.

The APS Case Reading Report (MDHHS-4479) is a paper document which makes it difficult to monitor the local office activity by OAS. OAS has looked at the case read system used by the Children's Services Administration. MDHHS must meet with DTMB to see what modifications will be needed so the system to meets the APS case read needs.

Planned Implementation Date:

An implementation date will be determined after meeting with DTMB.

Responsible Administration(s)

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Finding 3: Denied or Withdrawn Referrals

MDHHS occasionally denied or withdrew referrals of adult abuse, neglect, and/or exploitation when justification to warrant assignment for an investigation existed.

APS did not consistently notify law enforcement when a referral indicated potential criminal activity.

APS Manual Section 205 states that the APS complaint coordinator must review the referral information and determine if there is sufficient justification to warrant assignment for an APS investigation. Sufficient justification to warrant assignment for an APS investigation must include a reasonable belief that the subject of the referral was harmed or is at risk of harm from abuse, neglect, and/or exploitation or is vulnerable and in need of protective services. APS requires the complaint coordinator to fully document the reasons for not assigning a referral for an APS investigation.

APS Manual Section 210 states that the APS caseworker must involve law enforcement agencies immediately in referrals involving suspected criminality, e.g., spouse abuse/domestic violence, other physical abuse, financial exploitation, and/or intentional neglect. APS caseworkers must first confer with their APS complaint coordinator and a law enforcement agency to determine if the referral is appropriate and if APS services are still needed. If APS services are not needed, documentation must reflect why there was no follow-up on the referral beyond initial inquiries and notification to a law enforcement agency.

Response

MDHHS agrees with the finding in part. MDHHS disagreed with the conclusions reached by the auditors regarding certain cases cited in the finding.

MDHHS Status 03-12-2015

MDHHS corrective action implementation is in process.

FOA Memo 2014-21, Referral Assignment Decisions and Referrals to Law Enforcement, was issued on June 2, 2014. The memo cited statutory requirements and included a job aid to assist in reviewing APS referrals for the need to assign for investigation and asks if there is suspected criminal activity and if it has been referred to law enforcement. The expectation is that supervisors will use the job aid for assignment decisions.

Effective August 1, 2014, Centralized Intake began making the APS referral decision to assign or deny. The decision information is entered in ASCAP general narrative to allow the local office to review how the decision was made to assign or deny a referral.

OAS will develop a procedure to pull a random sample of all denied cases and review to ensure the case decision to deny or withdraw was appropriate and if suspected criminal activity is reported to law enforcement.

Planned Implementation Date:

October 1, 2015

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Finding 4: Investigation Standards of Promptness [material condition]

MDHHS local offices did not begin and conduct APS investigations in accordance with standards of promptness established by the *Michigan Compiled Laws* and MDHHS policies.

MCL Section 400.11b requires that MDHHS local offices begin an APS investigation within 24 hours after receiving a referral to determine whether the person believed to be abused, neglected, and/or exploited is an adult in need of protective services. APS Manual Section 205 requires that one contact be made within 24 hours by phone or in-person with either the adult or a collateral contact for all cases assigned for an APS investigation. In addition, the Manual requires the APS caseworker to conduct a face-to-face interview with the adult within 72 hours from the time the referral was received by means of a personal visit in the adult's dwelling, the worker's office, or any other suitable setting.

Response:

MDHHS agrees with the finding.

MDHHS Status 03-12-2015

MDHHS has fully implemented corrective action.

FOA Memo 2014-22, APS Standards of Promptness, was issued on June 2, 2014. The memo highlights the standard of promptness requirements included in policy and law, and the expectation that staff will meet all APS standards of promptness as required.

All APS staff completed mandatory training by September 30, 2014. The APS core training includes investigation standards of promptness.

Monthly case activity reports are generated and monitored by MDHHS management for standard of promptness compliance. The AS-010 report provides data for 24-hour, 72-hour, and 30-day standards of promptness. The AS-020 report provides data for face-to-face contacts. The Adult Services Management Report includes the data from the AS-010 and AS-020 reports and is rolled up to show statewide percentages of compliance. In addition, the report includes a graph showing statewide compliance trends. The Adult Services Management Report is distributed to FOA management to monitor compliance.

Planned Implementation Date:

Corrective action was fully implemented by October 1, 2014.

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Finding 5: Monthly Face-to-Face Contacts [material condition]

APS caseworkers did not conduct monthly, face-to-face contacts with APS clients with open APS investigations, as required. APS Policy 205 requires a minimum of one face-to-face contact with an APS client each month the investigation is open. The policy also requires an APS supervisor to approve all open investigations that need to remain open for more than six months.

Response:

MDHHS agrees with the finding.

MDHHS Status 03-12-2015

MDHHS corrective action implementation is in process.

Face-to-Face Contacts

MDHHS made face-to-face contacts in April 2014 for the cases deficiencies identified in the audit. The well-being checks found the clients to be living in a safe and secure environment.

FOA Memo 2014-23, Monthly Face-to-Face contacts, was issued on June 2, 2014. The memo highlighted the requirements for monthly-face-to-face contacts and the expectation is that APS staff will conduct monthly face-to-face contacts.

All APS staff completed mandatory training by September 30, 2014. Core training includes monthly face-to-face requirements.

The monthly AS-020 report provides data at the county level showing the number of open APS investigations, how many face-to-face contacts were made, and the percentage of compliance with the face-to-face contacts. The AS-020 report is monitored by MDHHS management.

Investigations Open More than Six Months

APS supervisory approvals for cases open longer than six months are documented in the narrative portion of ASCAP. In addition, APS supervisors document approvals on the Case Reading Report (MDHHS-4479).

The APS Case Reading Report (MDHHS-4479) is a paper document which makes it difficult to monitor the local office activity by OAS. OAS has looked at the case read system used by the Children's Services Administration. MDHHS must meet with DTMB to see what modifications will be needed so the system to meets the APS case read needs. An implementation date will be determined after meeting with DTMB.

Planned Implementation Date:

An implementation date will be determined after meeting with DTMB.

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Finding 6: Investigation of Allegations [material condition]

MDHHS did not investigate all allegations identified in referrals assigned for an APS investigation. As a result, MDHHS closed investigations that had unaddressed allegations of abuse, neglect, and/or exploitation and may have left adults vulnerable to continued alleged abuse, neglect, and/or exploitation.

APS Manual 205 states that referrals are assigned when there is reasonable belief that the subject of the reported referral is an adult at risk of harm from abuse, neglect, or exploitation or if there is reasonable belief that the person is vulnerable and in need of protective services. In addition, the Manual states that all alleged harm identified in the referral or discovered during the investigation must be addressed in the service plan. The manual further requires APS supervisors to review all case closures after the APS worker has completed the closing to ensure that the worker addressed all allegations.

Response:

MDHHS agrees with the finding in part. MDHHS disagrees with the conclusions reached by the auditors regarding certain cases.

MDHHS Status 03-12-2015

MDHHS corrective action implementation is in process.

FOA Memo 2014-24, APS Investigations of All Harm Allegations, was issued on June 2, 2014. The memo highlights the importance to investigate and need to address all harm allegations and expectations of the APS worker.

The APS Case Reading Report (MDHHS-4479) has been updated so the supervisor confirms all allegations of harm were addressed in the case record as part of the supervisor case review.

The APS Case Reading Report (MDHHS-4479) is a paper document which makes it difficult to monitor the local office activity by OAS. OAS has looked at the case read system used by the Children's Services Administration. MDHHS must meet with DTMB to see what modifications will be needed so the system to meets the APS case read needs.

Planned Implementation Date:

An implementation date will be determined after meeting with DTMB.

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Finding 7: Continuing Education Training

MDHHS had not instituted annual continuing education training requirements for APS caseworkers and supervisors. Without continuing education requirements, MDHHS could limit its assurance that APS caseworkers and supervisors maintain the skills necessary to effectively perform APS duties and protect vulnerable adults.

MDHHS Response

MDHHS agrees with the finding.

MDHHS Status 03-12-2015

MDHHS corrective action implementation is in process.

OAS reviewed classes available from the National Adult Protective Services. Some classes are free while others have a fee. CPS trainings were reviewed and it was determined that three were relevant for APS staff.

OAS must establish continuing education hours it will require APS staff to complete each year, how continuing education records will be maintained, and develop a monitoring process to evaluate APS staff compliance.

Planned Implementation Date

October 1, 2015

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Finding 8: APS Client Service Plans

APS caseworkers did not consistently complete APS client service plans.

APS caseworkers did not consistently complete APS client service plans within the required time frames.

APS Manual Section 205 requires the APS worker to address in the service plan all alleged harm identified in the referral or discovered during the investigation. The Manual also requires the APS worker to complete a service plan within 30 calendar days of the referral date for all substantiated cases and unsubstantiated cases for which ongoing services are being or will be provided. The service plan must include the plan of action that the worker will take to remedy the problems identified during the investigation. The plan of action will show how the plan will be accomplished, time frames, and any resources provided to the client.

In addition, the Manual requires that, once the initial service plan is completed, the worker must sign and date the form and request the client or the responsible party to sign and date the form. The signature date on the service plan provides supporting documentation that the initial service plan was in place on that date. If the client is unable to sign the service plan because of physical or cognitive limitations or is unwilling to sign, the APS worker must then obtain his/her supervisor's signature and date reflecting that the initial service plan has been completed. Furthermore, the Manual requires that an updated service plan be completed on a quarterly basis or whenever there are significant developments that affect the service plan, whichever occurs first. The updated service plan provides evidence of the progress achieved toward resolving each allegation.

MDHHS Response

MDHHS agrees with the finding.

MDHHS Status 03-12-2015

MDHHS corrective action implementation is in process.

FOA Memo 2014-25, APS Client Service Plan Requirements, was issued on June 2, 2014. The memo emphasizes the importance of and the requirement for completing APS client service plans and the expectations of the APS worker.

MDHHS developed the AS-010 report which captures 24-hour, 72-hour and the 30-day service plan standards of promptness for each county. The Adult Services Management Report includes the data from the AS-010 report and is rolled up to show statewide percentages of compliance. In addition, the report includes a graph showing statewide compliance trends. The Adult Services Management Report is distributed to FOA management to monitor compliance.

The APS Case Reading Report (MDHHS-4479) has been updated so the supervisor confirms that the 30-day service plan was completed and within the required time frame as part of the supervisor case review.

The APS Case Reading Report (MDHHS-4479) is a paper document which makes it difficult to monitor the local office activity by OAS. OAS has looked at the case read system used by the Children's Services Administration. MDHHS must meet with DTMB to see what modifications will be needed so the system to meets the APS case read needs.

Planned Implementation Date

An implementation date will be determined after meeting with DTMB.



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