

MALTREATMENT OF VULNERABLE ADULTS: APS ROLE & RESPONSIBILITIES

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Why should I care about adult abuse?

**1 in 10
community
residing
adults**

**More than 5
million
older
adults**

**1 out of 23
&
1 out of 44
reported**

Incidence & Prevalence of Adult Abuse in Oklahoma



**31, 654 referrals
in Oklahoma**



**Adult Protective
Services**

**Long-Term Care
Investigations
(LTCI)**

**Community Adult
Protective Services
(CAPS)**

APS Program Basics

APS referral =
allegation of

- Vulnerable adult
- +
• Situation of maltreatment



APS Clients

Vulnerable Adults

- Age 18+ AND
- Incapacitated
OR
- Substantially Impaired



Assessing Substantial Impairment

Can the Alleged Victim:

- provide for self care or custody
 - manage property and financial affairs
 - meet essential requirements for mental or physical health or safety or
 - protect self from maltreatment without assistance
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Examples of Substantial Impairment

An individual who:

- requires supervision
- needs assistance with taking their medications
- requires assistance with ADLs (bathing, grooming, dressing, transferring, toileting) or IADLs (handling finances, preparing meals, driving or arranging transportation, using the phone, shopping)

Types of Maltreatment

- Abuse
- Neglect
- Self-Neglect
- Caretaker Financial Exploitation
- Non-Caretaker Financial Exploitation
- Financial Neglect
- Abandonment
- Sexual Abuse
- Verbal Abuse
- Personal Degradation

Polyvictimization



Multiple co-occurring or sequential types of abuse by one or more perpetrators

What is a Caretaker? (Title 43A Section 10-103 A 6)

A person who has:

- a.** the responsibility for the care of a vulnerable adult or the financial management of the resources of the vulnerable adult as a result of a family relationship,
- b.** assumed the responsibility for the care of the vulnerable adult voluntarily, by contract, or as a result of the ties of friendship, or
- c.** been appointed a guardian, limited guardian, or conservator pursuant to the Oklahoma Guardianship Act

Examples of Caretaker

An individual who:

- **sets up the client's medication or assists with medications**
- **assists client with bathing or dressing**
- **prepares client's meals**
- **does the housekeeping or other household chores**
- **provides transportation on a regular basis**
- **handles client's finances**
- **assists client with paying bills**





Possible Warning Signs: Physical Abuse

- **Unexplained or untreated injury or illness**
 - **Bruises, especially layered**
 - **Malnutrition, weight loss, dehydration**
 - **Abrasions, cuts, lacerations**
 - **Burns, especially patterned**
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Possible Warning Signs: Sexual Abuse

- Genital injuries
- Human bite marks
- Imprint injuries
- Bruising on thighs, buttocks, or breasts
- Frequent unexplained physical illness or complaints
- Genital or urinary tract irritation, injury, infection, or scarring
- Sexually transmitted diseases*
- Pregnancy*







Possible Warning Signs: Neglect

- **Unsafe living environment**
 - **Malnutrition/dehydration**
 - **Lack of medical care—untreated medical conditions**
 - **Over or under medication**
 - **Skin breakdown/decubitus ulcers**
 - **Poor personal hygiene**
 - **Inappropriate clothing**
 - **Isolation**
-

Possible Warning Signs: Behavioral, Mental, & Emotional

- **Anger, irritability**
 - **Apathy, fearfulness, nervousness**
 - **Clothing dirty, seldom changed, inappropriate**
 - **Confusion, disorientation, wandering**
 - **Decreased quality of personal hygiene**
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Possible Warning Signs: Environmental

- Hoarding
 - House in poor repair
 - Inadequate clothing, food, or shelter
 - Offensive odors (feces, urine, rotted food)
 - Vermin infestations (rodents, insects, bed bugs)
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Possible Warning Signs: Financial

- **Forced, tricked, or manipulated signatures**
 - **Unpaid rent or utilities**
 - **Inappropriate bank activity**
 - **Personal belongings missing**
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Possible Warning Signs: Caregiver Behaviors

- **Reacts inappropriately**
 - **Isolates**
 - **Refuses to allow medical care**
 - **Refuses to pay for necessities or care**
 - **Verbally critical and threatening**
 - **Consistently over or underreacts**
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Response Time

Urgent

- Prompt action may be required
- Initiation within 24 hours or sooner

Non-Urgent

- Prompt action not indicated
- Initiation five-business days, not to exceed 120 hours

CAPS Process

- Referral assigned by screening specialist
- Notification to law enforcement for investigations
- Contact made with client, alleged perpetrator, and/or collaterals
- Assessment of client's needs, risk, & capacity to consent
- Service planning
- Findings letter sent to known next of kin and caretaker
- Findings sent to the state District Attorney

Service Planning



APS Services Through Temporary Guardianship

APS can only provide involuntary services when:

- **the client lacks capacity to consent**
 - **there is no one else available to make appropriate decisions for the client AND**
 - **the client is at substantial risk of death or immediate and serious physical harm or financial exploitation of the estate**
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Case Closure

- **Situation is remedied**
- **Circumstances are stable**
- **Client retains capacity and refuses services**



Duty to Report: Title 43A §10-104

- **Who – any person having reasonable cause**
 - **When - as soon as person is aware of the situation**
 - **Where - to DHS or local law enforcement**
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Mandatory Reporters:

Title 43A §10-104

B. Persons required to make reports pursuant to this section shall include, but not be limited to:

- **Physicians**
- **Operators of emergency response vehicles and other medical professionals**
- **Social workers and mental health professionals**
- **Law enforcement officials**
- **Staff of domestic violence programs**
- **Long-term care facility personnel, including staff of nursing facilities, intermediate care facilities for individuals with intellectual disabilities (ICFs/IID), assisted living facilities, and residential care facilities**

Mandatory Reporters: Title 43A §10-104 cont.

- **Other health care professionals**
- **Persons entering into transactions with a caretaker or other person who has assumed the role of financial management for a vulnerable adult**
- **Staff of residential care facilities, group homes, or employment settings for individuals with intellectual disabilities**
- **Job coaches, community service workers, and personal care assistants**
- **Municipal employees**

Making an APS Referral

Report to:

- **Public Access**
Abuseisnotok.org (use Chrome)
 - **Abuse & Neglect Hotline**
1-800-522-3511
 - **Local law enforcement**
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Adult Protective Services District Map



District Directors

- D1 Kim Allison**
- D2 Kerry Wilson**
- D3 Russell Jones**

Questions

