

### ADULT PROTECTIVE SERVICES (APS) AUDIT 2020

**ECONOMIC STABILITY ADMINISTRATION** 

Office of the Auditor General Performance Audit Report February 18, 2022

# APS AUDIT SUMMARY

Time frame: October 1, 2017- March 12, 2020

Release Date: February 18, 2022



### AUDIT OBJECTIVE ONE

To assess the effectiveness of MDHHS's Centralized Intake efforts to appropriately assign Adult Protective Services (APS) complaints for investigation and/or refer complaints to other agencies in accordance with applicable requirements.

► Covers Audit Finding 1, 2, 3, and 4

► Conclusion: Moderately Effective

### FINDING 1: REFERRALS TO LAW ENFORCEMENT



PLAN

Over 25% of APS complaints reviewed alleging criminal activity were not appropriately reported to law enforcement.

#### **Policy Review and Statute**

- March 2022: Collaborated with MDHHS Legal regarding APS statute
- March 2022: Complete internal review of law enforcement referral process
- Spring 2022: Partner with Law Enforcement on improving the referral
- Process

#### **Quality Assurance Measures**

- Collaboration with Department of Continuous Quality Improvement
- Developing a query to monitor referrals for physical, sexual and financial abuse

### FINDING 2: ASSIGNMENT DECISIONS



About 8% of APS complaints reviewed were denied by CI, although the complaint information indicated an investigation may have been required and/or sufficient justification to warrant an investigation existed.

#### **Policy Review**

Centralized Intake (CI) policy manual update

#### **Training**

- •July August 2021: Developed and implemented of additional training for CI staff regarding vulnerability and harm
- •Development and implementation of additional training for CI staff regarding decision making and screening tools.

#### **Quality Assurance**

•Review of 2021 denied APS referrals for identification of trends and patterns

PLAN

### FINDING 3: APS COMPLAINT CALL MONITORING



Centralized Intake monitored less than 1% of the APS complaint calls received from October 2017 through September 2019 and discontinued monitoring as of September 30, 2019.

#### **Quality Assurance**

- Established a formal process for quality assurance review of APS referrals by Centralized Intake supervisors and program managers.
- Established a formal process for the "live review" of phone calls of APS intakes.

### FINDING 4: APS COMPLAINT RECONCILIATION



MDHHS did not have a process to reconcile APS complaint calls and screening records nor had it developed a tracking and reconciliation process for other APS complaint sources.

#### **Quality Assurance**

- January 2021: Developed and maintain a tracking and reconciliation process for APS complaint calls
- September 2021: Developed and maintain a reporting system in MiAIMS to support the reconciliation of APS complaints at Centralized Intake

### AUDIT OBJECTIVE TWO

To assess the effectiveness of MDHHS's effort to appropriately investigate assigned complaints of adult abuse, neglect, and/or exploitation in accordance with applicable requirements.

► Covers Audit Finings 5, 6,7, and 8

► Conclusion: Moderately Effective

### FINDING 5: SUPERVISOR REVIEW OF CASES

MATERIAL FINDING

More consistent and effective supervisory review of APS investigations is needed.

- 20% of cases contained errors that were not addressed.
- 38% of moderate or high-risk investigations were not reviewed.
- 37% of APS investigations open longer than 5 months were not reviewed.
- 29% of APS investigations with an adult's death were not reviewed.
- 25% remained unreviewed when closed.

#### **TECHNOLOGY UPDATES**

Fall 2019: Added MiAIMS case read tool

March 2022: Fixing case read tool

#### **NEW REPORTS**

•March 2021: APS Client Death Reports

•February 2022: Moderate – High Risk Cases

•February 2022: APS Cases open over 5 months

#### STATEWIDE QUALITY ASSURANCE PROCESS

This is under development and will include:

- More detailed closing summary
- Key items to review
- Consistent documentation of the review

**PLAN** 

### FINDING 6: APS COMMENCEMENT



Approximately 20% of the APS investigations reviewed were not properly commenced within 24 hours. This occurred most often because MDHHS did not obtain sufficient information to determine the adult's need for protective services and degree of risk within the 24-hour time frame required by State law.

95% of APS cases had a 24-hour collateral contact completed

#### **Training**

July 2021: Educated staff on policy requirements

#### **Quality Assurance**

September 2021: Question added to supervisor case read review Monthly reports pulled to determine compliance with policy

Month	Total Cases Reviewed	Percent Correct
Sep-21	1145	89.68%
Oct-21	1231	90.50%
Nov-21	1247	87.17%
Dec-21	986	96.32%
Jan-22	1179	97.27%
Feb-22	1234	97.16%

**PLAN** 

### FINDING 7: VERIFICATION OF SERVICES



APS caseworkers did not verify or document that available referred services were in place for 9% of APS closed investigations reviewed.

**PLAN** 

#### **Policy Updates**

- January 2022: Corrected inconsistency between APS policy and APS core training
- February 2022: Adult Services Notification (ASN) Issued
- Adult Services Manual will be updated

### **Training**

February 2022: Presentation to all Adult Protective Services Staff

#### **Quality Assurance**

Supervisor case reviews to monitor compliance

### FINDING 8: INTERVIEWING PERPETRATORS



For 14% of investigations reviewed, MDHHS did not conduct an interview of an alleged perpetrator(s) or document the reasons why an interview did not occur.

**PLAN** 

#### **Policy Update**

- October 2021: Adult Services Notification (ASN) Issued
- APS policy manual will be updated

#### **Training**

September 2021: Presentation to all Adult Protective Services Staff

#### **Technology Update**

December 2021: MIAIMS System Updated

#### **Quality Assurance**

•February 2022: Monthly query developed for monitoring

### AUDIT OBJECTIVE THREE

To assess the sufficiency of MDHHS's efforts to provide appropriate training for the assignment and investigation of APS complaints in accordance with the applicable requirements.

### **Covers Audit Findings 9 and 10**

#### **Conclusion:**

- Not sufficient for Centralized Intake Staff
- ▶ Sufficient, with exceptions for APS supervisors and caseworkers

### FINDING 9: CENTRALIZED INTAKE TRAINING



PLAN

Over 40% of CI staff reviewed had not received APS policy or assignment decision training.

#### **Training**

- July- August 2021: Centralized Intake Annual Refresher Training completed
- Summer 2022: Developing additional training for CI staff regarding
  - vulnerability and harm
  - decision making and screening tools

#### **Quality Assurance**

 Training is monitored for completion using both a local tracking mechanism and the use of the Learning Management System.

### FINDING 10: APS STAFF TRAINING



PLAN

14% of APS caseworkers reviewed did not complete the full amount of inservice training required by MDHHS policy.

APS supervisors were not required to complete training specifically related to their APS supervision responsibilities.

#### **Quality Assurance**

Training is tracked in the Learning Management System and reviewed by managers regularly. **RESULTS:** 99% compliance in FY 2021

#### **Training Development**

- July 2021 Survey of training needs completed
- In 2021 Three policy specific presentations completed statewide
- Sept 2020 March 2021: Three supervisor trainings completed

Developing APS supervisor specific training to implement in 2023

### AUDIT OBJECTIVE FOUR

To Assess the sufficiency of the MDHHS's efforts to evaluate the effectiveness of APS activities to protect vulnerable adults.

- ► Covers Audit Finding 11
- ► Conclusion: Sufficient, with exceptions

### FINDING 11: APS PROGRAM EFFECTIVENESS



Further development of evaluate the effectiveness of APS activities would enhance MDHHS's ability to identify areas of needed improvement and provide value-added information to decision-makers.

#### **Technology Updates**

October 2017: MiAIMS rolled out

Monitoring reports added over two years

Fall 2019: MiAIMS Case Read Reports added

March 2021: Additional Data Warehouse Reports created

#### **Quality Assurance**

December 2020: Statewide Quarterly Reports

December 2020: Statewide Quality Assurance and Improvement Team

Spring 2022: Finalizing Statewide Report Schedule

### AUDIT OBJECTIVE FIVE

To Assess the effectiveness of selected MDHHS and Department of Technology, Management, and Budget (DTMB) security and access controls over the Michigan Adult Integrated Management System (MiAIMS).

- ► Covers Audit Findings 12 and 13
- ► Conclusion: Moderately Effective

### FINDING 12: MIAIMS SECURITY CONTROLS



Contract improvements and completion of a system security plan would help MDHHS and DTMB ensure MiAIMS confidentiality, integrity, and availability, in accordance with State of Michigan standards, for carrying out APS activities.

**PLAN** 

#### **Security Control Updates:**

• 2021: Security System Plan (SSP) has been completed

December 2021: Authority to Operate (ATO) achieved

October 2021: Contract signed between Department of Technology, Management

and Budget (DTMB) and Vendor

This finding has been remediated.

### FINDING 13: MIAIMS USER REGISTRATION



MDHHS needs to strengthen access controls to MiAIMS. Inactive users need to be removed timely, users should be granted appropriate access and there should be an automated process to disable inactive users.

#### **Technology Updates**

September 2020 Database Security Application System

#### **Quality Assurance Measures**

December 2020 Local Office Security Coordinators for Adult Services

December 2020 Weekly reconciliation reports

#### **Policy Updates**

March 2021 Dept of Technology, Management and Budget policy updated

April 2021 MiAIMS Security Application Manual released

Exploring funding options to automate the ability to disable users in the system.



### Michigan Adult Integrated Management system

Started October 23, 2017 Web based system

**IMPROVEMENTS** 

- Adult Protective Services Intake Referral Module
- Revised Risk Assessment
- Perpetrator Details Screen
- Additional Harm Types Screen
- Plan of Care





## QUESTIONS

Contact: Chardae Burton

Phone: (517) 234-3221