

**Application for the
2007 Washington State Quality Award**

**Washington State
Department of Social and Health Services**
Aging and Disability Services Administration

Adult Protective Services Program



Protecting Vulnerable Adults in Washington State

June 30, 2008

P.O. Box 45600
Lacey WA 98502
(360) 725-2300
www.adsa.dshs.wa.gov

Eligibility Determination Form

This form is valid for one year from the date signed.

Applicant

Organization Name: Adult Protective Services Program, Home and Community Services Division, Aging and Disability Services Administration, Department of Social and Health Services

Address: PO Box 45600, Olympia, WA 98504-5600

Location: 640 Woodland Square Loop, Lacey, WA 98503

Sector

Check appropriate box to indicate sector and organization size.

Business

Not-for-Profit

Healthcare

Public

Education

114 Number of Employees

Criteria Selected by Applicant (see Criteria for Performance Excellence above):

Criteria for Performance Excellence Healthcare Education

Application Level

Application Fee (see fee table on Web site) to be submitted with application

Lite (Assessment) \$ \$300 Desired submission date of application: January 1 April 1 July 1 October 1

Full Examination \$ _____

Examiner Commitment:

Name of Examiner: Charlotte McDowell E-mail McDowCA@dshs.wa.gov Phone 360-725-3433

Submission date of Examiner Application: July 10, 2007

Name of Examiner: _____ E-mail _____ Phone _____

Submission date of Examiner Application: _____

Name of Examiner: _____ E-mail _____ Phone _____

Submission date of Examiner Application: _____

Examiners must commit the year prior, during, or post application submission.

Applicant Headquarters

Indicate if the applicant's headquarters are located in the state of Washington. If the headquarters are not in Washington, please provide a brief explanation.

Yes

No

Applicant Size and Site Locations

Percent of Employees Located in the State of Washington 100%

Total Number of Sites 6 Home and Community Services (HCS) regional offices, plus 15 additional local offices

List a brief description and complete address for each site.

Adult Protective Services intake and assignment for investigation is centered in each of the six HCS regional offices. Staff who investigate allegations may be in the regional office or in local offices. The regional offices are: HCS Region 1 office: 1330 N. Washington Ste, Ste 3000, Spokane, WA 99201-1933; HCS Region 2 office: 1002 N. 16th Ave, Yakima, WA 98902; ADSA Region 3 office: 900 E. College Way, Mt. Vernon, WA 98273-5688; HCS Region 4 office: 1737 Airport Way, Ste 130, Seattle, WA 98124-0847; HCS Region 5 office: 1949 S. State St., Tacoma, WA 98405-2850; HCS Region 6 office: 6737 Capitol Blvd S, 1st floor, Tumwater, WA 98504-5610.

Subsidiary Organizational Unit or Division

Indicate if the applicant is a unit, division, or other component of a larger parent organization. If the applicant is part of a larger parent organization, complete each of the additional items in this section.

- Yes, applicant is part of a larger parent organization
- No, applicant is not part of a larger parent organization

Parent Organization Name: Aging and Disability Services Administration, Dept of Social and Health Services

Address: PO Box 45600, Olympia, WA 98504-5600
640 Woodland Square Loop, Lacey, WA 98503

Highest Ranking Official of Parent Organization: Kathy Leitch

Title: Assistant Secretary

Telephone Number: 360-725-2260

Indicate if other units within the parent organization offer similar products or services. If other units do offer similar products or services, please provide a brief explanation.

- Yes
- No

Briefly describe any major business support functions that are provided to the applicant by the parent organization.
All basic support functions including human resources, finance, IT.

Highest Ranking Applicant Official in the State of Washington

Name Kathy Leitch

Title Assistant Secretary, Aging and Disability Services Administration, DSHS

Address PO Box 45600, Olympia WA 98504-5600

Telephone Number 360-725-2260

Official Contact Person

Name Samantha Barker Title Program Manager
Address PO Box 45600, Olympia, WA 98504-5600
Telephone Number 360-725-2572 Fax Number 360-407-0304
E-mail barkesj@dshs.wa.gov

Fee

Enclosed is the eligibility fee. Make the check or money order payable to:
Washington State Quality Award.

Ethics

Answering "yes" to any of the following questions requires further explanation; however, this does not imply that the applicant will be automatically disqualified. Provide supporting explanations on a separate page that is included with this Eligibility Determination Form. A member of the Panel of Judges may contact the applicant for additional information

Has the applicant been fined during the past five years for violating environmental laws?

Yes No

Have any of the applicant's senior executives/corporate officers been convicted of a felony during the past three years?

Yes No

Has the applicant been fined for income tax delinquency during the past three years?

Yes No

Is the applicant currently in the process of bankruptcy proceedings?

Yes No

Has your organization been convicted, settled or received sanctions or adverse actions under law (including malpractice, fraud, etc.) regulations, accreditation or contract in the past 3 years?

Yes No

Are you aware of anything about your organization that would bring embarrassment upon the Washington State Quality Award or the Governor if your organization was to be publicly recognized? ~

Yes No

Disclosure and Release Statement

I attest that the information provided in this Eligibility Determination Form and the Application to be provided is accurate and true to the best of my knowledge. Full disclosure of any circumstances that may negatively affect the Award has been made with the submission of the Eligibility Determination Form. I understand that the Award program may verify this information, and that untruthful or misleading information may result in forfeit of the Award. Furthermore, I certify that our organization is not engaged in any activity past or present that could be deemed embarrassing to the State of Washington, The Honorable Governor of the state of Washington or the WSQA. I understand that I must immediately notify WSQA if our status changes in any of these areas during the next 12 months and that I may be asked to revalidate this disclosure during the 12 months.

I also understand that members of the Washington State Quality Award Board of Examiners will review this application. I agree to host the Examiner team and facilitate open and unbiased evaluation of our organization if we are selected for a Site Visit. I understand that our organization will be responsible for paying all reasonable travel and related expenses for the site evaluation team.

I also understand that with the submission of our application, our organization commits to providing at least one individual from our organization as an Examiner in at least one of the following application cycles: the year prior to our application, this application year or the next application year.


Signature of Highest Level Organization Official

6/24/07
Date

Printed Name Kathy Leitch

Title Assistant Secretary, Aging and Disability Services Administration, DSHS

Address PO Box 45600, Olympia, WA 98504-5600

Telephone Number 360-725-2260

Send these documents to:

Washington State Quality Award
P.O. Box 609
Keyport, WA 98345



2007 WSQA ASSESSMENT CRITERIA

The Assessment level is the starting point for many organizations that are beginning to adopt and apply quality principles as defined by the WSQA and Baldrige Criteria. This assessment provides your organization with the ability to begin the journey with an abbreviated set of criteria questions. These questions are a direct subset of the full criteria for performance excellence and references to *Criteria for Performance Excellence* booklet are listed.

REQUIREMENTS:

1. Obtain complete Assessment guidelines and eligibility form from the WSQA web page at www.wsqa.net/apply.htm. This set of guidelines will provide: time frames of submittal, information required for submittal, application length and much more.
2. Complete the *entire* Organizational Profile as described in Section P Preface: Organizational Profile, P.1 Organizational Description and P.2 Organizational Challenges in the *Criteria for Performance Excellence* booklet (available for free download at www.wsqa.net/apply.htm). Limit your response to 5 pages. In addition, include a copy of your organizational chart.
3. Describe your organization by answering the following questions for each category. See the full Criteria booklet for definitions of terms and further explanations to help you understand the questions. Please focus your response on the questions in this document only, not on the full set of criteria questions. Limit your response to no more than 15 pages. The following page guideline is suggested, but not required: up to 1 ½ pages each for categories 1-6 and 6 pages for category 7. Please note that Category 7 results should be linked to and be the result of your processes described in Categories 1-6. Results demonstrate the effectiveness of your processes.
4. Please note that your responses will be evaluated using the Scoring Guidelines from the Criteria Booklet. These are found on pages 52 and 53.

ASSESSMENT CRITERIA

- 1 **Leadership: How do your senior leaders lead? How do you govern and address your social responsibilities?**
 - a) How do your senior leaders set and deploy your organizations vision and values through out the organization, workforce and stakeholders? (ref 1.1a1)
 - b) How do senior leaders employ a governance system to assure regulatory and legal compliance and ensure ethical behavior? (ref 1.2a & b)
- 2 **Strategic Planning: How do you develop and deploy your strategy?**
 - a) What are your key strategic objectives and action plans? (ref 2.1b1 and 2.2a1)
 - b) How do your strategic objectives address strategic challenges and strategic advantages? (ref P.2.b and 2.1b2)
 - c) How do you develop and deploy action plans through out the organization to achieve your key strategic objectives? (ref 2.2a1)
- 3 **Customer and Market Focus: How do you use customer and market knowledge? How do you build relationships and grow customer satisfaction and loyalty?**
 - a) Who are your key customers or key customer groups? (ref P.1.b2 and 3.1a1)
 - b) How do you determine key customer requirements, needs and changing expectations? (ref P.1.b2 and 3.1a2)
 - c) How do you build relationships to acquire customers, meet and exceed their expectations, to increase loyalty and repeat business, and to gain positive referrals? (ref 3.2a1)
- 4 **Measurement, Analysis and Knowledge Management: How do you measure, analyze, and then improve organizational performance?**
 - a) How does your senior leader and your organization measure, review and improve its performance? (ref 4.1)
 - b) What are your key organizational performance measures? (ref. 4.1a1)
 - c) What comparative data do you use to support decision making and evaluate organizational performance? (ref 4.1a2)
- 5 **Human Resource Focus: How do you engage your workforce to achieve organizational and personal success? How do you build an effective and supportive work environment?**
 - a) How do you determine key factors that affect your workforce's commitment to accomplishing your organization's mission and how do you assess workforce engagement? (ref 5.1a2 and 5.1 c1)

- b) How do you assess workforce capability and capacity needs, including skills, competencies and staffing levels and how do you manage your workforce capability and capacity to accomplish your performance objectives? (ref 5.2a1&3)

6 Process Management: How do you design your work systems? How do you manage and improve your key organizational work processes?

- a) What are your organization's key work processes, and how do you determine the key work process requirements for each process? (ref 6.1b1&2)
- b) How do you implement, manage and improve your key work processes to meet key process requirements and to achieve better performance and meet key requirements? (ref 6.2a1 and 6.2b) What are your key performance measures or indicators and in-process measures used for control and improvement of your processes?

7 Business Results: What are your product and service, customer-focused performance, financial and market, workforce-focused performance, organizational effectiveness, performance, process effectiveness and leadership results?

- a) What are your organization's key performance and improvement results in key business areas for:
- product and service performance (ref 7.1A)
 - customer satisfaction (ref 7.2a1), ,
 - financial and marketplace performance (ref 7.3a 1 &2),
 - workforce engagement, satisfaction and development (ref 7.4a1),
 - operational performance (ref 7.5a1), and
 - accomplishment of strategy and action plans (ref 7.6a1)?

Please provide results by segments if applicable. (ref 7)

- b) How does your key performance results compare to competitors or others in your industry? (ref 7)

TABLE OF CONTENTS

2007 Eligibility Certification	ii
Glossary of Terms and Abbreviations	iii
Organizational Chart	viii
Organizational Profile	1
P.1 Organizational Description	1
P.2 Organizational Challenges	4
Category 1 – Leadership	5
Category 2 – Strategic Planning	6
Category 3 – Customer and Market Focus	9
Category 4 – Measurement, Analysis & Knowledge Management	11
Category 5 – Human Resource Focus	13
Category 6 – Process Management	15
Category 7 – Business Results	18

2007 Eligibility Certification

From: Jennifer Sprecher [mailto:cpc@cpc-international.com]
Sent: Monday, August 27, 2007 12:04 PM
To: Barker, Samantha (DSHS/MSD)
Subject: WSQA

We are pleased to receive your eligibility form and the fee of \$150 for the Lite (Assessment) Award cycle. We look forward to the receipt of our application by postmarked by July 1, 2008 (in the event that this is a non-working day for the US Postal Service, we will accept a postmark by the next working day). Please save this e-mail as confirmation of the receipt of your eligibility form. You will be asked to submit a copy of this confirmation with your application.

Thank you.

Jennifer Sprecher
Executive Director
Washington State Quality Award
206-713-5455 (cell)
360-697-2444 (office)

P.O. Box 609, Keyport, WA 98345

Become your internal expert in Performance Excellence by becoming a WSQA Examiner. Visit our website at <http://www.wsqa.net/applicationEx.htm> for more information and an application.

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Glossary of Terms and Abbreviations

A

AAA: Area Agency on Aging, an agency designated and contracted by Aging and Disability Services Administration (ADSA) to carry out programs and services in a designated geographical area of the state.

Abuse Registry: A database of perpetrators of abuse with substantiated findings of abuse, neglect, or exploitation against a vulnerable adult.

Accurint: A database/clearinghouse for information on individuals, businesses and entities in Washington State.

ADA: Americans with Disabilities Act of 1990, a wide ranging civil rights law that prohibits discrimination on the basis of disability in employment, programs, and services provided by state and local governments.

ADSA: Aging and Disability Services Administration; one of the administrations within the Department of Social and Health Services (DSHS).

AFH: Adult Family Home, a residential neighborhood home, licensed by the state of Washington to care for two to six people.

AGO: Attorney General's Office, an independent constitutional office and legal counsel to state government (including Adult Protective Services).

AP: Alleged Perpetrator; individual identified in Adult Protective Services (APS) intake reports accused of harming or neglecting a vulnerable adult.

APS: Adult Protective Services, the program within ADSA that investigates reports of abuse, abandonment, neglect, or exploitation of a vulnerable adult and provides protective services.

APS outcome report: a report that succinctly summarizes key aspects of the APS case.

APS PM Meetings: APS Program Manager meetings, where APS field program managers from six regions meet monthly to discuss APS business, collaborate on issues, and make recommendations to improve program policy.

APS Training Academy: APS training designed for APS staff who perform investigative and/or supervisory duties.

APSAS: Adult Protective Services Automated System, the computer system that tracks reports, intakes, investigations, and APS findings regarding cases within the APS program.

Assistant Director: The second person in command of the Home and Community Services programs. The Assistant Director answers to the Director of Home and Community Services programs (see organizational chart).

Assistant Secretary: The leader of Aging and Disability Services Administration, overseeing all divisions within the administration. The Assistant Secretary of ADSA answers to the Secretary of Department of Social and Health Services (see organizational chart).

B

BCCU: Background Check Central Unit, a unit within the Administrative Services Division (ASD) of DSHS that conducts background check requests and fingerprint based checks.

C

CA: Children's Administration, one of the administrations within DSHS.

Capacity Screening Tool: A capacity assessment instrument developed by APS consisting of 11 questions and a coding guide to assist APS field staff in assessing clients for impaired decision making capacity.

CARE: Comprehensive Assessment Reporting Evaluation, the standardized assessment tool used to document the information gathered during the assessment process.

CBA: Collective Bargaining Agreement, a contract that embodies the results of the negotiations between the employer and the exclusive bargaining representative and sets forth their agreements.

CFD: Combined Fund Drive, Washington State's workplace giving program for active and retired public employees that allows individuals to make donations via check and payroll deduction to their favorite charities.

Collateral Contact: Independent sources of relevant information in an APS investigation.

CPS: Child Protective Services, a program within Children's Administration (CA) responsible for investigating child abuse and neglect complaints and child protection for children ages 0 to 18 years.

Cross Program Investigation Protocol: Procedures for investigations involving Vulnerable Adults and Children that cross DSHS administrations.

CRU: Complaint Resolution Unit, a unit within Residential Care Services (RCS) Division of ADSA that investigates complaints in residential facilities.

D

DDD: Division of Developmental Disabilities, a division within ADSA. DDD provides services to individuals (birth to death) with diagnoses of developmental disabilities.

Decision Package: Internal process for DSHS administrations to submit proposals for additional funding for specific program development or expansion. The decision packages are submitted to the DSHS Secretary who reviews and decides which proposals will be submitted to the governor and legislature for funding consideration.

Disposition Reports: See APS Outcome Reports.

Division Director: The leader of a division within ADSA who reports to the Assistant Secretary. The HCS Division Director oversees Home and Community Services programs including the APS program.

DMS: Data management system.

DOP: Department of Personnel, a state agency that provides state agencies and higher education institutions with specialized human resource expertise and consultation.

DSHS: Department of Social and Health Services, the parent agency for ADSA. DSHS contains several administrations and is managed by the Secretary of DSHS.

DSO: Decision Support Office, located within ADSA and is the focal point for development and dissemination of accurate and consistent data analyses. DSO provides data results for the APSAS computer program to APS headquarters program managers.

Due Process: An alleged perpetrator of abandonment, abuse, financial exploitation or neglect may request an administrative hearing to challenge a substantiated initial finding made by APS, after the initial finding made on or after October 1, 2003.

E

ENDHARM: A 24 hour toll free staffed number that takes calls regarding suspected abuse of a child or vulnerable adult. The operator connects the caller with the correct DSHS office to make a report.

ESA: Economic Services Administration, one of the administrations within DSHS.

F

FFY: Federal Fiscal Year (October-September), for example FFY 2007 ran from October 1, 2006 to September 30, 2007.

Financial Exploitation: Under Chapter 74.34 Revised Code of Washington (RCW) the illegal or improper use of the property, income, or resources of a vulnerable adult by any person for profit or advantage.

FO: Field Office; within ADSA there are six regions which may contain multiple offices where Home and Community Services programs (including APS) are operated.

FPM: Field Program Manager, staff who work within the APS field offices and oversee the APS field staff.

FTE: Full time employee.

G

GMAP: Government Management, Accountability and Performance program, a program initiated by the Washington State Governor's office that promotes sharing of current performance data by government agencies to achieve improved results.

H

HCS: Home and Community Services, the division within ADSA that administers the APS program.

HHS: The Department of Health and Human Services, the United States government's principal agency for protecting the health of all Americans and providing essential human services.

HQ: Headquarters office of ADSA located in Lacey, Washington.

HQ PM: Head quarters program managers, who oversee the program development and policy of APS program. There are a total of three APS

headquarters program managers who report to the Assistant Director of HCS.

HR: Human Resources, within ADSA is located at the Olympia headquarters office of ADSA and provides expertise and guidance in personnel services.

HRMS: Human Resource Management System, the central personnel and payroll system for Washington State government.

HRSA: Health and Recovery Services Administration, is one of the administrations within DSHS.

I

Investigator: Within APS, social workers trained to investigate APS cases to determine if alleged abuse, neglect, or exploitation against vulnerable adults has occurred.

Intake: In APS the initial gathering of report information about an allegation of abandonment, abuse, neglect, or self-neglect of a vulnerable adult.

IRS: Internal Revenue Service of the United States.

ITS: Information Technology Support, an office that provides technical computer program assistance to ensure APS computer equipment and programs are functional.

J

JRA: Juvenile Rehabilitation Administration, one of the administrations within DSHS.

K

Key customers: Individuals and community agencies use APS services and are most important to the APS program.

L

LBA: Legal Benefits Advisors, staff hired within the HCS offices to assist with the legal issues related to APS case investigations.

LTC: Long Term Care, care for older or disabled individuals that lasts over a lengthy period.

LTC Manual: Long Term Care Manual, the manual for HCS field staff that provides policy and procedures for working with HCS programs and clients. Chapter six of the LTC manual is dedicated to the APS program.

M

Mandatory Reporter: Individuals required by law to report suspected abuse, neglect or exploitation of vulnerable adults.

Medicaid Fraud Investigations: A division within DSHS designated to investigate public assistance eligibility issues and to investigate allegations of fraud in DSHS programs throughout the state.

MOU: Memorandum of Understanding, an agreement drawn up to create a clear understanding of each party's commitment and purpose. It sets out expectations for each party.

Multi-disciplinary task force: Includes members of various community legal, social service, mental health, and law enforcements agencies that come together regularly to staff APS client cases. The goal of the task force is to address chronic issues within the community, to reduce APS re-referrals of the same individual for services.

O

OAH: Office of Administrative Hearings, an independent state agency composed of administrative law judges who conduct impartial administrative hearings for Washington citizens and governmental agencies.

OFM: Office of Financial Management, provides information, fiscal services and policy support to the Governor Legislature and state agencies.

P

Performance Development Plan: The state's performance planning and assessment tool which is part of the individual employee performance management process.

Permissive Reporter: Under Chapter 74.34 RCW any person including but not limited to an employee of a financial institution, attorney, or volunteer in a facility or program providing services who reports suspected abuse of a vulnerable adult.

POG: Priorities of Government, a results-based prioritization of state activities focused on 10 key results citizens expect from state government. The POG framework helps guide budget decisions and is also central to the GMAP process.

PT: Part time.

Q

QA: Quality Assurance.

QA Policy Manager: Headquarters based Program Manager.

QA Monitoring Tool: A computer based program designed to evaluate APS cases for consistency of policy and program guidelines.

R

RA: Regional Administrator, the lead authority in the regional field offices for Home and Community Services. APS field staff are supervised by the RA.

RASE: Risk Assessment and Self Evaluation Audit, designed to assist management in meeting their responsibilities regarding internal controls and to help the agency comply with Office of Financial Management (OFM) requirements.

RCW: Revised Code of Washington, the compilation of all permanent laws (statutes enacted by the Legislature, and signed by the Governor, or enacted via the initiative process) now in force in Washington State.

RDA: Research and Data Analysis, a unit within DSHS that provides research and survey information on DSHS programs and employees including: annual DSHS employee evaluations, client surveys, and customer comment cards.

Re-classification: Reallocation of a position to a different job classification.

Regional Resource Team: A team staff that local APS offices participate in that includes multiple local social, legal, and health service agencies to discuss issues for APS clients with multiple and difficult needs.

Residential Care Services: A division within ADSA that is the regulatory authority for residential long term care settings. RCS handles all intakes and investigations of alleged abuse against vulnerable adults in nursing homes, assisted living, and adult family homes.

Resource Allocation: The distribution of fiscal funding to ADSA programs through a designated process of priority.

RN: Registered Nurse.

S

Safety training: Mandatory training for ADSA staff that work in the community. The training is designed to educate APS staff on how to be proactive about their safety when conducting investigations in the field.

Screen-out: Process for deciding which APS reports do not meet criteria for investigation. Screen outs are determined during the intake process and noted in APSAS.

Self Neglect: Under Chapter 74.34 RCW the failure of a vulnerable adult, not living in a facility, to provide for himself or herself the goods

and services necessary for their physical or mental health; and the absence of which impairs or threatens the vulnerable adult's well being.

SER: Service Episode Record, staff notes documenting action taken during an APS investigation.

SFY: State Fiscal Year (July – June). Example: SFY 2006 ran from July 1, 2005 to June 30, 2006.

Sharepoint: Websites based on Microsoft Windows Share Point Services 2.0 that provide a place where individuals can share and communicate on the same documents collaboratively.

SNF: Skilled Nursing Facility, a licensed institution that provides 24 hour supervised nursing care, personal care, therapy, nutrition management, organized activities, social services, room board and laundry.

Stakeholder Input: Information from community organizations that interact and provide input to APS staff during an investigation. The stakeholder groups can act in an advisory capacity or legal authority depending on the situation.

Substantiated: Preponderance of evidence indicates that more likely than not abuse, abandonment, neglect, self-neglect, or financial exploitation has occurred.

SW: Social Worker.

SW 3: A level in the Social Work job classification series.

T

Timeout protection: Automatic computer log outs at set times to ensure computer protection.

TTY: Teletypewriter, allows a deaf or hard of hearing individual to send and receive messages by typing. Messages appear on a display screen and can also be printed on paper.

V

VA: Vulnerable Adult, defined in Chapter 74.34 RCW as:

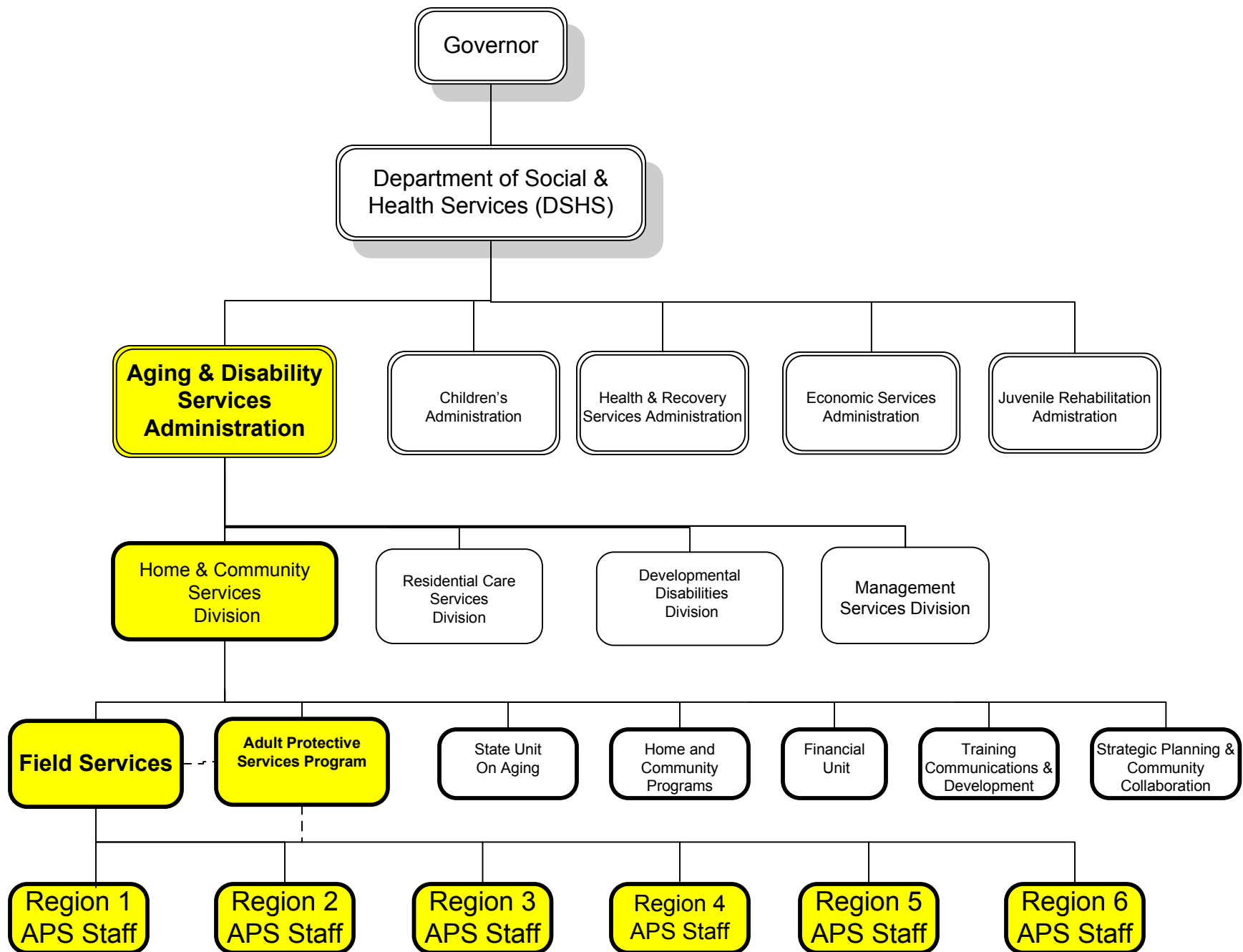
"Vulnerable adult" includes a person:

- (a) Sixty years of age or older who has the functional, mental, or physical inability to care for himself or herself; or
- (b) Found incapacitated under chapter [11.88](#) RCW; or
- (c) Who has a developmental disability as defined under RCW [71A.10.020](#); or
- (d) Admitted to any facility; or
- (e) Receiving services from home health, hospice, or home care agencies licensed or required to be licensed under chapter [70.127](#) RCW; or
- (f) Receiving services from an individual provider.

W

WAC: Washington Administrative Code, is the codification of general and permanent rules published in the Washington State Register by the executive departments and agencies of the Washington State Government.

Workforce Engagement: The extent of workforce commitment, both emotional and intellectual, to accomplishing the work, mission, and vision of the organization.



Preface: Organizational Profile

P.1 Organizational Description

P.1a Organizational Environment

P.1a (1) Main services and delivery mechanisms:

Adult Protective Services (APS) is a program within the Home and Community Services (HCS) Division of Aging and Disability Services Administration (ADSA), which is part of Washington State’s Department of Social and Health Services (DSHS). (See organizational chart page viii.) APS is mandated by law to receive reports and investigate allegations of abuse, abandonment, neglect, self-neglect and financial exploitation of vulnerable adults (VA) living in the community.

The HCS division’s APS program investigates when:

- 1) the alleged victim lives at home or in an unlicensed setting;
- 2) the alleged perpetrator is external to a licensed setting; or
- 3) an alleged altercation between clients occurred outside the licensed facility where they live and was not under the supervision of the facility’s licensed staff.

A separate division within ADSA, Residential Care Services (RCS) performs investigations when the alleged victim and the perpetrator are within a licensed/certified facility. Each division refers reports to the other as appropriate.

APS investigates allegations by gathering information through interviews, observations and review of records, including:

- Initiating intake, and screening out referrals that do not meet legal program criteria.
- Determining risk factors for the vulnerable adult by assessing: physical, functional and mental abilities, the conditions of the environment, support systems and relationships.
- Investigating allegations and providing legal remedies as appropriate.
- Honoring the vulnerable adult’s self determination by providing information on available resources.
- Seeking guardianship services when appropriate.
- Providing protective services for a vulnerable adult when allegation is substantiated, with their consent.

Protective services for a vulnerable adult may include facilitating access to the legal system and/or law enforcement, and access to services.

P.1a (2) Organizational Culture:

Figure P.1-1 outlines the APS vision, mission and values. APS’ primary mission is protection and safety of vulnerable adults. As a government entity, APS balances its mission of protection of the vulnerable adult with the person’s right to self-determination. APS focuses on the provision of objective, fair and unbiased investigations delivered as a result of both critical thinking and shared decision-making with multi disciplinary agency teams.

APS staff are accountable to both their client population and to the general public. In order to carry out their investigative responsibilities, APS staff are provided with the necessary tools and appropriate training. The APS culture supports an environment that is collegial, professional and empowering for APS staff. APS has regulatory, procedural and

technological systems in place that ensure client’s privacy and rights are not violated.

Figure P.1-1 APS Vision, Mission and Values

APS Vision
We believe that vulnerable adults living in our community have the right to live free from abuse, abandonment, neglect, self-neglect, and financial exploitation. By conducting skilled investigations and through advocacy, referrals, and community partnerships, we strive to protect vulnerable adults from harm while also honoring their right to make choices.
APS Mission
Adult Protective Services receives and investigates reports of allegations of abuse, abandonment, neglect, self-neglect and financial exploitation of vulnerable adults and provides protective services in an attempt to intervene and prevent such mistreatments, within the mandate and scope outlined in law.
APS Values
To protect vulnerable adults by: <ul style="list-style-type: none"> • Conducting objective, timely* and thorough investigations; • Performing in accordance with statute, rules, policy and client consent; • Networking and coordinating with others to serve vulnerable adults; and • Increasing knowledge and awareness among vulnerable adults and the public about vulnerable adult abuse, and protective services.

**Timely investigations are defined by policy depending on the level of threat/risk of the alleged abuse.*

P.1a (3) Employee Profile:

APS directly employs about 101 full-time and 6 part-time field staff and 3 Headquarters (HQ) Program Managers (PM). These staff, with the exception of the 3 HQ PMs, deliver investigative and protective services through a statewide system of six regions. Figure P.1-2 outlines Field Office job classifications.

The three HQ PMs lead development of policy, training, quality assurance and program improvements. They meet monthly with the regional APS Program Managers to review data and training curriculum, develop policy and conduct planning sessions. The regional Legal Benefits Advisors join this group every other month.

P.1a (4) Major Technologies, Equipment and Facilities:

The Adult Protective Services Automated System (APSAS) is an online documentation system related to intake, investigation and protective services. APSAS was implemented statewide July 2000.

To ensure a thorough investigation and the safety of APS investigators and others, APS staff routinely use several other databases in addition to APSAS. These include the Comprehensive Assessment and Reporting Evaluation (CARE), an evaluation tool for long term care (LTC) services; the Department of Health licensing database; DSHS Background Check Central Unit for background check information on individuals applying to be service providers; APS Abuse Registry of final APS findings; and

Accurint, a database/clearinghouse for information on individuals, businesses and entities.

ADSA also maintains intranet web pages for policy and information deployment and gathering feedback from staff. ADSA provides APS staff with computers to work with multiple software programs, websites and/or other databases. Computers are replaced every three years to assure optimal processing speed and memory capacity for required work.

Figure P.1-2 APS Field Office (FO) Job Categories

Job Title	# of FO staff	Scope of Position
Social Worker 3 (Intake)	8	Gathers reported information about allegations of abuse, abandonment, financial exploitation, neglect, or self-neglect of vulnerable adults
Social Worker 3 (Investigator)	79	Investigates allegations, arranges protective services.
Community Nurse Consultant (Investigator)	5	Primary investigator for medically frail or individual with complex medical needs
Social Worker 4	11	Supervisor of Intake and Investigators (SW3s & RNs)
Legal Benefits Advisor (Attorney)	6	Manages legal program and hearing process; participates in administrative hearing process, regional resource teams, and panel reviews.
Field Program Managers	6	Oversees program standards, provides field training and quality assurance oversight, develops working agreements with tribes and law enforcement agencies.

Facilities: APS operates out of 22 primary locations across the state. All buildings in which APS staff are housed meet Americans with Disabilities Act (ADA) standards. ADSA provides security and safety for staff through the use of locked entries requiring keys or access cards and/or physical presence of security staff. All APS staff work out of leased facilities. Leased facilities are administered by the Lands and Buildings Division of the Department of Social and Health Services.

P.1a (5) Legal and regulatory environment:

State laws (Revised Code of Washington/RCW) control the scope of what APS is allowed to do. Washington Administrative Code (WAC), DSHS Administrative Policy, Personnel Policy, Executive Order and APS Policy control how work is done. Applicable RCWs, WACs and APS policy are contained in the ADSA Long Term Care Manual on the ADSA intranet.

Figure P.1-3 Field offices, number of counties served, staff allotted*, reports received and investigations conducted by region, Calendar Year 2007

ADSA Regions	Counties Served	# of Staff Allotted*	# of Reports	# of Investigations
Region 1	11	20 (4PT)	2184	1997
Region 2	8	9	1356	951
Region 3	5	13 (1PT)	1653	1559
Region 4	1	22	2894	2718
Region 5	2	16	1651	1512
Region 6	12	27 (1PT)	3815	2543
Totals	39	107	13,553	11,280

**Of these staff, there are a total of 81 APS staff who complete investigations. This equates to 12 cases monthly per investigator.*

Data source: APSAS, 4/14/08, compiled by Michael Blonden

ADSA believes that staff should have sufficient knowledge, tools and skills in order to fulfill the goal of quality in the provision of Adult Protective Services. When resources are available for full implementation, the Quality Assurance Monitoring tool will provide needed information to evaluate application of policy and continuously improve the APS program.

Finally, ADSA performs an annual Risk Analysis Self-Assessment (RASE) in each of the regional offices where facility security, cash handling, health and safety, payroll processing, computer security, emergency preparedness, staff training and other such elements are reviewed and reported. (See 7a.)

P.1b Organization Relationships

P.1b (1) Organizational structure and governance system

The organizational chart on page iii shows the major work units, offices, and reporting relationships within ADSA, HCS, and APS.

APS is one of several HCS programs in the long-term care delivery system. Regional administrators (RA), who are supervised by the HCS Assistant Director, hire, fire, supervise, and manage regional HCS long-term care program staff including APS social workers, nurses, supervisors, legal benefits advisors, and support staff. Unlike most HCS service programs the APS program is funded through the HCS administrative budget and does not have a dedicated budget.

P.1b(2) Key customer and stakeholder groups:

The vulnerable adults of Washington State are the primary customers of the APS program. (See APS Mission.) Figure P.1-4 lists the key customers and stakeholders of the APS program.

Figure P.1-4 Key Customer and Stakeholder Requirements

Customer/ Stakeholders	Key Requirements & Expectations
Vulnerable Adult (VA)	<ul style="list-style-type: none"> • Response to relevant reports, • Investigation of allegations, • Provision of protective services to stop/prevent further mistreatment, • Advocacy/link the VA (with consent) to other community services as needed , • Compliance with confidentiality as outlined by law.
Alleged Perpetrator	<ul style="list-style-type: none"> • Thorough and fair investigation of allegations, • Due process, • Placement of the perpetrator’s name on an abuse registry when a finding becomes final, • Relevant referrals to other community services/agencies when appropriate.
Permissive and mandated reporters	<ul style="list-style-type: none"> • Knowledge of required reports and definitions, • Thorough intake process to maximize information collected , • Priority screening to assign response times per severity of allegation, • Screen-out reports that do not fall within APS’ scope of authority, • Provide appropriate resources/referrals if the report is screened-out, • Compliance with confidentiality as outlined by law.
Attorney General’s Office	<ul style="list-style-type: none"> • Collaborate in providing legal remedies for the VA as appropriate. • Provide overall program policy consultation.
Collateral Contacts	<ul style="list-style-type: none"> • Thorough investigation & evidence collection.
Law Enforcement	<ul style="list-style-type: none"> • Compliance with the law by reporting suspected crimes to law enforcement, • Communication and collaboration as appropriate for investigation.
Prosecutor	<ul style="list-style-type: none"> • Provision of APS record information including evidence, to assist in the prosecution of crimes against VAs.
Other Relevant Investigative Bodies	<ul style="list-style-type: none"> • Information sharing within the Department of Social & Health Services (CPS, RCS, Medicaid Fraud Control Unit) other state agencies (Department of Health), outside entities per MOU (WA State Federally Recognized Tribes) consistent with Chapter 74.34 RCW.
Advocacy Groups	<ul style="list-style-type: none"> • Investigation of allegations of mistreatments against VAs in their

Customer/ Stakeholders	Key Requirements & Expectations
	<ul style="list-style-type: none"> target populations and provision of protective services to remedy current situation or prevent future mistreatment. • Education about the abuse of VAs.
Legislature	<ul style="list-style-type: none"> • Conduct investigations and provide protective services when appropriate to WA State’s VAs. • Response to constituent inquiries and complaints.
Citizens	<ul style="list-style-type: none"> • Provide public education.

P.1b(3) Key suppliers, partners and collaborators:

Protection from and prevention of vulnerable adult abuse requires community collaboration and effort. Figure P.1-5 lists the key suppliers and partners that help APS carry out its mission.

Figure P.1-5 Key Suppliers, Partners, and Collaborators

Key Suppliers, Partners, Collaborators	Key Communication and Coordination of Effort
Vulnerable Adults, reporters, collaterals	<ul style="list-style-type: none"> • APS receives reports via email, phone call, fax, and walk-ins, • APS performs face-to-face interviews with VA’s, • APS collects information from collateral sources in-person or via phone, email, and fax.
Alleged Perpetrators	<ul style="list-style-type: none"> • APS attempts face-to-face interviews with alleged perpetrators, • APS will notify the alleged perpetrator of a substantiated finding and hearing rights via letter.
Attorney General’s office	<ul style="list-style-type: none"> • APS phones, emails, faxes, and communicates in-person with our partners within the AAG office as appropriate on a case by case basis.
DSHS partners: HCS, CPS; RCS; MH; DDD; Home Care Quality Authority; Other state agencies; Other social service entities (AAA)	<ul style="list-style-type: none"> • APS phones, emails, faxes, and communicates in-person with our partners within DSHS as appropriate on a case by case basis, • APS provides training on VA abuse per administration request.
Law Enforcement, Prosecutor	<ul style="list-style-type: none"> • APS receives/sends information via email, fax, phone, and in-person situations, • APS provides training on VA abuse per department request.
Tribes	<ul style="list-style-type: none"> • Liaison work at field office level to develop or streamline processes via MOUs. • APS receives/sends information via email, fax, or phone per MOU.

P.1b (4) Key partnering relationships and communication:

Regional Resource Teams: APS hosts Regional Resource Teams to facilitate relevant multi-disciplinary, multi-agency coordination and collaboration on difficult cases for shared decision making and problem solving. Members may include mental health, case managers, nurses, medical personnel, law enforcement, animal control, and other entities relevant to a particular case.

Policy/Rule Development and Review: APS routinely solicits comments from customers, partners, stakeholders and collaborators in policy and rule development.

Cross-Program Investigations Protocol: In 2003 APS, RCS, and the DSHS Juvenile Rehabilitation Administration, Health and Rehabilitation Services Administration, and Economic Services Administration, created a working agreement titled the “Cross-Program Investigations Protocol”. This agreement streamlines timely investigations of alleged abuse and neglect of vulnerable adults and children who receive services from multiple DSHS divisions.

P.2 Organizational Challenges

P.2a Competitive Environment

P.2a (1) Competitive Position

APS competes with all of state government for funding and receives minimal federal Medicaid funding to carry out program responsibilities. APS, as with any other program in HCS, also competes with other DSHS programs for limited state funds to sustain its base funding and request new funding. APS exists within ADSA, which is not a revenue-producing organization. Currently, no national law, standards or federal oversight exist for the APS program. Therefore, each state has created its own unique program based on state laws, funding and need.

APS has expanded significantly, both in number of staff and number of referrals from its beginning in the 1980’s to the present time. (See Figure P.2-1.) The program is mandated to provide investigative and protective services through statutory authority (Chapter 74.34 RCW) so the risk of business being diverted to private agencies is minimal.

Figure P.2-1 Statewide APS Staff--Historical/Current

Historical	Current
Minimal APS intake and investigative staff in some regions; no APS specialists; APS consisted of 1 social worker & intake was combined with other HCS intake calls	90 APS intake workers and investigators who receive reports, conduct investigations & provide protective services.
No Regional Program Managers; APS worker supervised in a unit of workers providing Home & Community Services	6 Regional APS Program Managers and 8 Regional Supervisors who provide supervision, program implementation, quality assurance, and community training specific to APS.

No Legal Benefits Advisors/Attorneys	6 Legal Benefits Advisors/Attorneys who represent the department in administrative hearings and provide consultation.
1 headquarters APS Program Manager	3 headquarters APS Program Managers who develop and implement policy, procedures, statewide staff and community training and quality assurance.

P.2a (2) Key Success Factors

APS measures its success through performance measures including timeliness of complaint investigations (Figure P.2-2). These measures focus on the core mission-to protect vulnerable adults. The data is reported to the Governor and the Secretary of DSHS basis as part of the Government Management and Accountability Program (GMAP). It is monitored routinely within HCS.

Figure P.2-2 CY 2007 APS investigations (GMAP measure)

Priority description and policy for response time	Number of reports	Percent of total reports	Percent of timely response
High: Respond within 24 hours. Serious or life threatening harm is occurring or appears to be imminent.	289	2.6%	99.7%
Medium: Respond within 5 working days. Harm that is more than minor, but does not appear serious or life-threatening. It may be past, present or in the future.	5,919	52.7%	98%
Low: Respond within 10 working days. Harm that poses a minor risk to health or safety. It may be past, present or possible in the future.	5,014	44.7%	98.3%
Totals	11,222	100.0%	

P.2a (3) Comparative and Competitive Data

There is no data available on a national level to compare Washington’s APS program to that of other states. Definitions, program scope, processes and state law are different for each state, making direct comparisons impossible. However, senior staff at headquarters and regional levels can access national databases that permit the sharing of information regarding abuse, neglect, and exploitation of vulnerable adults.

P.2b Strategic Challenges

Adult Protective Services began the formalized process of identifying its strategic challenges in the summer of 2007. On July 18, 2007, headquarters APS Program Managers held an APS Strategic Planning exercise with the regional Program Managers and Supervisors. This was the first in a series of meetings to identify strategic challenges for the APS program including:

- Human resources,
- Caseload growth,

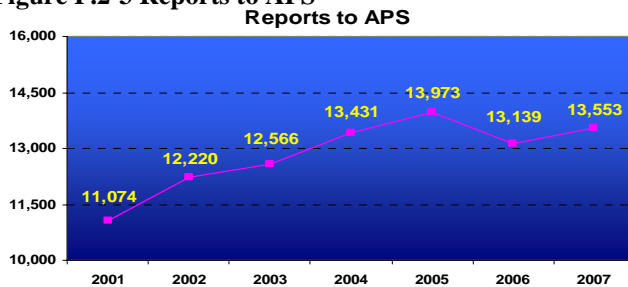
- Fiscal program issues,
- Training,
- Coordination,
- Legislative issues & Policy issues.

Human Resources: APS experiences fairly constant staff turnover due to increasing demands of this type of work on investigators and intake staff. The level of complexity of the job, coupled with the lack of adequate number of supervisory and investigative positions create ongoing staffing and caseload management hardship. APS is faced with the challenge of recruiting, hiring and training new staff on a regular basis. This is the most important challenge and primary risk to APS business. (See 7a.)

Caseload Growth: Over the last 5 years (2001-2006), Adult Protective Services has witnessed a steady growth (except for a slight decline in 2006) of reports concerning abuse, abandonment, neglect, self-neglect and financial exploitation. Caseload growth may be attributable to the increase in the population of “baby boomers” now entering the age at which there may be interaction with APS, plus an increase in public awareness of vulnerable adult mistreatment. The increase in intakes, investigations and due process activities (see 7a,) coupled with the increased complexity of cases (see figure 7.8) has stretched APS program resources. (See Figures P.2-2 & P.2-3.)

About 32% of all APS investigations are on behalf of vulnerable adults under age 60 living in the community, while 68% are 60 and older. The coming influx of baby boomers over 60 will significantly impact the caseload and ability to adequately perform duties without additional resources.

Figure P.2-3 Reports to APS



Fiscal: APS’ fiscal challenges play a role in the future improvement and success of the program. Strategic planning sessions on recruitment and retention issues have cited the need to reclassify APS social worker positions to increase salaries. Additionally, APS needs to increase the number of supervisors and front line APS staff to deal with caseload growth and the increasing complexity of cases. The program also lacks adequate funding for dedicated paralegal staff and emergency funds for clients. Program funding should be moved from part of the administrative budget to a dedicated line item.

Because of the unpredictability of legislative decisions and competing DSHS and state interests, senior leaders are limited in their ability to initiate these program changes.

Data Management System: The APS data management system has not evolved with the program. The system

requires significant upgrades to capture all the data needed to adequately measure current program performance. Interim update is scheduled for 2008.

Training: Once hired, new staff require significant training before they can carry a full caseload, which places more of a burden on supervisors and veteran APS investigators. The APS program has inadequate resources dedicated to statewide training with only one Program Manager at the headquarters level to provide statewide training to APS staff across 6 regions. Currently, the only option available to address this deficit is to utilize APS field staff as trainers. This impacts their ability to perform their usual duties, and shifts some of their workload to their peers.

Coordination: The evolution of the APS program over the past two decades has created fairly complex relationships with various entities. APS constantly interacts with: law enforcement officers (who often do not understand the VA law), prosecuting attorneys who (more often than not) do not prosecute cases of financial exploitation, banking institutions which are increasingly aware and alarmed (yet still reluctant to act) on the financial exploitation experienced by their customers and the mental health system that does not have the resources to find the proper placements for those VAs with mental health issues. This is just a partial list of increased coordination expectations.

Legislative Issues: Originally written in 1984, the current law that governs APS could be amended to clarify the definitions of vulnerable adult and the different abuses covered in the law. We believe authority and funding to provide additional protective and preventive services would decrease the incidence of abuse among vulnerable adults.

Intake and Screening Issues: Currently, there is a huge variance across the 6 regions in the way APS screens reports of abuse. Regional discretion, combined with variation in how reports are entered into the system, has created a situation in which some regions screen-out 30% of their referrals while other regions screen-out 6 to 9%.

P.2c Performance Improvement System

APS continually seeks to improve processes and staff performance with monthly manager meetings and staff trainings. These meetings occur to research issues, analyze data, problem solve and develop/make policy recommendations.

Field staff also have the opportunity to discuss, review and/or evaluate proposed policies or enhancements to the program. This draws on the expertise of line staff and involves APS across the state.

Finally, a new QA system for APS is being rolled out which will yield vital information for senior leaders regarding individual and regional performance, historical and current trends, gaps and/or barriers. The tool will be used to evaluate progression of skill learning, accuracy, policy compliance and supervisory application of policy. Given the program’s limited resources, accomplishing these goals will be difficult.

1. Leadership

How do your senior leaders lead? How do you govern and address your social responsibilities?

Senior leaders lead by promoting the APS vision, mission and values. Their approach includes meeting with and listening to APS managers and field staff, and setting clear performance expectations and goals in staff evaluations. Senior leaders focus their attention on the needs of the APS program through strategic planning. They are committed to providing additional professional APS staff to the workforce as well as supporting the growth of specialized training for APS staff.

Senior leaders actively promote the APS core values of objective, timely and thorough investigations. APS promotes an ethical culture beginning with senior leaders who model ethical behavior and establish meaningful expectations for staff to adhere to legal mandates. This is governed through internal program policy and state employee policy.

Senior leaders assure that both regulatory and legal requirements are achieved through a number of activities. These include APS Supervisor/APS Program Manager review of line staff investigations, the use of APSAS (the online documentation system), use of multiple databases by line staff for thorough investigations, and the implementation of statewide APS quality assurance monitoring.

Beyond APS core work, supervisors and field staff practice social responsibility through community education, trainings and outreach. APS staff educate the community on how to advocate for vulnerable adults, and when to contact APS for investigation. APS staff collaborate with community partners on vulnerable adult cases and issues, and support the overall safety of the community. APS often participates in national research studies regarding vulnerable adults.

APS staff regularly demonstrate their commitment to social and community responsibility through participation in the annual state Combined Fund Drive (CFD), food and clothing drives, and fundraisers for field emergency supply kits for clients. APS staff also participate in state environmental programs including commute trip reduction and in-office recycling. These social awareness activities are supported by senior leaders through their on-going reminders and posting of this information within HCS.

1.a How do your senior leaders set and deploy your organization's vision and values throughout the organization, workforce and stakeholders?

APS senior leaders weigh the balancing of current program needs with projected needs by communicating with the field staff and APS program management. This communication system identifies changes needed in the organizational structure, resource allocation and program changes to ensure optimal work performance.

The senior leadership team collaboratively develops and deploys the vision and values of APS. The ADSA Assistant Secretary, HCS Division Director, Assistant Director, HQ Program Managers and 6 Regional Administrators (RAs) comprise the senior leadership team for APS. The RAs are responsible for the day to day management of APS regional offices including regional Program Managers, supervisors and staff. APS HQ Program Managers provide policy development, training, and quality assurance oversight to continuously promote the shared vision and values of the APS program.

APS uses community feedback, meetings, press releases, APS website, annual Elder Abuse Prevention month, and brochures to communicate APS vision and values. Public confidence in the APS program is heightened by senior leaders and local staff networking and coordinating with others who serve vulnerable adults. They educate the community with information about prevention of vulnerable adult abuse, neglect, self neglect, abandonment, financial exploitation and protective services.

The Governor's office and ADSA's senior leaders track key performance measures including:

- Response times – from assignment to investigation,
- Case investigations that last longer than 90 days, and
- The number of substantiated APS cases.

Several measures are also used to manage APS staff workload including the number of intakes, open cases and closed cases.

1.b How do senior leaders employ a governance system to assure regulatory and legal compliance and ensure ethical behavior?

APS core work is highly sensitive in nature. The senior leaders model ethical behavior and expect managers and staff at every level to do the same. If violations occur at any level personnel policies and procedures are in place. Once implemented, the policies allow for disciplinary action.

All APS staff annually review and certify their understanding of ethics and confidentiality. Supervisors, Program Managers and senior leaders are required to take training in all areas cited above as well as just cause disciplinary practice. These types of training help supervisory/management staff recognize and maintain an ethical environment as well as providing them with the ability to respond quickly and appropriately should any issues arise.

Examples of systems that are used to assure regulatory and legal compliance include:

- Computer systems with password and time-out protection.
- Computer systems requiring daily certification of the understanding of Policy.
- New employee reference checks and orientation.

- Multiple avenues for client feedback through Supervisors, Program Managers, Regional Administrators and Headquarters staff.
- Supervisory review and consultation.

APS staff work with confidential information throughout their investigative process. APS has both protocols and policy in place for all steps of the investigative process, including the detail involved in the reporting of APS findings. Access to APSAS is restricted with user name and password protection. APS investigations are confidential and clear policy is in place regarding the due process for alleged perpetrators and APS findings.

Examples of policies that ensure public trust include:

- The prohibition of APS staff from investigating a case involving a family member, friend or another APS staff within the same region.
- The prohibition against using APS tools or other databases for anything other than APS business.

APS policy and procedures address organizational and legal risks associated with the provision of Adult Protective Services and its operations. Complete documentation helps APS mitigate legal risk when high profile cases develop.

Senior leaders require APS staff to attend meetings and trainings covering performance expectations, laws, regulations, policies, confidentiality, and ethical behavior. Additionally, information is provided to staff concerning mandatory reporting, whistleblower protection, sexual harassment and annual computer security. Each region tracks employees' compliance with training mandates. In this way, senior leaders foster a governance system that is geared toward providing APS staff with a solid understanding of their legal and ethical responsibilities.

All staff are expected to adhere to regulatory and legal procedures. Confidential information that APS staff have access to is protected through clearly established, written controls. Violations regarding regulatory and/or legal procedures result in formal actions to correct the behavior and apply appropriate disciplinary action(s).

APS deploys leadership and ethical behavior by evaluating senior leaders annually using the performance and development plan reports. This includes RAs, the Assistant Director and the Director. Senior leaders take the information provided in their performance reviews to improve leadership, organizational and/or ethical performance. These may be accomplished through advanced training, consultation or staff feedback/survey.

APS supervisors use monthly meetings and annual employee evaluations to outline performance expectations. The APS program is under constant scrutiny by the general public, media and APS stakeholders. Due to these issues and the confidential nature of APS services, it is an imperative that leaders and staff of the program maintain ethical conduct at all times.

Management accountability is achieved through a variety of actions. RAs balance the regional APS program budget and increasing need for resources for APS with the needs in other program areas under their management. RAs meet with regional APS Program Managers to discuss program and budget issues as they arise.

Because ADSA is not a revenue-producing organization, there are limits of what senior leadership can accomplish. Due to a fixed allotment of FTEs as well as a fixed budget, any increase to the budget would need approval by DSHS budget, OFM, the Governor's Office and the Legislature.

Senior leaders regularly monitor the regional budgets through review of fiscal reports. The six RAs also meet monthly with the Division Director and Assistant Director. Discussions center on management decisions and fiscal accountability. RAs are in constant contact with the Assistant Director to apprise him of examples of cost effectiveness with regards to APS, increases in APS operational effectiveness and outcomes of any regional internal audits, thereby working to improve efforts to be a more operationally and fiscally accountable organization.

2. Strategic Planning

How do you develop and deploy your strategy?

2.a What are your key strategic objectives and action plans?

In APS, key strategic goals focus on improving the processes of intakes, screen-outs, investigations and provision of protective services, through investments in staff training, technology, quality assurance monitoring and performance management.

Key APS objectives for the next 5 years include: improving the laws and legal support for the APS Program; continued refinement of the quality assurance process; collecting more detailed data; hiring qualified, committed staff; increasing available resources to increase protection and prevention strategies; increasing shared-decision making; and increasing positive media attention. Strategic action plans are listed for the top 3 strategic objectives in Figure 2.1. Due to space limitations, this is a condensed version of action plans.

2.b How do your strategic objectives address strategic challenges and strategic advantages?

Figure 2.2 displays how the objectives address the top three strategic challenges currently facing APS.

2.c How do you develop and deploy action plans throughout the organization to achieve your key strategic objectives?

APS develops action plans through the joint efforts of headquarters and regional staff. Local needs are communicated up the chain of command early on in the strategic planning process. Stakeholders are included as

appropriate. This development of action plans always includes senior level managers and it is considered the beginning of plan deployment.

The involvement of field staff and stakeholders is key to the success of the strategic plan and the implementation of the action plans. APS Program Managers meet monthly for policy updates through HQ APS Program Managers. Regional staff also learn about the strategic objectives and action plans from senior leaders in a variety of ways. These include Assistant Secretary/Director's all-staff memos and Director/Assistant Director field office visits, information posted on the ADSA intranet and discussion within APS with staff and managers who have participated in the strategic planning process and/or pilot projects.

Once the strategic action planning is completed and the overall strategic plan is validated, the senior leadership team including HQ and regional APS Program Managers develop specific APS action plans for deployment throughout the state.

Most APS strategic action plans are funded and evaluated in-house, with some of these plans implemented on a pilot basis in a region or work unit. This provides data for APS to make informed decisions about broader deployment and ensure adequate resources are available should statewide deployment occur.

Figure 2.1 Top Three Key APS Strategic Objectives and Action Plans

<p>1. Strategic Goal: Leverage and/or create additional resources to better serve clients and provide critical investigation and protective services. Strategic Objective: Optimize available human resources; recruit and retain qualified, committed staff. Increase FTEs; add case management staff and specialized staff such as forensic accountants</p>		
<i>Actions</i>	<i>Who</i>	<i>When</i>
<ul style="list-style-type: none"> • APS is participating in HCS work load study (6-08) • Continue to work with DSHS, governor's office and legislature to increase funding for staffing levels and other resources. 	HCS Director, HQ APS Program Managers, involve stakeholders	Projected dates: Summer 2008 to Spring 2010
<p>2. Strategic Goal: APS maximizes ongoing performance reviews to continue to offer the highest level of services to clients Strategic Objective: Implement and continue to refine new quality assurance monitoring process. (Also see Objective above.)</p>		
<i>Actions</i>	<i>Who</i>	<i>When</i>
<ul style="list-style-type: none"> • Begin monthly review of the quality assurance key indicators by senior leaders for current and future issues. • Seek feedback from staff and management on improvements to the quality assurance process. • Use results to improve policy, training of staff, and consistency in application of policy • Increase in staffing levels to allow time for quality work and specialization. 	3 HQ APS Program Managers & HQ QA Policy Manager 3 HQ APS Program Managers	Projected begin date 03/03/08 Statewide Regional visits- 03/03/08-12/31/08
<p>3. Strategic Goal: Use data to improve services to clients Strategic Objective: Collection of more detailed data with improved software and useful reports</p>		
<i>Actions</i>	<i>Who</i>	<i>When</i>
<ul style="list-style-type: none"> • Establish upgraded, multi-faceted documentation system. <p>Upgrade of current APS data management system to generate reports needed to adequately measure performance and inform managers on system issues.</p>	HQ APS Program Manager & identified IT-APS Program Lead (for all actions)	Projected date January '09 (for all actions)

Figure 2.2 Key strategic challenges, with objectives & action plans that address them

Key APS Strategic Challenges	Strategic Objectives	Sample Action Plans
<ul style="list-style-type: none"> Increasing difficulty recruiting and retaining qualified staff. Need to create specialized expertise in financial exploitation cases (forensic financial workers). 	<ul style="list-style-type: none"> Optimize available human resources Recruit and retain qualified, committed staff 	<ul style="list-style-type: none"> Continue to request additional FTEs through DSHS, governor and legislative processes. Work toward reclassification and salary increase for the APS SW series. Increase ratio of supervisors to staff especially in rural areas. Expand APS academy (training).
<ul style="list-style-type: none"> Lack of adequate resources to address increasing workloads and complexity of cases. Lack of adequate equipment to conduct investigations. Lack of specific funding for incidentals for APS clients. Lack of component of APS Program that provides respite beds for clients. Lack of Federal funding for prevention activities. 	<p>Leverage and maximize resources to better serve clients</p>	<ul style="list-style-type: none"> Establish paralegal support for staff. Increase in adequate investigative equipment, e.g. camera with dictation ability. Establish dedicated APS emergency beds in adult family homes and nursing homes. Establish system of on-call caregivers. Develop means to tap into Domestic Violence funds for APS.
<ul style="list-style-type: none"> Lack of authority and funding to provide services to reduce/eliminate future abuse. Significant variance in application of policy related to screen outs, intake, priorities, and investigation outcomes. Difficulty in communicating success to the public—law on confidentiality does not allow APS to give details or clarify misconceptions. 	<p>Create efficiencies and maximize performance</p>	<ul style="list-style-type: none"> Establish APS case management separate from investigation function. Increase use of quality assurance to create more consistency and identify program improvements. Work to gain funds to implement case load ratios that support ability to manage complexity of cases. Establish a caseload standard of 10 cases per month.

3. Customer and Market Focus

How do you obtain and use customer and market knowledge? How do you build relationships and grow customer satisfaction and loyalty?

3.a Who are your key customers or key customer groups?

Key customers of APS are vulnerable adults (VAs) as defined in law, mandated and permissive reporters and law enforcement. APS interacts with multiple stakeholders as it fulfills its mission of protection of vulnerable adults (Figure 3.1).

Figure 3.1 Interactions with Customers/Stakeholders

Interaction	Customers/Stakeholders
Initiates APS referral	<ul style="list-style-type: none"> Vulnerable Adult. Mandated Reporter. Permissive Reporter. Law Enforcement. Other Investigative Bodies. Department of Health, Senior Information & Assistance.
Provides information to assist APS interviews/investigations	<ul style="list-style-type: none"> Vulnerable Adults. Collateral Contacts. Mandated Reporter. Permissive Reporter.

Interaction	Customers/Stakeholders
	<ul style="list-style-type: none"> Collateral Contacts. Other Investigative Bodies Alleged Perpetrator.
Collaborates regarding evidence collection during APS investigation	<ul style="list-style-type: none"> Law Enforcement. Residential Care Services ADSA. Child Protective Services DSHS. Medicaid Fraud Control Unit.
Participates in administrative hearing process, regional resource teams, panel reviews and consultation with APS staff	<ul style="list-style-type: none"> Assistant Attorney General.
Legally detains alleged perpetrator	<ul style="list-style-type: none"> Law Enforcement.
Serves legal documents	<ul style="list-style-type: none"> Law Enforcement.
Files criminal actions in prosecution of crimes against VAs	<ul style="list-style-type: none"> Prosecutor.
Holds hearings on challenged APS substantiated findings and issues	<ul style="list-style-type: none"> Washington Office of Administrative Hearings.

Interaction	Customers/Stakeholders
administrative orders	
Provides relevant information regarding their target population which assists APS investigations	<ul style="list-style-type: none"> • Advocacy Groups. • Tribes. • Area Agency on Aging.
Provides both funding and support to enhance the APS Program.	<ul style="list-style-type: none"> • Legislature. • Taxpayer.

3.b How do you determine key customer requirements, needs and changing expectations?

Adult Protective Services can best determine key customer requirements, needs and changing expectations through a process of listening and consultation. Senior leaders often hear about the needs and expectations of key customers through frontline APS staff. The staff interact with key customers and hear their issues and concerns on a daily basis. This interaction is typically the first involvement the key customer has with APS and it can occur through a variety of avenues. (See Figure 3.2.)

Of course, differing relationships (vulnerable adult versus alleged perpetrator) require notably different listening and consultation strategies. The relationship strategy may not be possible with the alleged perpetrator as it is with other stakeholders. Services are always explained to the vulnerable adult and their consent must be obtained to provide protective services. Also, APS contacts people who make referrals within a specified period of time to let them know of APS plans for investigation.

Other well-established ways APS listens to the needs of key customers include participation in ADSA strategic planning, conferences, workgroups, trainings, multi-disciplinary taskforces/teams, and presentations about adult abuse. APS also establishes contacts through the web, local toll free numbers, a statewide toll-free number, and TTY numbers.

Monthly APS Program Manager meetings focus on key customer requirements and needs as a part of the agenda. Trends are reviewed and strategies developed to ensure both key customer satisfaction and vulnerable adult safety.

It is critical that APS receives referrals from the community in order to meet its mission to protect vulnerable adults. Without focusing on and understanding key customer expectations and trends, APS could see APS referrals decrease. The decrease would not signal a decrease in the number of vulnerable adult being abused (which would continue to occur) rather it would signal a decrease in reporting to APS by the community.

If key customers are dissatisfied with actions taken by APS line staff, their issues can be reviewed by the APS Supervisor and/or APS Program Manager. Key customers can also contact senior leaders in the field offices and at

headquarters. At times, dissatisfied customers contact DSHS constituent services and/or the news media with concerns.

Both the change in APS caseload growth and the complexity of relationships APS has with various entities outlined in the strategic challenges section of the Organizational Profile, highlight the changing customer needs and expectations APS has experienced in the last several years.

The caseload growth, which may be attributable to the increase of “baby boomers” along with more extensive, intense and involved interaction with multiple entities, drives APS to constantly review and critique the satisfaction level of its key customers. This occurs when APS Program Managers (both at the regional and headquarters level) as well as the APS Supervisors have direct interaction with its key customers.

3.c How do you build relationships to acquire customers, meet and exceed their expectations, to increase loyalty and repeat business and to gain positive referrals?

At the regional level, APS provides education and information to DSHS employees, law enforcement, tribes, the banking industry, prosecutors, advocacy groups and the general public. Education and information fulfill multiple needs including the establishment of solid working relationships with many of these entities.

Through prompt responsiveness to both needs and complaints, as well as conducting objective, timely, thorough and high quality investigations APS meets and/or exceeds customer expectations. To maintain responsiveness and understand and act on problem areas, APS needs additional resources, including increased staff and an updated data management system with increased qualitative data.

Even though the relationship with the customer may be relatively short-term, if there is a positive interaction, then APS gains a positive image among key stakeholders and the community at large. Increased consumer confidence in the APS program contributes to consumer willingness to contact APS and report vulnerable mistreatments.

Senior leaders understand that investigative staff play a crucial role in building and maintaining customer satisfaction with APS services. Satisfaction is built on the trust that the key customer places in the program and its ability to assist the customer. If the customer does not feel that their issues have been adequately addressed, they may turn to the news media. Due to strict confidentiality laws, APS staff cannot discuss their actions with the media.

Many tools are online for the public, including information on adult abuse and prevention, the APS brochure on abuse and neglect (“Partners in Protection: A Guide for Reporting Vulnerable Adult Abuse”), the laws to protect vulnerable adults and information on risk factors for abuse. ADSA also produces a Fact Sheet titled “Protection of Vulnerable Adults” that provides basic information on abuse.

DSHS has made it easy for the general public to report suspected abuse by establishing the toll-free number 1-866-ENDHARM (1-866-363-4276; TTY 1-800-737-7931). Callers are connected to the appropriate APS office.

DSHS also has a free education kit for the general public to learn how to help prevent the abuse, neglect, or financial exploitation of vulnerable adults. DSHS will mail an Adult Abuse Prevention kit to anyone who calls Aging and Disability Services Administration's toll-free number 1-800-422-3263.

Key customers to APS have a variety of methods in which to communicate and interface with APS.

Face to Face meetings, case staffings, and community outreach events are one method that allows APS staff to interface with APS key customers. In addition to standing monthly meetings, APS staff perform numerous community outreach services and education throughout their daily investigation work. APS staff often interact with multiple customers simultaneously to conduct their investigations in the field. This face to face contact builds trust within the community and is key to completing thorough APS investigations.

Telephone intakes and referrals to APS are the primary method of contact to multiple stakeholders and customers. APS intake staff across the state cover the phone intakes Monday – Friday 8-5. After hours calls are referred through the 1-866-END HARM intake through Children's Administration. Callers to the after hours number are contacted by APS intake staff the next business day.

Electronic Communication is also an essential method of communicating with APS customers. APS interfaces with multiple state, county, and city databases using memorandums of understanding (MOU) to access confidential systems for the purpose of APS investigations and informing state agencies of alleged perpetrators with licenses of substantiated findings by APS. In addition to computer systems, e-mails and faxes are also key methods of electronic communication.

4. Measurement, Analysis, and Knowledge Management

How do you measure, analyze, and then improve organizational performance?

4.a How does your senior leader and your organization measure, review and improve its performance?

Adult Protective Services uses several internal databases and methods to collect data and measure and improve performance. Primary tools and methods for reviewing performance include:

- The Adult Protective Services Automated System (APSAS) including self-serve reports.

- Reports produced by ADSA Decision Support Office (DSO) and DSHS Research and Data Analysis (RDA) units.
- APS Quality Assurance Monitoring.
- Management/leadership team input.
- Internal and external panels/teams.
- External stakeholder input.
- Employee performance development plans.

APSAS: APS implemented the APSAS data management system for investigation tracking and data collection in 2000. Prior to this time, collection, tracking and measurement for improvement was only documented by hand. The system includes policy on documentation, plus instructions, illustrations and steps so the user is able to:

- Enter an intake report into the system.
- Assign a case.
- Navigate the case, view and understand the information expected in each field.
- Print reports.
- Close the case.

APSAS assists APS staff in completing their work, however it needs to be improved for increased functionality and reporting purposes. Some types of data needed for decision-making cannot be captured in the system, therefore if trend data is needed, it must be hand tabulated. Another limitation is that APSAS is unable to save some of the reports it creates – e.g., law enforcement referral and outcome reports – so they have to be printed and placed in a hard file. Many times reports are hand calculated because APSAS does not have the capacity to gather or query the necessary data. The limitations of APSAS impede the ability to improve the performance of the APS program and align APS' operations with strategic objectives.

Decision Support Office APS Reports:

Key Performance indicators: Senior leaders rely on APSAS reports and data provided through the ADSA Decision Support Office (DSO) to analyze information and make decisions regarding the APS program. Senior leaders at headquarters and regionally have access to a drill-down graphical format in the DSO system.

The DSO APS reports allow leaders to track achievement of the key APS performance indicators including:

- Response times-from assignment to investigation.
- Case investigations open longer than 90 days.
- The number of substantiated APS investigations.

The DSO system also provides information on the numbers of case assignments, open/closed cases, investigations, services, statewide dispositions and summaries, and field office supervisory and protective services worker level reports.

As stated in the Strategic Challenges (P.2b) APSAS needs significant upgrades. Accurate and valid measurement of performance is lacking due to the inability of the system to capture certain kinds of data such as:

- Why cases remain open longer than 90 days.
- Why a case is screened out.
- Whether the death of a client is due to suspicious activity.

Database change requests typically take years to be programmed and implemented in the database. Currently the system relies on regions monitoring their own work and there is little oversight to assure consistent application of policy. This creates incongruence between policy, procedure, and support in the APSAS database. Additional staff at the HQ level are needed to provide consistent program oversight for regions to follow policy.

Senior leaders have initiated a plan of action to address upgrade quality and availability of data from the APSAS system. The approach will be two-fold. Regional management staff have been directed to provide their prioritized APSAS changes/upgrades that need to occur for compliance with policy. Once provided, headquarters management will work with designated IT staff to complete changes/upgrades as an interim solution.

During the next biennium, senior management will make a request for funding that addresses the need to completely rebuild the APSAS system to accurately measure and analyze performance and manage organizational knowledge in such a way that it will drive improvements, achieve strategic objectives and anticipate and respond to both organizational and external change. However, improvements to APSAS are entirely dependent on approval at many levels within DSHS and the Governor's office, as well as funding allocated by the Legislature.

APSAS Self Serve Reports: The APSAS self-serve reports were developed as a tool to assist with workload management. This tool is available to all APS staff but looks slightly different depending on the user's role. Headquarters management can call up state-wide information for reports, regional APS management can call up region-wide (or by supervisor) information for reports and individual APS staff can call up their own assigned caseloads for these reports.

APS Quality Assurance (QA) Monitoring Tool: A new APS Quality Assurance Monitoring Tool used for monitoring and analysis of intake, investigations, notification, protective services and documentation will assist senior leaders as they guide APS' process management toward achievement of its strategic objectives. QA cannot be fully implemented until additional resources are available.

The APS QA Tool was developed and implemented in late 2007 to provide a standard statewide method for reviewing and monitoring APS. While data gathering has begun, there is not enough data for analysis yet. APS QA will be one of the critical tools in the performance improvement system for APS.

The monitoring will provide a consistent approach statewide related to all activities within APS. These include intake and investigations of allegations of abuse, abandonment, neglect, self-neglect, financial exploitation, and the provision of protective services. Headquarters

Program Managers will be able to monitor statistically valid samples of screen outs. These will provide senior leaders with quality data to drive improvements. Regional Managers, through their use of the APS QA system, will be able to provide senior leaders information that supports organizational planning and performance improvement.

Management/Leadership Teams: Management/leadership team meetings include monthly APS Program Manager meetings and Regional Administrators working with Program Managers and supervisors. These provide the opportunity to meet and discuss caseload growth and data specific to APS so that within each region resources may be shifted to where the need is the greatest. The regions have also developed tools to manage and track regional data and trends that APSAS cannot provide.

Internal/External Panels/Teams: Some regions have an internal review team for timely review and acceptance or change of a recommendation to substantiate an allegation. All information regarding the review, including the final decision, is entered into APSAS. Senior leaders also look to the APS Regional Resource Teams, a key partnering relationship (see P.1b(4)) as an entity that provides input from each member (both internal and external to APS) to support organizational decision-making and innovation for the most challenging APS cases. APS staff use these opportunities to educate, build rapport, and receive input from professionals who work on APS cases.

Employee Performance Evaluations: Senior leaders, regional management and supervisory staff measure, analyze and improve organizational performance through employee performance development plans and evaluations. The aim of this type of measurement is to assess the individual worker's process toward provision of service to the client, thereby achieving the key mission: protection of vulnerable adults. If analysis, during the evaluation, reveals that there is a need for improvement, then training, monitoring or coaching may be provided. This process of goal setting between the employee and supervisor is key to ensuring the objectives of the staff development plan are met. Goals are adjusted yearly to avoid areas of poor performance. Ultimately, the evaluation provides the basis for the workers understanding of how their work process aligns with APS' strategic objectives.

4.b What are your key organizational performance measures?

ADSA-APS has several measures of organizational performance, at both the agency and program level. Figure 4.1-1 is a sample of a few of our key measures and systems showing linkages to results.

Figure 4.1-1 Sample Key Measures/Systems/Results

SAMPLE MEASURE	COLLECTION METHOD/SOURCE	RESULTS
Timeliness of complaint investigations	<i>Source:</i> APSAS database/ GMAP goal of 100% completion of complaint investigations within mandatory timeframes.	CY 2007 High Priority-99.6% Medium Priority-98% Low Priority-98.2%
Percent of financial exploitation & self neglect APS cases open 91+ days	APSAS database, Q4 December 2007	78%
Response rate to employee survey	2007 Employee Survey	84% response rate in HCS

Analysis of the employee survey is one way to support organizational performance. ADSA/HCS is rated higher than the DSHS average on 79% of the survey questions. HCS improved ratings on 68% of the survey items from 2006 to 2007. After each survey, HCS leadership develops action plans to respond to concerns identified in the survey. (See 5.a.)

4.c What comparative data do you use to support decision making and evaluate organizational performance?

As indicated in P.2a(3), data on a national level to compare the Washington state APS program with that of other state’s APS programs is extremely limited. Federal law and national standards for APS programs do not exist. Other states include different target populations and use different definitions for types of abuse. This makes comparisons with other states difficult as the programs are not standardized on any level. Some information is available through studies and association work. Sharing of information across states often occurs when HQ Program Managers research topics related to investigations and protective services. (See 7b.)

Regional APS managers and supervisors obtain comparative data internally through the discussion and consultation with their peers around the state. This allows for:

- Ability to learn about best practices for investigations and protective services.
- Development of policies and procedures.
- Consideration of changes, which ultimately improve performance and create a better understanding of APS process.

5. Human Resource Focus

How do you engage your workforce to achieve organizational and personal success? How do you build an effective and supportive work environment?

5.a How do you determine key factors that affect your workforce’s commitment to accomplishing your organization’s mission and how do you assess workforce engagement?

We engage our workforce to accomplish the mission of APS and ensure personal success through the use of communications, training, and recognition of performance. Careful and thoughtful attention, review and modifications within these areas provide for a balanced approach to engaging the APS workforce to achieve both organizational and personal success.

Communication/Technology: As part of HCS/ADSA, Adult Protective Services is provided with information through a variety of mechanisms including intranet (Sharepoint), internet, monthly Assistant Secretary messages through the employee newsletter, unit meetings, all-staff meetings, all-staff e-mails, memos from senior leaders and APS program e-mails. Technology, such as cell phones, laptops and pagers are provided to APS employees.

APS employees from line staff up through program management level participate in strategic planning at unit meetings and monthly statewide Program Manager meetings. This participative approach and open communication style contributes to the workforce’s commitment to successfully accomplish its mission.

Employee Satisfaction: We have built an effective work environment through the use of many techniques, one of which is the employee survey, completed every other year. (See 4.b.) We use the employee survey to promote workforce engagement and to improve support for employees. The 2006 and 2007 employee surveys had wide-spread participation and extensive follow-up. These surveys are part of a survey of all state employees customized to meet the needs of each program. Senior leaders respond with action plans tailored to their employees’ responses. 84% of HCS Division employees completed the survey in 2007. In addition, senior leaders hold face to face discussions with APS field staff annually to discuss employees’ concerns and issues. One recent result of these discussions was the development of safety training for APS employees.

HCS senior management responded to the 2006 employee survey by creating and sending employees an Action Plan and quarterly progress reports. The Action Plan focused on employee issues identified by the survey: 1) knowing how HCS measures success, 2) use of data to make decisions and measure success, and 3) employee involvement in decision-making. Management used quarterly “supervisors’ talking points” and the agency e-newsletter to connect the work of the employees with the mission, strategic plan and performance measures.

Employee Training: To ensure that our workforce has the philosophies, tools and technologies to support our mission and to ensure their personal success we established the APS Training Academy in 2001. In 2005, the HCS Director convened a workgroup to review and revise the existing curriculum and develop a system for training new APS employees closer to the date of hire. Because of the breadth and differing focus of training topics, the workgroup developed a two-pronged system of headquarters and regional training. (See Figure 5.)

Figure 5.1 Two-Pronged System: APS Training Academy



Formal training within APS begins with the employee’s participation in the 3 ½ day APS Training Academy at headquarters. When the curriculum was revised in 2006, all APS staff and RAs (114) attended this training. The academy is now scheduled quarterly for newly hired APS staff and Legal Benefits Advisors, and for experienced staff referred by supervisors. The headquarters training focuses on APS policy with some training on skills and general knowledge. The regional training focuses on reinforcing policy, knowledge in specific topic areas and skill development. To reinforce staff safety, participants are also required to take the online APS Worker Safety Training, Worker Safety Quiz, and Mandatory Reporter training.

Employees of APS have opportunities to participate in workshops, conferences, seminars and other trainings both internal and external to the agency, thereby strengthening their commitment to the protection of vulnerable adults.

Based on positive staff feedback on the Training Academy, a goal of the APS program is to expand the training offered by HQ Program Managers and to enhance the regional training topic requirements with a focus on local issues and information. An additional 3.5 days of training will be added for staff starting in September 2008 as resources allow. (See P.2b.)

Employee Recognition/Other Opportunities:

Recognition for a job well done affects the level of commitment employees have to carry out the mission of the program. APS, as a part of HCS/ADSA, is involved annually in the opportunity to nominate and honor extraordinary employees who exhibit exemplary

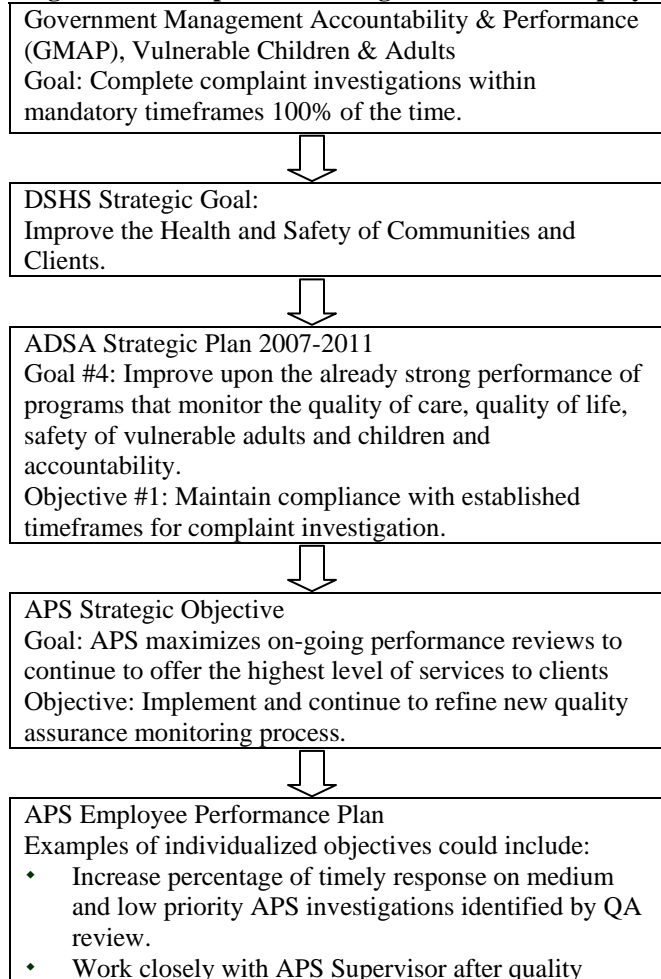
commitment to the mission, customers, and the quality of services provided by APS.

APS employees engage in other opportunities that benefit their communities and create a successful organization through their participation in opportunities with the Combined Fund Drive, the adoption of families during holidays and regular contributions to regional food/monetary accounts.

Employees as Trainers: APS has historically utilized willing employees as trainers, speakers and organizers of conferences, training sessions and workshops around the state. These venues provide APS with the opportunity to share the work, mission and vision of the program with others. Through their motivation to share their expertise about APS, employees are engaged on both an intellectual and emotional level and demonstrate their commitment to the program.

Employee Performance: APS staff desire and deserve to work in an environment in which communication about the employee’s role and performance expectations are clear. The annual Performance and Development Plan (PDP) contains written expectations for performance for the coming year and describes the skills and abilities needed to perform job duties. The other half of the PDP process (evaluation) is the review and assessment of the results accomplished and skills and abilities demonstrated from the previous year. Effective performance management aligns the organization’s goals and objectives with individual performance. (See Figure 5.2.)

Figure 5.2 Example of Goal Alignment to APS Employee



assurance review to correct any errors identified by the monitoring process.

Furthermore, in an organization that achieves organizational success, the performance management system shows an overall strategic plan that cascades down with a clear path connecting the employee to that plan. Employee feedback is solicited regarding performance goals and career advancement during the feedback session of the evaluation process and in the Organizational Support section of the evaluation. Conversations on these issues also occur regularly between supervisors and employees. DSHS requires that every employee will be evaluated annually. (Figure 7.5.)

The annual evaluation serves to retain skilled staff by assessing their commitment to the mission, identifying training needs of the employee to increase their skills and competence, and to measure performance. This becomes critical information to solicit considering that one strategic objective (Figure 2.1) is for APS to optimize available human resources through recruitment and retention of qualified, committed staff.

5.b How do you assess workforce capability and capacity needs, including skills, competencies and staffing levels and how do you manage your workforce capability and capacity to accomplish performance objectives?

Assessment of APS workforce capability and capacity occurs in a variety of ways. Initial assessment of workforce capability begins with the hiring process. Potential candidates for APS positions are interviewed using specific questions that assess current levels of competency for the APS position. Once hired, ability is also measured through the PDP that sets expectations based on program and agency objectives. The PDP annually measures skills, competencies and level of success. Every APS employee has an individual development plan that ensures that employees have the skills and competencies to perform their job duties.

When performance issues surface, the supervisor of the APS employee can address those issues through training, monitoring or coaching. The supervisor works closely with human resources to facilitate and monitor improvement. If disciplinary action is necessary, APS supervisors and managers have received training in all elements of the disciplinary procedure. Supervisors have also received training in other areas essential to mentoring APS staff, including use of the PDP, employee hiring and dismissal procedures and an overview of the statewide collective bargaining agreement.

APS recognizes that competencies which are measurable or observable are critical to success in a job role or function. Through the mandatory attendance of all APS staff at the 3 ½ day APS Training Academy, staff receive training that builds on already established skills, abilities and knowledge in: communications, interviewing, record-

keeping, work management, general knowledge, intake, investigations and protective services.

All APS staff continue to build on their capabilities through feedback provided from, consultation with peers (both within and outside of their region), attendance at unit meetings, and internal and external training events, and annual evaluations. APS supervisors also receive periodic training at the monthly statewide APS Managers meeting. The APS QA monitoring tool will add important feedback when it is implemented.

Assessment and management of capacity to accomplish performance objectives occurs with on-going review by regional and headquarters management staff of the APS workload. APS staff, managers and supervisors, through the Decision Support Office (DSO) access APS reports which show numbers of case assignments, open and closed cases, investigations, services, dispositions and summaries.

Managers and supervisors use the same information to assist with workload management. Managers and supervisors in the field offices can assess for adequate staffing levels and quickly discover where capacity is lacking through 1) Decision Support Office/APS reports, 2) review of cases prior to closure, and 3) more focused monitoring of newly hired APS staff. Through the review of this information, decisions are made at a regional level that may involve staffing level adjustments between units or offices when feasible.

However, APS struggles with constant staff turnover, ongoing staff shortage and increased complexity of the work. High staff turnover is a major risk to the key business of APS. (See 7.a) RAs plan to work with newly available DSHS recruiting staff to focus on APS recruitments. Capacity to assume additional caseload responsibilities suffers while new staff are trained and caseload growth continues to place pressure on how managers assess workforce capacity needs.

6. Process Management

How do you design your work systems? How do you manage and improve your key organizational work processes?

Key work processes are mandated by state law and provide the framework for what APS must do. The Washington Administrative Code (rules) and the APS chapter in the HCS LTC manual provide the policy framework for how the work is done. APS designs its work systems through the review and implementation of state, administrative and policy requirements. This approach ensures requirements are met and also ensure that APS achieves its mission, meets customer expectations, focuses staff and maximizes staff performance.

6.a What are your organization's key work processes and how do you determine the key work process requirements for each process?

RAs meet with APS Supervisors and the Regional APS Program Managers in a more structured, formalized way to develop and implement organizational change as it relates to productivity, caseload growth and ongoing training. The goal

is to increase effectiveness of investigation, efficiency in the way investigations are carried out and accountability that is well-documented

APS' key work processes are intake, investigation, provision of protective services, and the administration of due process. The key processes are connected with the delivery of services and resources to the program's clients. In addition to these are the support processes which support the daily operations and service delivery of APS and determine how operations and service delivery flow. Finally, associated processes are items that can be identified within all the key and support processes:

- Innovation/creativity
- Research
- Partnership development and
- Communication/stakeholder relations.

The processes of intake, investigation, and provision of protective services help APS remain responsive to the changing needs of communities and clients. Figure 6.1 displays APS key work processes and the requirements for each one of the key work processes. Figure 6.2 displays the key support processes as well as the key focus areas in each one of these supports.

The key work process requirements are defined for each process through:

- Legislative mandate.
- Policy development.
- Internal communication with field staff.
- Training with field staff.
- Quality assurance monitoring.
- Stakeholder input -Assistant Attorney General, Division of Developmental Disabilities and Residential Care Services.
- Collaborator input-Area Agency on Aging, local law enforcement and tribal members.

Figure 6.1 APS Key Work Processes & Key Work Process Requirements

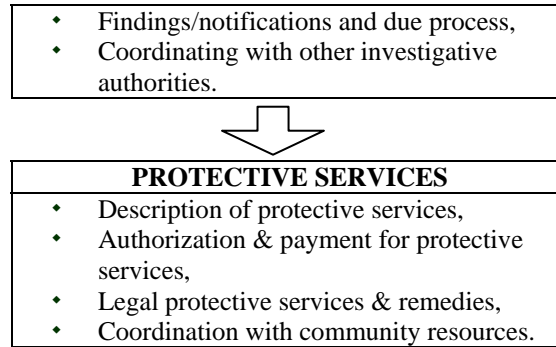
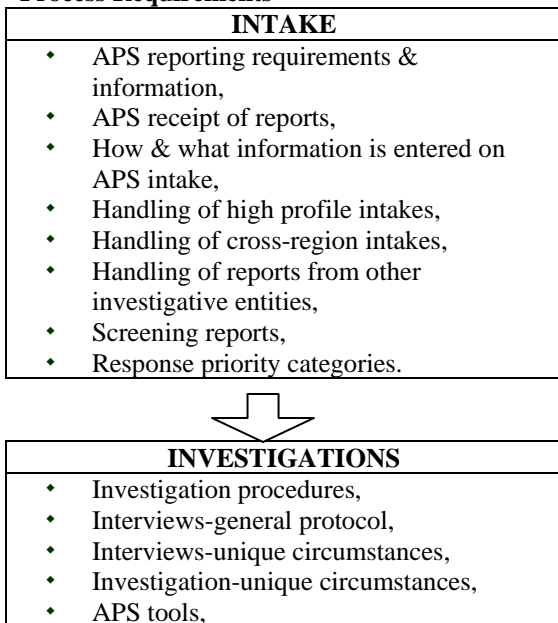


Figure 6.2 APS Key Support Processes and Key Focus Areas

Support Processes	Focus Areas
<ul style="list-style-type: none"> • Quality Assurance Monitoring. 	Output/ Outcome Assessment
<ul style="list-style-type: none"> • APSAS Application, Update/Development, • Database Management, • Equipment Purchase, • Technical Assistance. 	Information Technology
<ul style="list-style-type: none"> • Employee Evaluations, • Staff Safety, • Staff Training, • Staff Deployment. 	Human Resources
<ul style="list-style-type: none"> • Current Policies/Procedures, • Documentation, • Disclosure of APS Information. 	Performance Assistance
<ul style="list-style-type: none"> • Governor, • Legislature, • Department, • Director. 	Issue Identification
<ul style="list-style-type: none"> • Budget, • Staff, • Equipment. 	Resource Acquisition
<ul style="list-style-type: none"> • Laws/Regulations, • Policies/Procedures. 	Product Development

6.b How do you implement, manage and improve your key work processes to meet key process requirements and to achieve better performance and meet key requirements? What are your key performance measures or indicators and in-process measures used for control and improvement of your processes?

APS implements process requirements through staff training, LTC Manual procedures and ongoing technical assistance from headquarters and regional Program Managers. The APS Academy was created to train all APS workers on protocols and policy specific to the APS program.

Staff Training. Through work with internal stakeholders (APS field staff) the APS Training Academy (see 5.a) will be expanded by headquarters Program Managers as resources are available, to allow 3.5 additional days of specialized training for APS staff. This proposal and a proposal for region-based

training were approved by the RAs in February 2008. Beginning September 2008, the additional days will allow for in-depth training in documentation, financial exploitation, self-neglect and neglect. The proposal to the field for regional-based training suggests training in a variety of areas: an overview of the Medicaid Fraud Control Unit, interviewing diverse populations, photography as documentation, domestic violence, APSAS, self-care and APS ethics. Clearly, the expansion and increase in depth of training serves primarily to build a more effective workforce that is able to adapt quickly and flexibly to the rapidly changing APS environment. Better work performance is expected in all three key work processes due to the expertise gained in the training academy supplemented by specialized training in the region.

When information is available via the QA monitoring tool it will provide headquarters with valuable data regarding competencies in documentation, intake, investigation and the provision of protective services. (See 7a.) It will also help to identify future systems improvements for the APS Training Academy curriculum and may identify trends in work practices.

APS uses a variety of methods to implement, manage and improve key processes based on the nature of the issue. The following are examples of how APS manages and improves the key work processes:

Quality Assurance Monitoring Project and Pilot. In November of 2007, APS launched the APS QA tool. It was the start of a system to improve the three key work processes of intake, investigation and the provision of protective services. It will also identify system strengths and areas for system improvement. However, since no additional resources were added in the regions or HQ, the system is minimally implemented at this time.

The APS QA Monitoring Project was developed to assure the quality, consistency and completeness of the APS program. The objectives of this project were threefold:

1. Ensure that APS records and investigations are accurate, complete and performed within established guidelines, state and federal standards and policies;
2. Provide meaningful reports at the state, region, unit and investigation level that allow management to quantify or document quality standards, trends and diminished exposure to liability; and
3. Meet departmental standards for software development to help minimize the short and long term care costs of the system.

The APS QA Monitoring application consists of several features including: technical architecture, data entry, reports, administrative utilities and help system. Regional APS Program Managers statewide participated as a workgroup in a pilot to review existing case records using the electronic QA tool for each case. Testing assured inter rater reliability and test question validity. After case

review, they completed the QA form review document to give information about using the QA tool.

Regional Monitoring Visits. Headquarters APS Program Managers are currently setting up a statewide schedule of monitoring visits to assess the level of quality assurance activity in each region. When resources allow implementation of these QA visits, the primary focus will be to improve the key work process of intake as it looks at levels of and consistency of APS screen-outs and closed-no APS cases across all regions. Consistency in both areas can then be improved through policy development, staff training and internal communication. This key support process will help inform headquarters staff.

Capacity Screening Tool. APS has developed a capacity assessment (capacity screening tool) consisting of 11 questions and a coding guide for APS field staff to utilize during the course of their investigations. The thought behind the development and implementation of the tool is that the key work process of investigation is improved when field staff can utilize an assessment instrument to assess for impaired decision-making capacity. The tool was developed at headquarters and it was pilot tested out in the regions. Policy development has yet to be finalized on a decision tree to be used with the tool due to lack of available resources. The policy will emphasize a certain degree of statewide consistency in the fundamental data that is gathered and the decisions made from the results.

Figure 6.3 addresses the key performance measures and in-process measures that are used by APS for program control and improvement.

Figure 6.3 APS Key Performance Measures & In-Process Measures

Key work processes	Key performance measures
<i>Intake</i>	<ul style="list-style-type: none"> • Annual number of intakes, • Annual number of screen-outs, • Annual number of closed, no APS.
<i>Investigation</i>	<ul style="list-style-type: none"> • Response times for investigation, • Response times from assignment to investigation, • Annual number of substantiated cases by type. • Case investigations open longer than 90 days, • Annual number of APS Fair Hearings.
<i>Protective Services</i>	<ul style="list-style-type: none"> • APS Service Activity Report, • APS Disposition Report, • APS Closed Cases, • APS Worker SER, • (Service Episode Recording) Activity.

7. Business Results

What are your product and service, customer-focused performance, financial and market, workforce-focused performance, organizational effectiveness, process effectiveness and leadership results?

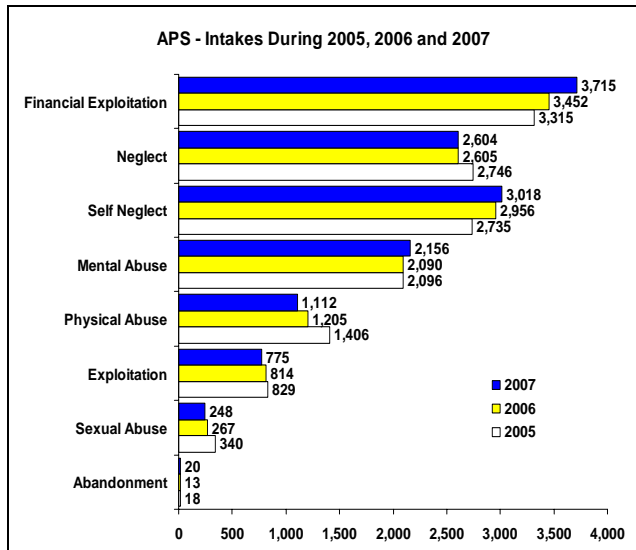
7.a What are your organization's key performance and improvement results in key business areas?

Product and Service Performance

Due to significant program changes in some definitions in 2005, data is presented from 2005 forward in most figures.

Figure 7.1 describes the number of intake reports for each type of abuse, for the years 2005-2007. The term Exploitation means coercion of a person by various means, excluding all Financial Exploitation.

Figure 7.1 APS number of intake reports by type, 2005-2007



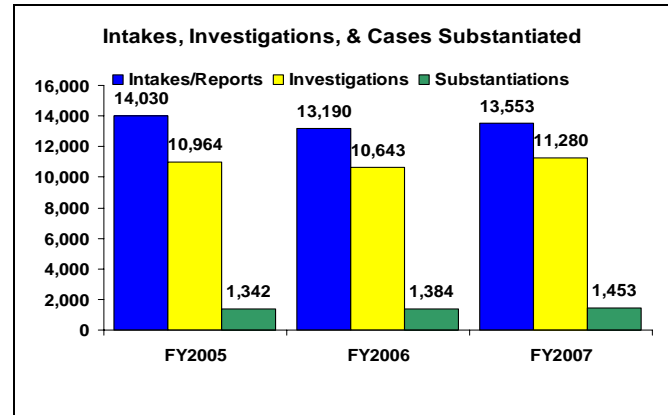
Source: APSAS, 4/08

Substantiation Rates

APS' goal is to protect vulnerable adults through objective, thorough, and timely investigations, as well as the provision of protective services. It is not clear at this time whether the rate of substantiations (see Figure 7.2) is at an appropriate level. Senior managers are beginning to look at this issue.

Before due process for alleged perpetrators was added in 2003, the substantiation rate was about twice the current level. In addition, we know that some regions screen-out fewer reports before they investigate. This results in a higher number of investigations so the percent of substantiations decreases.

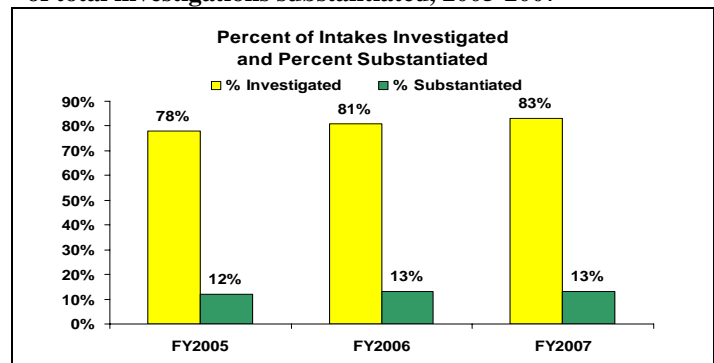
Figure 7.2 Total APS intake reports, total APS investigations, and total APS substantiations by year, 2005 - 2007.



*Total investigations *do not* include intake reports that are screened out or have investigations with a no-APS finding.
Source: APSAS, 4/08

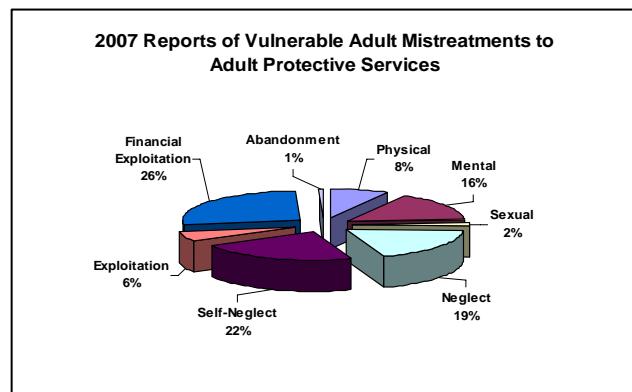
Number of perpetrators: APS maintains an Abuse Registry which lists names of perpetrators found by APS in substantiated cases to have abused, neglected, or exploited a vulnerable adult. As of April 2008 there were 1,792 names on the registry. The purpose of the registry is to provide a place for agencies to check the backgrounds of people applying to work with vulnerable adults or children.

Figure 7.3 Percent of total intakes investigated and percent of total investigations substantiated, 2005-2007



Source: APSAS, 4/08

Figure 7.4 Percent of reports by type, 2007



Source: APSAS, 4/08

Customer Satisfaction

APS clients are not included in the DSHS or other customer surveys due to strict confidentiality policies and concerns over re-traumatizing the vulnerable adult.

Other customers such as mandatory reporters of abuse and agencies that work with APS could be surveyed for customer satisfaction. However, APS does not have the resources to do this type of survey at this time.

Each year APS creates adult abuse prevention informational materials for the community. APS has mailed 171 of these packets since 2006. The information is often copied by the recipients to distribute to others in July for Washington State Adult Abuse Prevention month. The APS webpage also provides general information about abuse prevention that was visited 1,397 times in 2007.

Complaint process

ADSA follows an established protocol for complaints made against APS employees. Administrative Policy number 8.11 outlines procedures for complaint resolution and response standards regarding all DSHS employees.

Financial and Marketplace Performance

Risk Assessment

ADSA has a 100% completion rate of their annual Risk Assessment and Self Evaluation (RASE) assessments since 2001. All ADSA/HCS offices (including regional APS offices) complete annual RASE assessments in April of each year. The assessment is designed to evaluate business, employee and building safety annually. (See P.1.a (5).)

APS Quality Assurance Tool

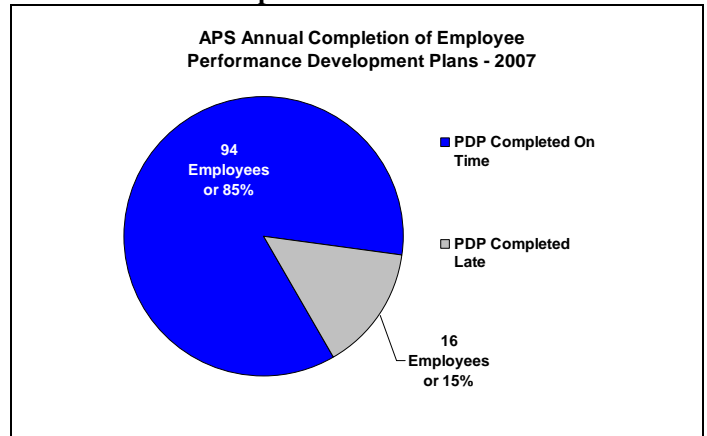
The APS QA tool was launched in November 2007. The tool was a result of several revisions that took 3 years to design with the involvement of APS field staff. The goal of the QA tool is to measure the quality of APS intakes and investigations. A portion of the QA process involves face to face interviews with APS alleged victims and alleged perpetrators. Subject to available resources, APS HQ Program Managers monitor the use of the QA tool by field staff to ensure that field supervisors screen out reports accurately. (See 6 b.)

Workforce Engagement, Satisfaction and Development

Training

A total of 143 APS staff have completed the APS Academy training since it began in January 2007. Four of the participants were from Native American Tribes.

Figure 7.5 Percent of APS staff with completed Performance Development Plans for 2007



Source: DSHS Human Resource Management System, 4/08, compiled by Shirley Stirling

Staff Turnover

High staff turnover is a major risk to the key business of APS. The total rate of APS staff turnover from January 2007 to January 2008 was 28%. Of the 116 APS field staff, 32 staff left and 84 staff remained with APS for the calendar year. (See P.2b and 5.b.)

Employee Survey

There is no separate employee survey data for APS. The 2007 HCS results are compared to the results for all of DSHS. HCS has developed an action plan to address the areas that need work, which includes supervisor training that includes these topics, and having each region develop teams to address these issues. (See 4.b and 5.a.)

Figure 7.6 2007 HCS Employee Survey Results

Statement	Percent agree or strongly agree	
	HCS	DSHS
Highest three ratings		
I know what is expected of me at work	89%	84%
My supervisor holds me and my co-workers accountable for performance.	86%	77%
My supervisor treats me with dignity and respect	83%	81%
Lowest three ratings		
I have the opportunity to give input on decisions affecting my work.	50%	53%
I am encouraged to come up with new and better ways of doing things.	48%	52%
In my workgroup we use customer feedback to improve our work processes.	44%	45%

Source: DSHS Research and Data Analysis, January 2008, compiled by Dotti Wilke

Operational Performance

One of the most important APS performance measures is the timeliness of complaint investigations related to mandatory time frames based on their priority. (See P.2a(2).)

Figure 7.7 Percent timely response to intake reports by priority level, 2005 - 2007

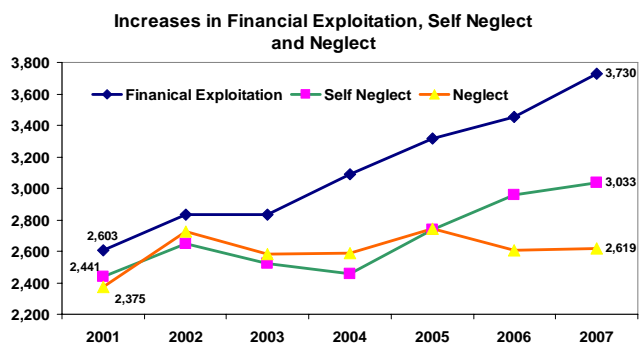
Priority	2005	2006	2007
High	100%	99.6%	99.6%
Medium	99.4%	99.1%	98%
Low	98.8%	99.0%	98.2%

Source: APSAS, 4/08

New GMAP performance measure:

Cases open more than 90 days are a new GMAP measure used to evaluate workload issues. See Figure 4.1.

Figure 7.8 Trends in the top three types of APS cases 2001-2007



Source: APSAS, 4/08

There has been a steady increase in financial exploitation cases (29% increase since 2001). In addition the complexity of these cases is increasing. Financial exploitation cases are most complex due to the insidious nature of the offense – someone astute in accounting/financial matters can hide their crime well in documentation, which needs the eye of a forensic accountant (not available in parts of the state), plus financial institutions will not provide documents to APS without a release.

Recidivism

A critical performance measure that can only be addressed with a new data system is recidivism. In the current APSAS database there is no clear data on the number of adults with substantiated abuse who are referred again to APS.

Accomplishment of Strategy and Action Plans

APS led the development in safety training for their staff. It is now offered online, and has become part of required training for many other field staff.

The APS webpage (including sub pages on prevention, mandatory reporting, how to contact APS, and types of abuse) was visited over 34,630 times in 2007. The APS webpage also provides general information about abuse prevention that was visited 1,397 times in 2007. The on-line training for mandatory reporters was visited 1,522 times in 2007. In 2008, in one 90 day period, the mandatory reporter page was visited over 4,909 times, reflecting a dramatic increase in use.

7.b How does your key performance results compare to competitors or others in your industry?

There is no data available on a national level to compare Washington's APS program to that of other states. Definitions, program scope, processes and state law are different for each state, making direct comparisons impossible. Federal law and national standards for APS programs do not exist.

Other states include different target populations and use different definitions for types of abuse. This makes comparisons with other states difficult as the programs are not standardized on any level.

Some information is available through studies and association work. Sharing of information across states often occurs when HQ Program Managers research topics related to investigations and protective services. Senior staff at headquarters and regional levels can access national databases that permit the sharing of information regarding abuse, neglect, and exploitation of vulnerable adults.

Though DSHS Children's Protective Services (CPS) may seem a logical comparison, APS cannot be compared with it for several reasons:

- CPS is funded as a separate program while APS is part of each region's administrative budget.
- APS is limited by the budget to standard M-F work weeks, while CPS has funding for 24/7 coverage.
- CPS also operated by different definitions of vulnerable clients, has a much longer history of national and state policy development, and is a high priority on the Governor's agenda.