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Adult Protective Services Technical Assistance Resource Center

Adult Protective Services Continuous Quality Improvement Toolkit
Sample Policies and Procedures

Part of the Continuous Quality Improvement Toolkit available at
https://apstarc.acl.gov/toolkits.

Introduction

This Adult Protective Services (APS) Continuous Quality Improvement (CQI) Policy and Procedure template is designed to provide a reference guide for developing state-specific policies and procedures for APS staff and supervisors.

> Continuous Quality Improvement (CQI) is a process of progressive incremental improvement of processes, safety, and patient care. The goal of CQI may include improvement of operations, outcomes, systems processes, improved work environment, or regulatory compliance. [1]

Continuous Quality Improvement and managing Information, specifically data, is important to understanding the work of APS and improving outcomes for clients. Consider multiple program implications when creating outcome measures. Update the relevant policy and procedure, training, and data guides to reflect changes.

Suggested policy and procedures are provided. This sample should be adapted to meet the CQI work for state APS programs.

Sources

[U.S. HHS ACL, National Voluntary Consensus Guidelines for State Adult Protective Services Systems, Updated March 2020.](#)

Often times programs struggle with developing outcome measures. Simply stated, outcome measures assess the impact of something. The National Voluntary Guidelines (rev. 2020) offers ideas for improving client outcomes. Consider using strategies that allow clients to participate in planning and setting obtainable measures for themselves.

There are several references to measuring the work of APS and the outcomes for people served by APS in the National Voluntary Consensus Guidelines.

- Records and Data Reporting Systems and Case Record Reviews.

  "It is recommended that APS systems create policies and protocols for supervisory consultation and case review at critical case junctures, i.e., decisions that are likely to have a significant impact on the welfare of the client" (pp. 21-22, 24, 62).

- Consistency of Practice.

  "It is recommended that APS systems develop standardized screening, triaging, and case assignment protocols" (pp. 21-22, 33-35, 62).

- Assessment of the Impact of an Intervention or Service Delivered.

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[1] O'Donnell and Gupta. *Continuous Quality Improvement.* (ncbl.nlm.nih.gov), June 2020.

"To improve communities" responses to adult maltreatment, it is recommended that APS systems create policies and protocols, including the development of memoranda of understanding (including contracts and other types of agreements), cross-training, and colocation of staffs (when permitted) to promote their collaboration with other entities during investigations and service implementation to benefit clients" (p. 15).

▪ Assessment of Staff (and Expert Consultation) on Services to Clients.

"It is recommended that APS systems dedicate sufficient resources and develop systems and protocols to allow for expert consultation from outside professionals in the fields identified as most needed" (p. 20).

"It is recommended that programs intervene in adult maltreatment cases as early as possible and develop targeted safety planning for clients experiencing different forms of abuse and/or neglect. For clients who may be reluctant to receive services, APS is encouraged to consider providing longer term interventions focused on building a working alliance with the client and applying motivational interviewing techniques" (p. 47).

Chapter (Insert Number) APS Continuous Quality Improvement
Section (Insert Number) APS Data System(s)

Policy

APS administrative, managerial, and supervisory staff shall be responsible for review, assessment, and continuous improvement of the data reporting system, data collected, and case documentation.

Procedures

1. Data system(s)

   a. Review quarterly the functionality of the data system with an annual review and consensus of next year's improvements to the functionality of the data system.

   b. Review quarterly staff usage of the data system with an annual review and consensus of next year's improvements to the training of staff on the usage of the data system.

   c. Review monthly records and data reporting systems checks electronically. Monthly variance reports shall be reviewed by administrative staff. Annual goals shall be established regarding improvements of variances discovered in the monthly electronic checks.

2. Case record reviews

   a. Client case record reviews by supervisors, shall be checked for compliance with program policies and procedures. Client case record reviews should include the processes and measures of timeliness, accuracy, and consistency of recording and reporting of information.

   b. Leadership shall determine the frequency and total number or percent of cases to be reviewed by a supervisor prior to case closure. Consider differentiation of supervisory reviews for new employees and experienced employees.

   c. Review annually prior year's data, gather staff input, and define client case review outcome measures. Train all staff on processes and measures. Examples of measures are provided in the CQI examples document.

Chapter (Insert Number) APS Continuous Quality Improvement Section (Insert Number) APS Client Services

Policy

APS leadership in conjunction with staff and community partners establish outcome measures that assess the impact of an intervention or service delivered to people served by the program.

Procedures

1. Interventions and services provided to people at-risk of maltreatment or the reoccurrence of maltreatment typically involve the work of APS and community partners such as social and medical service providers, law enforcement, non-profit entities, etc. APS leadership shall review and establish yearly measures in coordination with community partners as appropriate.

    a. Review existing data and identify:

        i. Prevalent type of maltreatment

        ii. Category of reporter type

        iii. Service referrals

    b. Review literature for new and innovative practices

2. After identifying the most prevalent type of maltreatment, reporter, and service referral(s), and any other pertinent information, hold an annual envisioning/strategic planning meeting to decide on specific outcome measures for targeted clients. Examples of outcome measures are provided in the CQI examples document.

3. Consider and plan for the targeted intervention or service. These are some of the things to consider in planning:

    a. Piloting or statewide implementation of a new intervention or service.

    b. Staff and community partners' training shall involve specific partners. For example, if sexual abuse allegations have increased, reach out to sexual assault providers to offer training.

    c. Regular communications regarding the progress, lessons learned, and continuous improvements. For example, brief monthly emails to all stakeholders providing updates on the progress of the targeted intervention or service.

    d. Annual review of the CQI outcome measure should include:

        i. Client satisfaction and effectiveness and impact for clients served.

        ii. If piloted, consider replicated the service in other areas of the state.

        iii. Inclusion of additional community partners and clients served if the initial intervention was limited.

iv. Improvements to the assessment, delivery, and client participation in the intervention/service.

Chapter (Insert Number) APS Continuous Quality Improvement
Section (Insert Number) APS Staff

Policy

APS leadership in conjunction with staff shall establish yearly outcome measures specific to initiating or improving the recruitment and retention of employees, initial and on-going training, career opportunities, and investment in client positive outcomes.

Procedures

1. Recruitment of employees

    a. Review staffing trends from prior years

        i.   Turnover rate

        ii. Length of employment

        iii. Retirement

    b. Review staffing alignment with the population of clients

        i.   Racial and ethnic diversity

        ii. Languages spoken

        iii. Sexual orientation

        iv. Gender identification

        v.   Intellectual disabilities, development disabilities, behavioral health, gerontology training, education, and/or other experience

        vi. Types of cases where more specialty assistance is needed such as medical and accounting forensics

    c. After the review of the above data and information, consider and plan for

        i.   these recruitment strategies

        ii. Coordination with human resources

        iii. Coordination with universities for internship placements, recruitment job placement events

        iv. Searches within and outside of government agencies

        v.   Advertisements – social media, paper media, radio, state and national associations' e-newsletters

2. Retention of employees

    a. Review of staffing trends from prior years

b. Survey staff regarding their work experiences with the program

c. Review salary history over several years or complete a formal salary study

d. After the review of data and information, consider:

    i. Creating an advisory group of employees to participate in retention planning

    ii. Developing a mechanism for obtaining regular input from all staff

    iii. Creating incentives to encourage retention, including but not limited to:,

        1. Incremental pay increases dependent upon increased program funding

        2. Reprioritizing of existing program budget to finance pay increase

        3. Tuition reimbursement for continuing education studies

        4. Tuition reimbursement or work study programs for attainment of higher education specialty degrees

3. Initial training and continuing education

a. Review existing training for gaps in learning content

b. Review any required licensure requirements for staff

c. Analyze national and other states' training programs

d. Review training mechanisms of delivery, in-field supervision, and peer support

e. After the review of data and information, consider and plan for

    i. Updates to learning content

    ii. Addition of new curricula

    iii. Changes or additional delivery mechanisms for training

4. Career opportunities

a. Analyze organizational structure

b. Review national and other states' program structure

c. Review program needs

    i. Administration and supervisory

    ii. Intake

    iii. Investigators/social workers

    iv. Medical or accounting forensics specialists

     v.   Training

d.   After the review of information gathered, consider and plan for

     i.   Current and future needs of the program

     ii.   Changes to staffing structure.

     iii.   Salary alignments

     iv.   Contract specialty consultants vs full-time employees

     v.   Communication with employees and stakeholders