

Department of Health and Human Services
Administration for Community Living

Elder Justice
Coordinating Council (EJCC)

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P R O C E E D I N G S (10:00 a.m.)

MS. WHITTIER ELIASON: Hi. Good morning, and welcome to this meeting of the Elder Justice Coordinating Council. All members of the public are in listening-only mode. If you have any questions, please send them directly to ejpubliccomments@acl.hhs.gov. Unfortunately, we are not able to provide any direct technical support to members of the public viewing the livestream. If you have any audio or visual problems today, we recommend exiting and re-entering the livestream.

I will now turn to Acting Assistant Secretary for Aging Alison Barkoff to convene the Elder Justice Coordinating Council meeting.

Agenda Item: Opening Remarks and Welcome

ACTING ASSISTANT SECRETARY BARKOFF: Thank you, Stephanie, and good morning, everyone, and welcome to the November 2022 convening of the Elder Justice Coordinating Council. My name is Alison Barkoff and I am the Administration for Community Living's Acting Administrator and Assistant Secretary for Aging. I am so privileged to serve as the delegated chair of the Council, standing in for Health and Human Services Secretary Becerra, who is the chair.

It is my true pleasure to introduce HHS' Deputy Secretary Andrea Palm to kick us off this morning. As

deputy secretary, Deputy Secretary Palm is the chief operating officer and is responsible for overseeing the day-to-day operations of the department. She is here to open the Elder Justice Coordinating Council meeting on behalf of Secretary Becerra.

I just want to say that Deputy Secretary Palm has been an incredible champion and has a long history of dedication to elder justice. We are so lucky and delighted to have her join us this morning. Deputy Secretary Palm, you now have the floor.

DEPUTY SECRETARY PALM: Good morning. Thank you so much, Alison. It is such a pleasure to be with all of you. I really do want to welcome all of our speakers, stakeholders, partners, members of the Coordinating Council as well as the public who are joining this morning via livestream.

I am honored to join you here today for what marks the tenth-year anniversary of the EJCC. I remember when we launched this ten years ago. I particularly feel a full circle moment here this morning. In the last ten years, this Council really has done the work of coordinating across the federal government to address elder abuse, neglect and exploitation. Together, we have increased awareness of federal activities to prevent and

address elder abuse and further many of our elder justice initiatives.

Our challenge moving forward really is to make as much progress in the next ten years as we have in these first ten. We all share a common belief that every American deserves the opportunity to live their later years as they choose, free from abuse in all of its forms. Unfortunately, as least one out of ten older Americans is denied that opportunity. In just the last few years, we have seen signs that adult maltreatment is increasing.

Throughout the COVID-19 pandemic, we have seen disturbing increases in allegations of maltreatment of older adults with one study suggesting the prevalence of elder maltreatment nearly doubled during the pandemic. The older adults that are affected by abuse, maltreatment and exploitation are our parents, our grandparents, and one day they will be us.

Our goal must be to ensure that all people, no matter their age, are treated equally and that we are all valued integral members of our communities who have the right to live peacefully with dignity and respect.

The meeting today is an opportunity for all of us to advance this goal. You will hear the most pertinent updates on elder justice from experts in academia, the nonprofit sector, and from state government. They will

discuss what is currently known about the impact of historic investments in the adult protective services system, investments that we made through the Coronavirus Relief and Response Supplemental Appropriations Act as well as the American Rescue Plan.

There is much to look forward to and HHS is ready to continue leading in this journey with all of you, our very important EJCC partners and colleagues.

I want to express, as Alison noted at the top, Secretary Becerra's appreciation for all of the work of this Council that you have done and that you will continue to do. At HHS, we are committed to this work and to continue fighting for elder justice because it really is critical foundational work and a moral imperative for all of us. And it is certainly as part of how we think about putting people at the center of what we do is critical to making America a better, stronger nation.

America's older adults deserve this full commitment, and I really am honored to stand with all you to be a part of those efforts. Thank you again so much for your work on the EJCC and to all of our partners for your contributions.

And now, if I could, Alison, I will turn the meeting back over to you with much appreciation for the invitation to be here with you today.

ACTING ASSISTANT SECRETARY BARKOFF: Thank you so much, Deputy Secretary Palm, for joining us this morning and for those remarks. I hope that really motivates all of us who are part of the Council and who are listening in to continue our collaboration together on these really incredibly important issues.

I also want to turn to our next speaker to continue the opening remarks and welcome Associate US Attorney General Vanita Gupta. Associate Attorney General Gupta serves as the third ranking top official at the Department of Justice. I can just say again having had a chance to work with her in other positions that she has had at the Department of Justice, she is an incredible champion for civil rights and for elder justice. We are really excited to have her join us today. I will turn it now to Associate Attorney General Vanita Gupta.

ASSOCIATE ATTORNEY GENERAL GUPTA: Thank you for that warm welcome, Acting Assistant Secretary Barkoff. It is a pleasure to join you once again and to represent the Department of Justice at the Elder Justice Coordinating Council alongside the indomitable Andy Mao, the Department's National Elder Justice Coordinator.

I want to also thank Deputy Secretary Palm for the leadership role that HHS has played on the Council and

for partnering with Council participants to protect older Americans from abuse, neglect, and financial exploitation.

For the past decade, combatting elder fraud and abuse has been a top priority for the Justice Department. We remain committed to doing all that we can to restore dignity to older adults who have been abused and to repair the sense of safety and security for those who have been financially exploited or defrauded.

Prevention, early detection, and early intervention combined with partnership at every level of government are all necessary to combat elder abuse. Elder justice is a critical priority of the Justice Department as reflected in our ongoing efforts to prosecute those who harm older adults, to support the victims, to bolster state and local efforts to pursue elder justice, and to prevent elder fraud and abuse before it occurs.

Let me begin with some updates since I last spoke to this group last year. As outlined in our recent annual Report to Congress, the department pursued nearly 300 criminal and civil cases in the past year on issues ranging from COVID-19 fraud to grossly substandard care in nursing homes. We also returned millions of dollars to elder fraud victims through asset forfeitures and other actions.

At the same time, we developed tools for elder justice professionals on the frontlines and devoted

substantial resources to victim assistance, including by responding to a record number of calls on the National Elder Fraud Hotline. And the department participated in public outreach on numerous elder justice topics to over 150,000 individuals, including members of law enforcement, legal aid attorneys, elder justice professionals, and members of the public.

Collaboration and coordination at all levels of government have been key to the success of these departmental initiatives. First and foremost, this is reflected in our close partnership with other federal agencies. As many of you know, the Justice Department has focused much of our elder justice enforcement on transnational schemes, which comprise nearly 40 percent of our cases in the past year.

Our whole of government approach has been critical to detecting and disrupting these schemes, which include grandparent scams, romance fraud, identity theft, and lottery fraud. Our work to investigate - prosecute these cases has involved collaboration with the US Postal Inspection Service, the Department of Homeland Security, the Social Security Administration's Office of Inspector General, as well as the Federal Trade Commission, the Consumer Financial Protection Bureau, and Treasury's Financial Crimes Enforcement Network.

Our federal partners have likewise been instrumental in helping raise awareness on issues impacting older adults. For example, with the help of the Administration for Community Living, the Consumer Financial Protection Bureau, the National Institute on Aging, and others, we convened a three-day virtual symposium last April, focused on the role that decision making capacity plays in elder justice proceedings where criminal and civil judges are frequently called upon to undertake the complex and nuanced task of trying to assess the abilities of older adults to make independent decisions about personal and financial matters.

Equally critical for the department's work has been our continued collaboration and coordination at both state and local level. Our federal initiatives have long benefitted from the assistance of our state and local law enforcement partners. I am excited that the Council will be hearing today from some of our state partners who are so committed to this work. We also have several efforts in the works to strengthen these partnerships in the days ahead.

One example of a successful collaboration is the National Nursing Home Initiative. Launched in 2020, this initiative is designed to coordinate and enhance civil and criminal enforcement related to nursing homes that provide grossly substandard care by drawing on a wide network of

state and local professionals, including state Medicaid fraud control units, adult protective services, long-term care, ombudsman, state and local law enforcement and many others.

Next month, the initiative will launch a significant new training effort with state Medicaid fraud control unit detectors across the nation. In a series of six virtual convenings, the Justice Department's Elder Justice and Health Fraud Coordinators will meet with Medicaid Fraud Control Unit Directors to discuss the most effective ways to collaborate on priority substandard care cases and share best practices related to this enforcement work.

Just last month, the Justice Department's Office for Victims of Crime announced the first of its kind effort to support a National Elder Justice Coalition Center to support the development of new state and tribal coalitions that will collaborate with federal agencies to coordinate elder justice work.

The National Elder Justice Coalition Center will release a competitive solicitation early next summer to fund and support additional elder justice coalitions across the country.

Finally, a bit of a coming attraction, I am pleased to announce that in the fall of 2023, the Justice

Department will host an Elder Justice Summit specifically for state and local law enforcement. This summit will provide a national platform for sharing strategies and best practices, information, and resources. Stay tuned for more information on this.

On behalf of the Justice Department, I want to thank you again for all that you have done and will do to advance the cause of elder justice. My colleagues and I look forward to continuing to partner with you on this critically important issue. Thank you.

ACTING ASSISTANT SECRETARY BARKOFF: Thank you so much, Associate US Attorney General Gupta. We are just so thrilled you can join us this morning and for really demonstrating our shared commitments to elder justice. And truly on behalf of all the EJCC members here today, I want to thank you and Deputy Secretary Palm for sharing your really powerful and motivational remarks with us this morning.

Now, let us transition to the next part of our agenda. This morning we will be hearing from renowned experts who were invited to share presentations on elder justice priority issues in two key areas. For council members, we are now going to begin hearing from our two expert panels. And at the conclusion of each panel, you will be cued up for the question-and-answer period. Your

microphones will be unmuted at the start of the Q&A. I would ask you to keep your questions brief, maybe write them down as you think of them so we can be efficient and get to every question. I am really looking forward to the panels and to our discussion.

I would like to introduce our first panel titled the impact of the CRRSA and ARPA funds on the Adult Protective Services program investment. Although the Elder Justice Act was passed in 2010, December 2022, a full decade later, marked the first time that Congress appropriated funds for the formula grants to state adult protective services that was authorized in Elder Justice Act. We will learn more about the significance and impact of that funding during today's panel.

We are joined today by representatives from two state adult protective services programs as well as the National Adult Protective Services Association. They will share examples of how this historic funding has been invested to improve adult protective services across the country.

Let me turn to introducing the panel. For this first panel, we will be joined by Kez Wold, who is the Associate Commissioner from the Texas Department of Family and Protective Services. We will also be joined by Tim Jackson, who is the Adult Protective Services Section

Administrator from the Missouri Department of Health and Human Services. And finally, we will be joined by Bill Benson, who is the National Policy Advisor at the National Adult Protective Services Association.

Mr. Wold will be kicking off our first panel. Mr. Wold, you now have the floor.

**Agenda Item: Impact of CRRSA and ARPA funds on
APS Program Investment**

MR. WOLD: Good morning, Chair Barkoff and members of the Elder Justice Coordinating Council. I believe I had some slides. My name is Kez Wold and I have the pleasure to serve as the Associate Commissioner of Adult Protective Services, which is a part of the Texas Department of Family and Protective Services. In Texas, APS investigates allegations of abuse, neglect, and exploitation in cases involving adults in our state who reside in the community and are over the age of 65 or who are living with a disability. Our 550 case workers across 254 counties complete over 80,000 investigations every fiscal year. On behalf of everyone at Texas APS, thank you for inviting me to speak today to share the impact that the Coronavirus Response and Relief Supplemental Appropriations Act and the American Rescue Plan Act have had on our APS program.

While the Texas APS program is well resourced and has long enjoyed the support of the Texas Legislature,

longer-term planning is often challenging due to the biennial nature of our budget cycle. In 2021, when we learned about the federal funds we were about to receive from ACL, our leadership team decided to use these funds to make strategic investments. The flexibility provided by these federal funds has been a very important feature from our perspective as it allowed us to tailor our spending in areas that will allow us to become an even better program.

I would like to highlight three out of several areas where we have made significant investments. Financial exploitation of persons over 65 is a growing problem in Texas and one that is expected to worsen as this segment of the overall population increases. From 2013 through 2020, exploitation allegations among this age group increased 29 percent in our state. In certain urban areas of the state, the increases have been even more dramatic, increasing as much as 40 percent in the Dallas/Fort Worth area, and a whopping 66 percent in Houston.

Anticipating the rapid increase of this segment of the population during the current decade, APS Texas has piloted an exploitation unit in the Dallas/Fort Worth area, beginning in 2018. Over the past several years, this unit has made significant progress. First, referrals to the Tarrant County District Attorney's Office and to the Tarrant County Law Enforcement, the Financial Crimes

Division, have increased 63 percent in the last three years. Those referrals include both APS exploitation cases as well as scams and thefts, which APS Texas is made aware of but we do not currently investigate.

Building off the success and lessons learned from that initial pilot unit, we used ARPA funds to create three exploitation units and located them in the Dallas/Fort Worth metroplex in Houston and also San Antonio in the lower Rio Grande Valley. Something we learned with our initial pilot is that not all case workers feel comfortable working financial exploitation cases. These cases tend to be very complex, require advanced analytical and investigative skills, and they involve working closely with law enforcement and the judiciary.

In addition to the improved client outcomes attributed to more thorough investigations conducted by specialized staff, building these units with APS Specialist V positions is an extra benefit because we have created a further career path for staff that are interested in specializing.

Finally, the creation of these exploitation units has strengthened our working relationships with key partners in these jurisdictions. While law enforcement and the judiciary are obvious partners without whom we could not do this work, we have also strengthened our working

relationship with local offices of the Social Security Administration and in San Antonio, we recently worked on an investigation that involved the Secret Service and their Cyber Fraud Task Force.

The next area that I wanted to talk about as we have invested our grant funds is our new case worker training program. The last time that Texas APS made major changes to our training program was in 2004. We have identified a need to make changes for some time but we just did not have the capacity to embark on such a major project.

Using ARPA funds, Texas hired a highly skilled project manager to oversee this work. Our program has the experience and knowledge to lend to such an effort, but managing such a large project takes time and by creating a temporary project manager position, we have been able to advance this project at twice its expected speed.

The reason that we wanted to address new case worker training is quite simple. In the past three fiscal years, turnover rates among our APS Specialist I positions have increased from 33 percent in 2020 to 57.8, almost 60 percent, in 2022. To spend months training a new case worker only to have them leave once they are in the field is a disservice to our clients and to our tenured staff and it is a cost to the system that we cannot afford.

While we know that training alone will not completely resolve new case worker turnover, we do expect it to have an impact. In our current training model, there is a lot of time spent in the classroom as well as completing web-based training. However, in our redesign, we are moving to a competency-focused field-based model. What that means is that new case workers will be trained on the building blocks of casework. This approach allows us to better identify the strengths of new case workers and to address any areas in need of improvement. It will also mean new case workers who are not able to successfully fulfill the requirements of the position will be identified earlier and may be separated from employment sooner in the process. While this may increase turnover to start, the long-term benefit for our new case workers graduating from the redesigned training program, is that they will be fully capable of handling the work and serving our clients because they will have had months of practice under very close supervision.

By making this training program field-based, our new case workers will build skills in the field, serving real clients. In doing so, they will be able to help relieve some of the workload of their colleagues. To make sure that these new case workers are learning what they need to know as they interact with clients, Texas APS is in

the process of creating grant-funded training supervisor positions. These new positions will also offer a career path to existing staff who are looking for a new challenge and who want to help develop the next generation of case workers. These training supervisor positions are central to the new model and we are excited by what this new training model will mean for our clients and for our workforce. Our launch date for the new training model is September 1 of 2023.

In addition, Texas APS recognizes that to be effective, it needs the support of both the public and its partners. The public needs to be aware of and recognize the signs of abuse, neglect, and exploitation and how to help vulnerable neighbors, friends, and family members. And, to best serve our communities, APS needs its partners to share and coordinate valuable resources required by our mutual clients.

ARPA grant funding offered Texas the unique ability to contract with a public relations firm to conduct research into community, partner, and our own staff's perceptions of APS. Building on this research, APS is working with the same firm to design and implement a road map to engage critical partners, raise public awareness in a targeted way and to promote neighbors helping neighbors and to call APS when needed, and overall to build a

positive perception of APS and its support of vulnerable Texans.

Our roadmap will lead to an occasion that we are greatly looking forward to, our 40th Annual APS Conference, which is scheduled in Austin for the week of October 9 of 2023. It will kick off a year of engagement and awareness activities culminating in the 50th anniversary of the passage of Title XX legislation.

Finally, I do want to reiterate that the unprecedented opportunity provided by this funding represents a genuine chance to change and improve our APS programs. There are multiple projects underway in Texas that we could not have undertaken without the grant funding or that would have stalled without having the temporary staff to move them forward.

Thank you again for the invitation to speak today and share some of the work going on in Texas. It is a very exciting time to be a part of APS and the efforts underway across the country will only propel our programs forward in ways that we could imagine a few years ago. Thank you so much.

STAFF: Alison, we cannot hear you.

ACTING ASSISTANT SECRETARY BARKOFF: Sorry about that.

STAFF: No problem. Thank you.

ACTING ASSISTANT SECRETARY BARKOFF: Thank you so much, Mr. Wold. As I was saying evidently to myself, it was really exciting to hear how you have put together and really used the additional funding to make such an impact in Texas APS program.

Our next panelist is Tim Jackson who will share the experience from Missouri's APS. Mr. Jackson, I am turning it to you.

MR. JACKSON: Thank you. Good morning, Chairman Barkoff, and members of the Elder Justice Coordinating Council. My name is Tim Jackson. I am the Adult Protective Services Administrator for Missouri. I work for the Missouri Department of Health and Senior Services/Division of Senior and Disability Services/Section for Adult Protective Services.

I would like to thank the Elder Justice Coordinating Council and the Administration on Community Living for this invitation. I am very excited to speak today about just one of Missouri's projects using CRRSA and ARPA funding. This is Missouri's Adult Protective Services Direct Services Program. It is a very exciting initiative that we have undertaken with the use of our APS Coronavirus Response and Relief funds and one that we plan to continue with American Rescue Plan Act funding.

Our program is focused on overcoming gaps in available community resources. Our program is focused on overcoming gaps in available community resources by paying for interventions such as needed goods and services that are otherwise unavailable or for which there is inadequate or lacking funding. By linking APS clients with all of the interventions they need, not just the ones for which there are community resources available, Missouri APS is able to address the root causes of the abuse, neglect, and/or exploitation and fully provide wrap-around services and supports to significantly reduce the APS client's risk of future harm.

But we cannot accomplish this important work without our partners, Missouri's 10 Area Agencies on Aging. The AAAs play a pivotal role in the delivery of this program by providing case management and purchasing the needed interventions for the APS client. The Area Agencies on Aging, along with their association, MA4, which is the Missouri's Association of Area Agencies on Aging, worked closely with APS to create the infrastructure to make this program work, one of the most important pieces being an online platform called Cumulus that unifies APS and the AAAs into one online referral and case tracking system.

I would like to lay out the basic process for how the program works. First off, Missouri state APS staff

receives the report of abuse, neglect, and/or exploitation. They respond to that report by seeing the person in their home. They complete an assessment of the APS client's level of risk and needs while also simultaneously gathering evidence in regard to any potential criminal act. Missouri APS staff addresses the needs that can be addressed through the available community resources while also identifying other needs and interventions for which no resources or funding exists.

Once APS staff determines that the interventions are needed for which there is no funding, they then refer the client to the network of AAAs through the Cumulus system. Cumulus routes the referral to the appropriate AAA based on the location of the client.

AAA staff or subcontractors of the AAA agency then engage with the APS client to provide case management and coordinate setting up the services, goods, et cetera, for the individual. If additional needs are identified, AAA staff seeks approval from APS to provide the additional interventions if deemed necessary. Once the services are delivered or the goods are obtained, AAA staff completes a satisfaction survey with the client, reports the outcomes of their case actions to APS via the Cumulus system and invoices the department for reimbursement of their expenses.

Here is a list of some of the types of assistance provided through this program. It is important to note that most of these interventions, the goods and services provided through this program, are most associated with the needs of self-neglect cases. Because these services are focused on reducing risk and keeping the APS client safe, many of the services provided pertain to environmental safety or improving the home environment to reduce risk. Other interventions, like temporary delivered meals or personal hygiene, are more focused on the individual's personal needs. It is important to remember that there may be other community resources available to pay for or provide these services. If so, those resources are utilized or exhausted first before accessing this program.

We started this program in early July of this year so 2022. In just 16 weeks, the program has amassed over 260 referrals. As an update to that, in 18 weeks, we have now over 320 cases that have been generated with this program. The most needed services or interventions are home modifications, as I mentioned earlier, followed by pest control, nutritional assistance, environmental cleanup, assistance with housing or relocation, and assistance with utilities. These were not surprises for our APS staff as housing-related issues such as pest infestations, unsafe housing, and utility assistance are common challenges that

our clients face. Our hope is that by addressing these root issues of risk, the client will be able to live safely and independently for as long as they wish.

I mentioned that the AAAs do a survey with the client at the end of their engagement. Of the results thus far, the vast majority of clients impacted by this program are satisfied with the assistance they received and feel that they received all the services that they needed.

As far as sustainability goes, Missouri has devoted a heavy segment of its APS Covid Relief and its American Rescue Plan Act funding to the continuation of this program. While we are planning for this to be a short-term or time-limited program, we do hope to be able to prove the program's value and the need for continued funding to support it.

And finally, we also hope to utilize the data we gain from this program to give us a more comprehensive understanding of the resource gaps in Missouri. With this information in hand, we can pursue and support efforts to expand community resources and support services in the areas of greatest need.

Again, I would like to thank the Elder Justice Coordinating Council and the Administration on Community Living for the invitation and opportunity to speak about

Missouri Adult Protective Services Direct Services Program.
Thank you.

ACTING ASSISTANT SECRETARY BARKOFF: Thank you so much, Mr. Jackson. It was really great to hear again some common themes but also states are using this funding in a lot of different ways to meet the unique needs of their own populations.

Turning now to our third panelist today is Bill Benson who will share a national perspective on the investments of funds based on his work at the National Adult Protective Services Association. Mr. Benson, thank you so much for joining us. The floor is yours.

MR. BENSON: Thank you for the opportunity to speak with you today. My name is Bill Benson and I serve as National Policy Advisor to the National Adult Protective Services Associations or NAPSA. It is a pleasure to be here with other leaders in Elder Justice, including our APS colleagues from Texas and Missouri. We greatly appreciate Acting Assistant Secretary Barkoff's commitment to collaboration between the aging and disabilities worlds. We thank you also for the unique role the Elder Justice Coordinating Council plays in bringing together this impressive array of federal agencies and for what has been achieved since you first met in 2012.

NAPSA represents the nation's state and local Adult Protective Services programs. APS is the nation's only system of statutorily authorized civil programs to investigate vulnerable adult abuse, neglect, and exploitation and to respond and offer protection to those it serves.

Over 90 percent of state's APS programs serve all persons with significant disabilities who are aged 18 and older while several serve only persons 60 or 65 and older. In some states, such as California, can serve older persons with disabilities who have been reported to have been victimized by abuse where age alone is sufficient criterion. All APS programs that investigate abuse in home settings or community settings were 98 percent of older persons live. Nearly all have jurisdiction in assisted living facilities but only about half are authorized under state law to investigate nursing facilities.

We are especially pleased to be here today to address the impact of the first-ever fulfillment of direct program funding to states promised by the Elder Justice Act of 2010. For some 50 years until fiscal year 2021, APS has relied primarily on state and local funding. Although many states direct a portion of their Social Services Block Grant funds to APS.

In recent years, the state commitment of SSBG for Adult Protective Services has decreased over 30 percent to a total of \$143.6 million. Few states offset this drop with their own funding. This trend is very concerning to us.

My written statement includes a chart with the cumulative expenditures of SSBG funds for APS among the states from 2010 to 2020. We cannot overstate the importance of the recent federal funding directed to states for APS through the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 or CRRSA and the American Rescue Plan Act, ARPA, of 2021. CRRSA and ARPA funding had a critical impact in meeting needs associated with the COVID-19 pandemic. Many APS programs needed personal protective equipment but had great difficulty obtaining it. We do applaud the Department of Homeland Security's Cybersecurity and Infrastructure Agency for listening to the field and including APS in the essential critical infrastructure workers list.

During the pandemic, APS agencies did not close their doors and in many locations continued to do face-to-face investigations while other programs shifted to responding remotely. This pivot required programs to ensure staff had the technology needed, including mobile printers in Indiana, software-based telephones in Connecticut, and basics such as laptops and cell phones in many other

states. Several agencies have moved to a permanent virtual workplace, which will mean a continued need for these resources as well solutions to equity issues such as home internet speeds or private workspace to maintain confidentiality.

We are also seeing innovations and impact on the infrastructure of APS data and case management systems through this new funding. Many states note that their systems are combined with other systems that are not applicable to APS or have not been updated. The development of ACL's National Adult Maltreatment Reporting System or NAMRS has gradually spurred updates. Data system improvements have the potential to improve quality assurance practices, guide administration, support workers, and response to recommendations from policymakers and others. It takes ongoing funding to maintain and upgrade these systems.

We are grateful to the ACL and to state APS programs for their support for APS staff training. NAPSA is honored to lead the development of the CRRSA-funded National Adult Protective Services Training Center or NATC. This self-paced e-learning platform is already providing core, quality training to over a thousand learners in the first two months of operation. States have indicated their intention to use NATC courses as part of their training

programs and to reserve precious in-person time and resources for skill building that is based upon the e-learning opportunities provided by the National Adult Protective Service Training Center. States have used the funds to address their specific needs. In Nebraska, they address hoarding, forensic skills in Kentucky, capacity assessments in Georgia, and worker safety in New Mexico as examples.

We note that a significant number of the Elder Justice Coordinating Council's eight recommendations include public and professional awareness elements. ARPA funding is being used by many states for public awareness efforts. In the earlier part of the pandemic, reports to APS decreased particularly by professionals such as doctors and home care providers. Eleven states contracted with NAPSA to develop a series of public awareness materials that can be customized with state-specific contact information. Other campaigns include North Dakota's public awareness commercial with a message. "It is your business to report to APS." South Dakota APS developed 30-second commercials on scams, hoarding, and self-isolation. Nebraska APS developed a campaign on COVID related scams and a second with the Office of the Public Guardian to raise awareness and to recruit potential guardians. Ongoing

funding is needed to both maintain campaigns and to respond adequately to the resulting increase in reports to APS.

As previously noted, the majority of the APS programs work with victims of maltreatment, ages 18 and above. We appreciate the work and clarifications by ACL that the funding supports all APS clients, not solely older adults. NAPSA looks forward to working with the Council, ACL, and Congress to ensure this occurs in every state.

We must also use this opportunity to highlight efforts by states' APS programs to use ARPA funding to support and provide funding to American Indian tribes and tribal protective services programs. While we applaud the first tribal set-aside for the Crime Victims Fund in 2018, tribes are not eligible for other funding sources including direct grants to states' APS programs under the Elder Justice Act or funds from the federal government under SSBG. We hope to see this change in the future.

Several states with significant tribal populations are taking steps to provide support to tribes in addressing abuse of adult tribal members. For example, by entering into contracts to fund staffing, travel, and equipment in Minnesota, MOUs with tribes and visits accompanied by tribal members in North Dakota, funding a geriatric social work position in a tribal partner in South Dakota, and funding a tribal elder social worker and

including the worker they are training and certification processes in South Carolina.

I want to close with the most crucial issue for APS across the nation, which is staffing. APS is a labor-intensive service relying upon investigators, intake workers, case managers, and experts in financial abuse, capacity, assessment, and other areas requiring expertise as well as support personnel and others. Adequate staffing is the most important need for APS. The promise inherent in the Elder Justice Act is that states will receive funding to support their workforce to competently respond to reports of abuse, neglect, and exploitation. With other 1.3 million reports to APS each year, many states noted the need to hire staff. But because the CRRSA and ARPA funding may be one time only, they were unable to do so.

To be blunt, APS work is exceptionally complicated and stressful. In order to attract and maintain a trained and competent workforce, APS needs support to be able to pay competitive salaries to hire an adequate number of high-quality, dedicated staff especially as APS case loads grow just due to demographics alone.

Thank you for this opportunity to highlight the impact and the importance of the CRSSA and APRA funding to APS. This funding could be a game changer. Important work is being done as we speak. But if ongoing, reliable, and

adequate funding is not secured, this progress will likely slow and even come to a halt. NAPSA commends the work done by all members of the Council to empower older adults, persons with disabilities, and those who work to prevent and address abuse, neglect, and exploitation. NAPSA will continue to work closely with the EJCC and each of its member agencies and offices in furthering the federal response to abuse and support for Adult Protective Services. Thank you.

ACTING ASSISTANT SECRETARY BARKOFF: Thank you so much, Mr. Benson. That was just so helpful to hear both the incredible difference this funding has made and also what may happen as Adult Protective Services face cliffs in that funding.

I want to thank each of our panelists for these really helpful presentations. For our Council members, we will now launch into our question-and-answer segment, focused on this panel. We will unmute you for the first round of questions for the panelists. I will kick it over to Stephanie to tee up and moderate the questions.

MS. WHITTIER ELIASON: Actually, it is open mike at this point. I do not have anyone who is in a queue.

ACTING ASSISTANT SECRETARY BARKOFF: We have a hand up, Stephanie, from Ron Flagg.

MS. WHITTIER ELIASON: I am sorry. I did not see it. It was on the other screen. Go ahead, Ron.

DR. FLAGG: Thank you and thanks to the panelists. A quick and simple question. What relationship do you have with civil legal aid providers, including referrals from civil legal aid providers in your service area. Our last speaker is not a direct service provider but he may have some observations on that as well.

PARTICIPANT: Why don't I yield to my two colleagues from the states first. And then I will offer a thought or two about that.

PARTICIPANT: I guess I will jump in. We do. Our clients obviously frequently need legal assistance. We do make multiple referrals for our clients to civil legal aid. In addition at least in the State of Texas, everyone is a required reporter if they suspect abuse, neglect, or exploitation. Many times we do get referrals from our colleagues at civil legal aid regarding abuse, neglect, and exploitation.

PARTICIPANT: Same for Missouri. Our clients often do require assistance with legal aspects of what they are doing. That is one of the services that we can refer people for using our program, our direct services program, if there are no other resources available to assist that client.

MR. BENSON: I will pipe in for a moment here. Mr. Flagg, thank you for a very important question. NAPSA conducted a nationwide survey to APS several years ago, I think it was six years ago, to ask them specifically about their experience in referring clients to civil legal services, including legal aid services. Our responses were discouraging at the time. We found that many APS programs did not make many referrals to civil legal services, especially to legal aid societies. We found that there was just a lack of a connection to them.

We embarked on a pilot training program in California, specifically to train APS workers and long-term care ombudsman together on the array of different civil legal services that exist and how to use them effectively. I think since that time - you just heard from Tim and from Kez and their states respectively. I think we have seen much more awareness of the importance of being free to refer your clients over to legal aid or other legal service providers. But I think we have a ways to go yet in that area and I know in working with Hilary Dalin at ACL, that is a priority for her. I think we will be doing a lot more work together on that front. Thank you.

MR. FLAGG: Thanks very much.

ACTING ASSISTANT SECRETARY BARKOFF: Let us open it up for some other questions. It looks like we have a question from Lois Greisman at FTC.

MS. GREISMAN: Hi everybody. Thank you. Thank you for the presentations. Specific question for Commissioner Wold. I really was taken aback by the turnover rate, which increased from 33 percent to I believe it was 57 percent and you spoke of a new training module. I assume part of that is designed at least to try to minimize that turnover rate. Can you mention for a moment what the main drivers are of that high turnover. I am sure salary is obviously a part of it but still that is a very high rate. Are there specific aspects of the new module that are designed to minimize that rate?

MR. WOLD: Certainly. I appreciate the question. That turnover rate I want to be clear is within our first-year employees. That is our APS ones. But still, overall, our turnover rate right now is running at around 28 to 30 percent.

We are designing the new training. Because the work is very complex, what we find is the new staff in that first nine months to a year are just not prepared and they do not feel confident to tackle the work. We are hoping that by being more hands on with the training and allowing them to learn the building blocks one at a time and to gain

confidence in different steps of the process that they will feel more supported.

I will also say that the pay does make a difference. In 2017, we were able to achieve across the board salary increase of about \$9000 for our case workers and frontline supervisors. It basically reduced our turnover from - at the time, it was around 23 percent down to 17 percent and kept it there for about a year and a half. But as we all know, prices change and people need more money. We are back to where we were at the time. But yes, I think the training is designed to really give people hands-on experience so that they feel comfortable and confident in the work that they are doing.

MR. BENSON: If I could add a comment. We hear from APS administrators like Kex and like Tim routinely. One of the factors that is tangible in its own way and that is not just the complexity of the job and salaries often are just abysmally low. Until recently, I think in West Virginia, full-time case workers are making about \$24,000 a year. But stress is also another factor. APS is a high-stress job so much so that we have heard APS administrators tell us that they have employees who would rather go work in child protective services where they do not perceive that as stressful as adult protective services. That is

something to really give thought to. We are trying to figure out what might be the solutions to that.

ACTING ASSISTANT SECRETARY BARKOFF: I see we have - I want to invite Mr. Jackson. If you have anything you want to add around turnover.

MR. JACKSON: No, just that the challenges that Mr. Wold laid out are the same as what we are going through here in Missouri. That is something that we are utilizing some of our ARPA funding to help us bulk up our training program. I think the staffing crisis has - it has shown us that we need to have a better onboarding process, a better process for retaining those new employees so that we do not lose them like Kez was talking about within six or seven months. We have to have something - we have to strengthen everything that we do on boarding and introductory training in order to maintain those folks.

ACTING ASSISTANT SECRETARY BARKOFF: Thank you. I see we have a question from Andy Mao at DOJ.

MR. MAO: Great. Thanks, Alison. Thank you all for the presentations. My question in particular is for Mr. Jackson about the Cumulus program. How much time did it take? Was it an off-the-shelf program that you were able to tailor to your needs or was it something that you had to invest significant time in developing it in order to make it all work.

The follow-up question to that is now that you have invested in that program, is it scalable. Is it something that can be shared with other APS organizations that do not have the resources but are looking for something like that?

MR. JACKSON: Great question and yes. We worked with our partners, our AAA partners. They had relationships with the folks that built the Cumulus platform. I believe it was already kind of - the platform was in existence. We just had to modify it for our needs. They were able to get us up and running by the time that we started the program. I would say it was pretty quick for the turnaround time as far as getting that going.

Yes, I do believe it is something that is scalable. We are already looking at ways that we can expand our program, ways that we can involve the AAA more in APS business basically. Yes, it is something that we feel like could lead to other ways to help our clients but it is also something that other states could benefit from pretty easily as a method of communication between APS and AAA network.

MR. MAO: Great. Thank you very much.

ACTING ASSISTANT SECRETARY BARKOFF: I see we have another question. Kelly Wante - I am not sure if you could say what agency you are from, Kelly.

MS. WANTE: Sure. Kelly Wante from the Department of Veterans Affairs. Thank you so much for the presentation and information. It was very insightful. I did want to ask - at the Department of Veterans Affairs, we have a lot of aging veterans that have complex care needs. I was just curious what challenges APS has seen in coordinating care with other agencies or external partners with that particular population.

MR. JACKSON: I will take that first. Honestly, we do have challenges accessing information in the VA system. But NAPSA is helping us to make inroads there by forming some relationships with the Veterans Association and helping to share information about how we can work better together.

But I would say at this point or historically, we have had a lot of challenges either getting information or sharing information or working together with some of the case workers within the VA system. That is not every place. But there are challenges along the way.

Hopefully, with what NAPSA - the efforts that NAPSA is putting forth to try to educate both the VA and APS on what services we can and cannot do, hopefully, that will improve our relationships a little bit.

MR. WOLD: And if I could piggyback on that, I do want to say as a former case worker, if the VA was involved

and services were being provided, it was a great benefit for our clients. But frequently, the struggle to Tim's point is opening up that line of communication between APS and the VA, having to make sure that you have the right protocols in place, the right signed letters, et cetera. It does create a barrier in some situations. But once we get working together, we can do amazing things. And the VA always comes through for our clients assuming we can open the lines of communication.

MR. BENSON: I will just add a comment to that since Tim mentioned NAPSA's role in this. An example of the turnover, a good turnover, I think, is that the VA hired away our APS administrator for Montana, Mr. Michael Hagenlock. And because of Michael's work - he is an exceptional APS administrator. He is now at VA. We had at our recently - included annual meeting in Grand Rapids, Michigan in August. We had the first time ever a major symposium featuring the VA. I think that has helped to build better bridges that we have had nationally at least with VA and I think the kinds of things that Tim and Kez are experiencing we are going to see more of as a result of those kinds of collaborations that that particular one is new to us.

ACTING ASSISTANT SECRETARY BARKOFF: I would like to take the moderator's privilege and actually ask a

question, really jumping off Kelly. I think this may be the last one before we - we probably have time for maybe one more after this. But I am really interested in jumping off that. I know we do and I appreciate Mr. Benson really mentioning how from many APS, it crosses aging and disability and within ACL, we are really looking to strengthen the approaches there. And many people may be eligible for Medicaid and some of the similar issues that we are hearing around lines of communication and information sharing that you just mentioned around VA. Sometimes we hear that around engaging with state Medicaid or disability services.

If I could ask maybe all three of you. Now, what are some partnerships and relationships that you are really hoping to build in the future and maybe for all of us who have touches across the federal government, how can we help support that so we are not duplicating efforts and so that we are really aligning our resources towards really our shared goals around vulnerable adults.

Why don't I open it up and maybe we will hear from states first and then, Bill, you can give the big-picture perspective.

MR. JACKSON: Paper, rock, scissors here. This may not be really what you are asking but I do know that one of the biggest outcomes or I guess side products of our work

to engage with the AAAs and create this support system for APS clients is we are forming a way better relationship with AAAs. APS, at least in Missouri, has not had an extremely strong relationship with the network of AAAs in the past. But this is really helping the AAAs to see what APS deals with and it is helping us to realize how big of a resource the AAAs can be as resource specialists. There is a lot that they can do to help our clients and so kind of using them with the program that we are using them for them to impact the APS clients. They are learning more about what kinds of challenges we deal with. It is really kind of strengthening the aging support network in Missouri.

Again, Alison, I apologize. It may not be the question you were asking but it is definitely an outcome that we have seen as they strengthen the relationship with a group of agencies that we have never really had that close a relationship with. It is exciting.

ACTING ASSISTANT SECRETARY BARKOFF: That is great.

MR. WOLD: Tim and I are meeting at the end of the week to discuss retention and recruitment. But he is not aware that we are also going to be discussing his relationship with the AAAs and how we can piggyback on that here in Texas.

I do think in my experience, so much of what APS ends up doing is acting as an advocate for our clients and trying to make sure that they are able to access the services and the benefits to which they are entitled. We do spend a great deal of effort and energy, trying to make sure that people have access to Medicaid services and to the services and the benefits within the Medicaid program that they should be entitled to. There is a lot of coordination and cooperation that needs to happen there. It is a huge part of our work. Thank you for asking that.

ACTING ASSISTANT SECRETARY BARKOFF: And Bill, we will let you be our closer here.

MR. BENSON: I am going to try and do this very briefly in three parts if I can very briefly, Assistant Secretary Barkoff. One is that the number one source of reports is self-neglect. We believe that reflects the very limits and weaknesses in our system of long-term services and supports. To the extent that we can improve those other systems, Medicaid, the aging network, and so on, to pick up the services that people need so that they are not in self-neglect circumstances. We believe that would reduce self-neglect case loads for APS, allowing them to spend their time on other forms of abuse and neglect and exploitation.

Secondly, we work hard at the APS. I know Tim and Kez do this all the time to try to build stronger

relationships with law enforcement. I think that there have been great improvements there. But there is still work to be done whether it is on the prosecution side and certainly on the police side as well.

And then third, building our relationships between the disability and aging world is really important. We just concluded and you spoke of several of them, Alison, that was a series of webinars with new partners for us from the disabilities world that we have not worked with in the past at the national level. Hopefully, we will be doing a whole lot more of that. People with disabilities who are not elderly represent about one-third of the caseloads across the country. They have not been adequately recognized in our work. I think we are making some inroads and need to do more.

ACTING ASSISTANT SECRETARY BARKOFF: Great. Thank you, everyone. This was really such a great panel. We could probably go on two more hours. But I think the takeaway really is that I have here is this funding was really important. It really made a big difference. I know we hear from advocates all the time and how important this funding is and really sustaining them is critical. It sounds like from each of you, you have both used it in ways that meet your local needs but really there are some commonalities across APS services. And it sounds like having somebody at

the table, having some resources really helps build partnerships and I am at least speaking for ACL but I think I am speaking for all of the EJCC members. We are really here to help support all of you and to the extent our networks are partners or should be partners, we really want to help facilitate that. Thank you, Bill, for everything you are doing from a national lens. Thank you, Tim and Kez, for just the incredible work and for sharing what you are doing on the ground.

We will now be transitioning to our second panel. Really excited to hear from folks about really the significance of the Elder Justice Act. I think hearing about this funding and then hearing about really what are the goals of the Elder Justice Act, how close are we to meeting them, I think will be a really nice complement to what we just heard.

Our first speaker will be Dr. Heather Mutchie, who is a gerontologist and post-doctoral researcher from Purdue University. And then our second speaker will be Bob Blancato, who is the National Coordinator for the Elder Justice Coalition. Dr. Mutchie will be kicking off the panel today. Let me turn over the floor to you. Thank you.

**Agenda Item: Panel: Significance of the Elder
Justice Act**

DR. MUTCHIE: Great. Good morning. I also have slides, but I will keep moving along. Thank you for allowing me the opportunity to present the research findings of myself in collaboration with Dr. Marian Liu of Purdue University and the National Adult Protective Services Association. I would also like to thank the states and territories who provided their plans and the Administration for Community Living for inviting us to share these findings.

Important acronyms I am going to use throughout include departments and organizations such as the Administration for Community Living, Adult Protective Services, Department of Health and Human Services, and National Adult Protective Services Association, Articles of Legislation, including the American Rescue Plan Act, Elder Justice Act, Older Americans Act, Social Services Block Grants, and Coronavirus Response and Relief Supplemental Appropriations Act as well as data sources, including the APS, Administrative Data Initiative, and the National Adult Maltreatment Reporting System.

To understand some of the significant of the \$276 million of funding from the American Rescue Plan Act, which allocated funding to be used as the state APS programs see fit, we need to place in context of almost 100 years of older adult policy. In 1935, the Social Security Act was

passed, which many are at least in part familiar with in regard to Social Security income and its associated taxes. Thirty years later, the Older Americans Act was passed, which served older Americans to maintain independence and support the continuum of care through initiatives like Meals on Wheels, transportation assistance, counseling, and information for family caregivers, and preventing and detecting elder abuse among others.

At the turn of the '80s, Title XX of the Social Security Act amendments, Social Services Block Grants were approved and opened to first-ever federal funding to APS. Again, 30 years later in 2010, the Elder Justice Act was passed, which established this Elder Justice Coordinating Council. And finally, after years of advocacy, we have movement in the mid-aughts. In 2012, ACL was established under DHHS, and in 2014, APS is housed under ACL and the NAMRS database is developed.

We have some context for funding in which the Older Americans Act was appropriated \$1.8 billion and, in that year, APS received less than .5 percent of that funding. The next year ACL was able to offer state grants to enhance APS through appropriations, which includes an application and is a competitive process.

In 2016, the APS Voluntary Consensus Guidelines were originated, and the Elder Justice Innovation Grants

were opened as well as the Older Americans Act being reauthorized. And then of course, there is 2020, the year of the COVID-19 pandemic. The whole world felt the effects but especially for those of us working with older adults and those with disabilities. The Older Americans Act was reauthorized again and the \$93.8 million from CRRSA were allocated to APS for COVID relief supplementation. In 2021, the Elder Justice reauthorization and modernization was introduced to the Senate and ARPA was passed, giving APS programs the first ever freely allocated funding and certainly funding at this magnitude.

This year in 2022, the appropriations bill introduced in the House offered \$80 million to states to support APS. The Senate version of the bill instead provides \$6 million for elder justice activities at ACL. If this all went to the states, it would represent approximately \$46,000 per state. In 2035, which seems both so near and so far, marks 100 years of older adult policy in the US, which brings us to our comparison of state plans for the ARPA funding and their environmental scans.

All operational plans were approved by ACL before finalization. ACL offered webinars, toolkits, and monthly or weekly meetings during the planning process. And plans were guided by the National Voluntary Consensus Guidelines. Fifty-one states and territories, hereafter referred to as

states, provided budget segmented operational plans to this project. We were able to assess \$238 million to budget funding. Environmental scans were brought into this project by 43 states and were conducted by the states at the discretion of the APS programs as to who was included in the conversations such as community partners, investigators, supervisors, and administrators.

We were able to establish five main funding categories and 21 subcategories from the operational plans and the same five main categories and an additional ten subcategories from the environmental scans. We used a qualitative assessment of the operational plan budgets. They were separated into categories and subcategories based on what was perceived as the major focus of that plan. Some plan segments may have crossover with other categories and subcategories but they could not be segmented by the funding. All initiatives are under one category or subcategory unless that budget specified subparts.

The first panel highlighted the significant and impactful work that APS does. What did we find are the needs of APS programs from the environmental scans. The five main categories were clients, staff, programs, community, and policy. It was clear that many states share similar struggles despite being so different. Problems were

particularly centered around staff, community, and policy and I believe there might be some clicks there.

There were many programmatic weaknesses also identified but those were significantly more disparate. These scans demonstrated a consistent need for training, staff retention, resources, and funding.

States cited that staff training lacked consistent funding, standardized requirements, dedicated trainers, and support for social work degrees. Retention of hired staff was impacted by high caseloads, non-competitive salaries, and a lack of advancement opportunities.

Additionally, community resources and related services are not keeping pace with APS needs due to a lack of state funding to those resources. Rural areas have a great limitation to the available resources and there are needs for professionals such as geropsychiatrists in communities. Again, it all comes back to funding, a lack of consistent and appropriate funding at local, state, and federal levels.

Knowing these weaknesses, what projects were funded? \$34.7 million went to client initiatives, \$77 million to staff, \$90 million to programs, \$35 million into the community, and \$1.3 million on policy. Twenty-seven states put \$22 million or 9 percent of all the funding to client goods and services as shown in purple. This may seem

small but it is important to remember that this is the first time ever federal funding of this caliber and is made clear by the rest of the funded initiatives. The programs and their staff had dire needs. Much like in an airplane, please put on your mask before helping others.

Forty-five states or 80 percent of our sample put money toward staff training. In programs, 11 percent of overall funding went to improving technology infrastructure. I say improving and not innovating because a lot of the technology involved creating or updating dashboards, IT support for documentation, web reporting and case management. While maybe not exciting from an innovation standpoint, it is important to bring the technological capacity of APS up to what reporters and staff need to function effectively.

I also wanted to call out the work to improve data collection and reporting. These initiatives were primarily related to being in alignment with NAMRS, improving remote work reporting, and updating the standardized measurement tools. Many of these could also fall under technology but were so specific to data that we decided to separate them out.

It should also be noted how important working with the community is to APS. as noted by the work to support partnerships and public awareness campaigns.

Additionally, some states chose to work specifically training professional community partners, including law enforcement, hospitals, judges, and prosecutors on how to work with APS.

Where do the gaps remain? This graph shows the environmental scan weaknesses overlaid in green with state-funded initiatives with the number of states with initiatives listed in boxed. Thanks to ARPA funding, states were able to make substantial improvements to technology and training.

One problem with showing data is that it does not convey everything equally well. We can see that it looks like states were able to overcome hiring and contracting. However, in a more detailed review, we saw that most of the hiring and contracting work for grant managers or for project managers, not the full-time staff and investigators, which comprise the bulk of the cited weaknesses. In fact, many programs were not able to hire new full-time professionals on one-time funding.

Some weaknesses like training and goods and services were able to be targeted by states. Here, you can see that not all weaknesses were addressable by ARPA funding as shown by the purple bars, which had no coordinated funding. The purple represents unaddressed weaknesses that are both pervasive and continuing. APS

caseloads remain a weakness. A NAPSA Research to Practice Committee has been calling for a comprehensive caseload study and will continue to pursue this avenue of research.

Community resources are a large source of weakness for the states. But APS cannot be the resources, the home health care, the nurse psychologists that the clients need. Public health and COVID-19 still remain a concern for many medically compromised in complicated populations. Finally, funding. APS programs may not have the capacity to pursue more funding at this time. They are very busy. But we can fight on their behalf for APS and their clients that they serve.

ACTING ASSISTANT SECRETARY BARKOFF: Thank you so much, Dr. Mutchie, for that great presentation. We are going to hold on to questions until we finish the panel.

Our next panelist is Bob Blancato, who will be giving us really a comprehensive view of the Elder Justice Act, beyond just APS, and highlight what has changed in the last ten years since its reauthorization and its passage and the opportunities and challenges ahead. Bob, I will turn it over to you.

MR. BLANCATO: Thank you Acting Assistant Barkoff and Elder Justice Coordinator Andy Mao. It is an honor again present testimony to the Elder Justice Coordinating Council on behalf of the Elder Justice Coalition. I

presented it at its very first meeting in October of 2012. I commend the leadership of the ACL and the Department of Justice in keeping this Council active and impactful.

The EJCC remains one of the main accomplishments of the Elder Justice Act. The Council's premise was simple. Get all the federal agencies who are doing work of any kind in elder abuse prevention together to emerge with a more coordinated federal approach and response. This is what has happened over three different administrations. I am pleased to note that the bills introduced so far to reauthorize the Elder Justice Act have all included continuation of the EJCC.

The Elder Justice Coalition is a non-partisan 3000-member group dedicated to advancing elder justice policy at the federal level, whether through passage and implementation of legislation or through regulatory action. We were established in 2003 at the time the first Elder Justice Act was introduced.

In your letter of an invitation, you asked me to offer my thoughts on the reauthorization of the Elder Justice Act. It is imperative that this landmark law be renewed and modernized in this Congress and the opportunity is still there.

But before I return to reauthorization, an even more urgent matter, which you have heard a lot about

already, is funding for the EJA for federal fiscal year 2023. Our coalition was heartened by the congressional action in the pandemic bills, which provided the EJA with unprecedented funding, totaling \$376 million for FY21 and 22. It was done in direct response to several pandemic-related issues, including the proliferation of scams tied to COVID-19 and issues related to access to ombudsmen to nursing homes.

These funds were distributed properly and promptly by ACL and used appropriately by APS agencies and ombudsmen programs at all 50 states. I have identified some of the uses in my written statement, including supporting tribal APS programs in meeting growing demands, providing emergency housing including shelters and wrap-around social services for elder abuse victims across the country. Some of the uses by the ombudsmen include in several states including Louisiana and Texas, with shortages of volunteers, allocating funds to recruit volunteers to improve long-term care resident access to advocates, and in North Carolina, providing funds for family councils in longer-term care facilities.

What has been proposed to date as was mentioned in the Senate for FY 2023 would slash APS funding from \$188 million down to \$6 million, a 95 percent cut. That will be devastating to APS especially as we continue to emerge from

the pandemic and more cases are expected to be reported. We, in the coalition, support a minimum funding level of \$80 million for APS as provided in the bill passed by the House Appropriations Committee. The coalition also commends President Biden for calling for an almost-doubling of funding for the long-term care ombudsman program and we urge Congress to support this level as well in a final FY 2023 funding bill.

Now, moving to the Elder Justice Act, briefly a history. Early next year, we will observe the 13th anniversary of the signing into law of the Elder Justice Act. It was a landmark law at the time and its benefits can be seen in the following. It included a first-time definition of elder justice in federal law, unifying statutes with undefined references to elder abuse and elder justice. A total of almost \$400 million has been appropriated by Congress for activities previously never funded for elder justice, including the National Adult Maltreatment Reporting System, Elder Justice Innovation Grants, and a first-time federal home for APS.

The road to passage of the Elder Justice Act was long and winding. Finally, it did become law as part of the Affordable Care Act. However, its authorization ended at the end of FY 2014. Work to ensure the law's provisions

were funded and authorized has been ongoing since its initial passage.

And if you want to talk about the rationale for why we need an Elder Justice Act, the Justice Department says one in ten older adults are victims of elder abuse. In terms of reported cases in 2019, just over 1.3 million reports of abuse, neglect, and exploitation were received by APS programs nationwide, of which two-thirds were deemed eligible to investigate.

The statistics on the impact of financial abuse are especially disturbing when one considers that financial security is necessary for healthy aging. For example, according to the FBI's Internet Crime Complaint Center, people over 60 made up the majority of US cybercrime victims in 2019 and accounted for the most losses of \$835 million or an average of nearly \$10,000 per victim.

According to the FTC, romance scams alone resulted in victims losing \$139 million in 2020. This scam is especially disturbing because it involves perpetrators seeking out isolated and lonely older adults, a problem made even worse by the pandemic.

The COVID-19 pandemic has presented a whole range of new realities in the elder abuse and mistreatment space. For example, a May 2021 FBI report stated that losses elder fraud jumped by 30 percent in 2020. FTC indicates that

older adults lost more than \$100 million alone to COVID-related fraud scams in 2020. The most common of these COVID scams included contact tracing scams, virus and antibody test kits, vaccines, and miracle cures. The best research we have suggests that for every act of financial exploitation that is brought to the attention of authorities, 44 acts go unreported. Thus, the actual dollar loss is considerably higher.

Talking about the reauthorization, in August 2021, the Elder Justice Reauthorization and Modernization Act was introduced in both chambers of Congress. The most recent version of an Elder Justice Act reauthorization, the House bill, H.R.4969, was authorized by House Ways and Means Chair Richard Neal with primary co-sponsor Representative Suzanne Bonamici, co-chair of the House Elder Justice Caucus. The Senate bill, S.2674 was authorized by Senator Ron Wyden, chairman of the Finance Committee, with primary co-sponsor Senator Bob Casey, Chairman of the Special Committee on Aging.

The House bill included the full \$4.1 billion for the Elder Justice Reauthorization in its version in the Build Back Better bill, which passed a year ago. However, that legislation was never considered by the Senate. But the House bill did have it in it. \$1.6 billion for post-acute and long-term care worker recruitment and retention,

\$1.4 billion for APS functions and grant programs, \$172 million for long-term care ombudsman program grants and training, \$500 million for supporting linkages to legal services and medical-legal partnerships, and \$250 million to address the growing problem of social isolation and loneliness.

We believe that the Elder Justice Reauthorization and Modernization Act is a comprehensive, coordinated and forward-looking bill. It will result in a genuine investment of nearly \$4 billion in an elder justice infrastructure, featuring adult protective services and the long-term care ombudsman program along with the important addition of improving staffing in nursing homes.

New additions to the elder justice program include supporting medical-legal partnerships. And we especially support the elder justice grants to Indian tribes and tribal organizations.

For reauthorization to occur in this Congress, it must pass in the Senate either as a free-standing bill or part of a larger bill and then be reconciled with a House version. Our coalition is working with Chairman Wyden's staff to try to get this accomplished. But the path is uncertain at this time. Most indications point to an end-of-year omnibus appropriations bill as the likely vehicle.

Also possible is a developing mental health bill. We are most certainly working on all possibilities.

Let me also add. It is vital that for the President's FY 2024 budget to contain adequate funding levels for the Elder Justice Act. I urge all Council members to advocate for that as we intend to also press this case with the Office of Management and Budget in the coming days.

An enduring part of the history of the Elder Justice Act has been the support it has received on a bipartisan basis in Congress. That has carried over to the work of the EJCC, having been started in the Obama Administration, maintained and strengthened in the Trump Administration and now continuing with the important work in the Biden Administration. That absolutely needs to continue. How can one even try to rationalize allowing partisanship to interfere with the goal of achieving elder justice by the prevention of elder abuse. Let us never reach that low as a nation. Thank you very much.

ACTING ASSISTANT SECRETARY BARKOFF: Thank you so much, Bob, for your history and informative remarks.

Council members, we will now launch into our question-and-answer segment focused on the significance of the Elder Justice Act. Why don't we go ahead and unmute everyone again for our second round of questions for

panelists? It looks like we already have a question. Let us call on Ben from the Social Security Administration.

MR. BELTON: Thank you, Alison. And good morning, everyone. The presentations were wonderful. Bob, always a pleasure seeing you, my friend. Thank you for all that you do.

This question is actually for Dr. Mutchie. Forgive me if I am mispronouncing your name. One of the weaknesses that you discovered or the research discovered was around public awareness. If I broke this down correctly, the limits placed by a client's self-determination - I was just curious about that and wondering if you could maybe expound on that a little more particularly about the limits on placed by client's self-determination.

DR. MUTCHIE: I do not think I fully understand the question. The public awareness was more related to the public not knowing that APS exists, not knowing when is the appropriate time to contact - but I, as a random citizen, am the right person to be making that contact. That kind of awareness is more the weaknesses that were cited.

But you are right that self-determination does play a role in APS being able to offer their services. With those two things clarified, could you reiterate the question please?

MR. BELTON: I think that is listed as a challenge under public awareness like a visibility understanding of the limits that are placed by a client's self-determination. But I think you explained that. Thank you.

DR. MUTCHIE: Okay. To answer your question just a touch more, that is something that does come up as a weakness as negative perceptions of APS. Some members of the community felt like APS did not do anything even though I called but there is that limit of self-determination to be able to help the potential client. That may be where some of that comes in. If the public were more aware of that self-determination component, maybe that could help. I understand that connection now. Thank you.

ACTING ASSISTANT SECRETARY BARKOFF: Thank you. Why don't we open it up. Do other people have additional questions - while I am waiting for people to raise hands. I will throw one at Bob. What do you think some of the most important aspects of elder justice should be when considering designing any policy or program? We are looking at how we operationalize the Elder Justice Act. What are really some of the key components from your incredible decades of advocacy around elder justice?

MR. BLANCATO: I think the fundamental Elder Justice Act did lay out the principles of what would constitute a good elder - with dedicated funding for Adult

Protective Services and not having it be under a block grant. It was too much discretion going on in certain states. Twelve to thirteen states never provided any money for APS a number of years ago.

Strengthening the algorithm was very important. Unfortunately, there are unfunded pieces of the Elder Justice Act, including addressing staffing. Way back in 2010, it was identified as an issue in a nursing home that had to be dealt with. If we could fund forensic centers, which was also called for in the Elder Justice Act so that when an older person goes to an emergency room and has a bruise, it is not automatically assumed they had a fall. They could actually be a victim of physical abuse. We have wonderful forensic centers in the child abuse space. It was hoped that we could do the same thing in the elder justice space.

Unfortunately, as often the case with many programs, it is about money. It is about adequate funding. I think because the investment made through the pandemic bills super charged I guess to some extent the Elder Justice Act. If you figured that it took 10 or 11 years to get about \$60 million in funding and 4 months to get \$376 million in funding, that tells you something. You have to build from that.

The part that we like about the reauthorization is the modernization pieces and for you in particular, Alison, because those grants that were going to be - social isolation, we are going to be dedicated to area agencies and community-based groups to address that issue.

I think probably if we are looking broader, we have to focus on the linkages, the linkage issues between elder justice and falls prevention and isolation and things of that nature. We do not want to silo this issue too much. There is an opportunity to do a lot. But we need to get adequate funding and we need to get this law back where it should be as part of a law not being an expired authorization.

ACTING ASSISTANT SECRETARY BARKOFF: Thanks, Bob. As you know in ACL, we are all about partnerships and leveraging and that is really why the Elder Justice Coordinating Council is so important to the work that we are doing to make sure we are leveraging all of the levers that we have.

MR. BLANCATO: Alison, one more point on that when Ben mentioned it. I remember several world elder abuse awareness days ago. They announced through the Social Security Administration that all 64,000 of their field people were going to be trained in elder abuse awareness to help with their clients as they came in. That was a

remarkable accomplishment. These were the kinds of things that were envisioned when the EJCC was created by Congress. Get the federal agencies together. There are more resources than we know that are being utilized but are they coordinating. That is the key. That is what makes this thing so good.

ACTING ASSISTANT SECRETARY BARKOFF: Great. To you, to the public, to everyone who is commenting, keep bringing those ideas on how we can work together and then we may have some leaning in again to do with partnerships on SSA.

I see we have a question from Atalaya at AmeriCorps.

MS. SERGI: Thank you. Thank you both for all that you shared. Hi Bob. Good to see you again. I wanted to ask, being from AmeriCorps and AmeriCorps Seniors where we do - in AmeriCorps Seniors, we do have a lot of volunteers who work in this area or who are supporting older adults who are isolated. What are some best practices? What are some ways that we can really support all of our volunteers no matter whether they are working with isolated older adults or not to be aware of the signs that there may be abuse going on to be able to be champions to talk about APS and that it is not a place to be afraid of and help it to

improve its reputation. If there are things that you all think that we could do better, please share those.

MR. BLANCATO: I would be happy to start it. I think to a great degree, that is already happening. But I think you can always do more. I think it really is about knowing how to direct the older adult to resources that can prevent elder abuse. And if there is unfortunately a case involved, how do you report? How do you get it into the right hands to get it investigated, to get it resolved? These are local determinations.

Because your seniors are attached to community-based programs a lot, that is a fairly easy transition to make. But a lot of times people are not sure what to do, where to go. That is why this awareness about APS is very important and it starts at the local level.

I think it is great to have the resources of AmeriCorps Seniors in this discussion in this space because you cannot stop what you do not report. Simple as that.

DR. MUTCHIE: I also might want to jump in and just plug, as Bill Benson mentioned, the NATC, the training center that NAPSA has opened is free, comprehensive, and contains lots of resources. You do not have to be an APS investigator to utilize the NATC and learn about those signs and symptoms and then adding that on to those local partnerships of knowing and having a face-to-face to know

who I am supposed to contact. Those two things in collaboration could be really successful.

ACTING ASSISTANT SECRETARY BARKOFF: Okay. Do we have other questions? Otherwise, I am going to start popping them at people. While we are waiting for people to raise hands, I had a question for Dr. Mutchie. Again, thank you so much for sharing the research that you have done. What do you think are opportunities for future research and places where we still do not know enough? I will kind of tie it into the last question about how we can really use research to inform how we are educating the public and really some of the compelling data that you brought to the table. Where are you looking going ahead? Bob, I will ask you. I bet you have the recommendations. I will throw the question to you afterwards.

DR. MUTCHIE: Like I mentioned at the end of the weakness gaps, a comprehensive caseload study to really understand what APS investigators are able to take on and to balance that out really with the understanding that we know we are understaffed at APS. We know that the aging population and that includes those older than 65. But APS does not only give services to older adults. It is adults and adults with disabilities in many states. That comprehensive caseload study is something that we are definitely going to continue to push for.

Other areas of research. You had mentioned educating the public and there are - I think it is framing elder abuse through reframe aging. It is doing a great job of using research-informed practices to reshape how we discuss the problem of elder maltreatment as it is not out there, individual problem, and also bringing it to a systems focus. Definitely check out reframing elder justice for that public education component.

ACTING ASSISTANT SECRETARY BARKOFF: Great. And Bob, I will ask you. What areas do you think we need future research or more information related to elder justice?

MR. BLANCATO: Data, data, data. In the world I live in in the policy advocacy world, we get that question all the time. What are the numbers? What do the numbers show? By the way, I would also point out in having sat through discussions with OMB in the past, they also ask about the research. What does the research show? When you get a policy person like the Office of Management asking about research, you know its value is in its translation from the research into policy initiatives.

For example, years ago, we were involved in a study to determine how much older adults lose from financial abuse. When the number came out to \$2.6 billion that - used over and over again by members of Congress in congressional hearings and bills. They were yearning and

searching for a number that they could tie. I think anything that can produce those kinds of numbers. NAMRS is doing a good job obviously with the reporting by APS. But Medicaid folks need to be reporting more on the elder abuse side. We need to see more of that going on.

I read something just the other day in Nature Aging where they are going to try within a decade of healthy aging a bunch of researchers to create an intervention accelerator to speed up the development of effective interventions for abusive older people in community and institutional settings within low, middle, and high-income countries. That is a great novel idea. I think as we go forward, we love to see those kinds of ideas going forward.

ACTING ASSISTANT SECRETARY BARKOFF: Great. Thanks, Bob. I will ask one more time to our committee members if you have anything you would like to ask our great panelists. You are welcome to jump in again. I know this is an area you care a lot about.

MR. BELTON: Absolutely. This is for anybody who may have anything to share. I was curious about any best practices or special considerations that APS agencies and workers may have when it comes to reaching and supporting traditionally underserved populations or communities of

color on any particular insights on those particular communities would be really helpful.

MR. BLANCATO: I have a brief answer to that, Ben. I think it is something we have talked about I think in my written statement. We have a traditional undercut of reporting in those communities in elder abuse in African American, Hispanic community, Native American community. We need to accelerate our capacity to get reports on older adult individuals who could be victimized by abuse and that is something we need to invest more dollars in because it can be done. With this administration's commitment to equity, that is a first and foremost place to look. Where are we undercounting individuals who could be provided services? Because if they are not counted, they are not going to be served. We need to invest more in that space and hopefully, we can see that occur as Congress understands the importance of that data collection. That is one area I would give as an example.

DR. MUTCHIE: I am a researcher. I am not directly affiliated with APS and their practices so I would not venture to tell them how to do their best practices. But as Bob had mentioned, data, data, data. We need data on these underserved populations because the data that we already do have if it excludes them or does not properly represent those populations, then we are applying practices that

maybe are not actually the best fit. From my perspective as a researcher, the best thing we can start with is echoing Bob and getting that data and that participation.

Agenda Item: Closing Remarks and Adjournment

ACTING ASSISTANT SECRETARY BARKOFF: Great. Thank you again to Bob Blancato and to Dr. Heather Mutchie. This was a really great panel today and thank you both for being on it.

We are now kind of reaching the end of our meeting. I have to say that this has been a really incredible meeting. I know for myself, I learned a lot of important things and have a lot of things I am thinking about how we can work together, how we can sustain the great things that are happening with states from the investments of the COVID-19 supplements. I hope everyone here really learns something important.

As we engage in these conversations about elder justice, it is really critical that we maintain this holistic view of aging as well as disability because we certainly heard this is about all vulnerable adults.

Deputy Secretary Palm talked about really the importance of gratitude and there are several other observances and commemorations that I do want to just mention are happening this month. It is National Alzheimer's Disease Awareness Month, National Long-Term

Care Awareness Month, and National Family Caregiver Month. I think for those of you who engage and follow ACL, we have a lot in the space of older adults that we are looking at this month.

As many of you may have heard and I do want to highlight this because it may be of interest to many folks who are engaged in the Elder Justice Coordinating Council. In September, the Department of Health and Human Services through ACL released the first-ever national strategy to support family caregivers. And of course, you will see throughout the report if you read it that there is such an important role that family caregivers play for so many older adults and of course that includes being there to help identify abuse, neglect, and maltreatment. And the report highlights nearly 350 actions that the federal government across 15 federal agencies has committed to take to support family caregivers in the coming years and more than 150 actions that can be developed at other levels of government and across the private sector to build a system to really support family caregivers. It is a really important strategy. We submitted it to Congress and we will continue updating that Report to Congress. But it is all of our report. We have put this out for public comment and we really encourage all of you to comment. You can easily find it at acl.gov/caregiverstrategy.

Again, before we end, I just want to highlight a few themes from today's presentation. It was really exciting to hear from the first panel how impactful this funding has been and again, how there are some common themes and common needs across states but also really the innovation that happens at the local level.

It was really great to hear about new partnerships that are being strengthened and built. I think there were even some additional ideas that came from the Q&A from the Council members.

I really want to thank Bill for this broad view of what is happening nationally and the steps that really we need to take to make sure that the progress we have made with this additional funding sustains.

I also really want to thank the second panel. I really learned a lot and I think the research that we have seen that was presented by Dr. Mutchie was really helpful in helping us know where we are making progress and where are gaps and really what do we have ahead for us moving forward.

And of course, thank you, Bob, for really sharing your thoughts on the importance of the Elder Justice Act, some of the places that we really need to be looking forward in the next reauthorization and not only focusing of course, Adult Protective Services as a key part of the

Elder Justice Act. But I think you really helped explain the breadth of things like the long-term care ombudsman program and potential strategies around reaching social isolation and more.

It is really evident to me that EJCC and all of the stakeholders who joined us today are truly deeply committed to the many facets of elder rights and elder justice and that together and I am particularly speaking to the Council members that we need to make sure we are using every tool in our toolbox to work together to protect the rights of people, to live free from abuse, neglect, and exploitation.

At ACL, our Office of Elder Justice and Adult Protective Services, has truly worked tirelessly to be available to support every state and every territory's APS program as they implement the recent historic investments of this funding.

I truly do want to thank the ACL staff. You have just been seizing the opportunity that was brought before us and really - sometimes when you get funding, maybe some people do not know what to do. But I know our team has been really hoping and had a great strategy and again in partnership with groups like NAPSA and others were able to hit the ground running and really make a huge difference.

At ACL and really across HHS and the federal government, we remain committed to providing high-quality technical assistance and to supporting all APS programs. We know it is a really important time for guidance. What I will say is keep your eyes open as ACL and the federal government are sharing areas that we will be doing work moving forward because we have some big things to share and hopefully at the next Council meeting, we can say even more.

I know we have a lot more work to do and that our fellow Council members feel the same way. But I hope everyone can take a moment and really recognize what we have achieved together. Bob, thanks for this history of really the last ten years that we have been working together. I hope everyone was really energized by today's presentations about both what we have achieved and what we have to do moving forward.

We really heard today about the importance of taking the long view. While we have made some really impressive gains in the last ten years, we need to stay focused. We need to keep working on these very big but I think doable long-term goals that we have while also being responsive to these day-to-day challenges and concerns.

It has truly been a privilege to host today's meeting and I really again want to thank each and everyone

of our expert panelists and thank my fellow EJCC principal members for your really insightful questions and conversation.

The work of EJCC is an ever evolving, all of government approach to elder justice. I just want to end by saying a huge thank you for coordination of today's meeting and all that you do. To the staff of ACL's Office of Elder Justice and Adult Protective Services, for planning and producing today's event, and that of course includes Stephanie Whittier Eliason, Aiesha Gurley, and Eden Ruiz-Lopez for planning and producing today's event.

Finally, I just want to thank all of the attendees for joining us virtually. We always appreciate the issues you bring to our attention. We are all partners in this critical endeavor, striving towards elder justice.

As the chair of today's meeting, officially today's Elder Justice Coordinating Council meeting is now closed. We will reconvene again in the spring of 2023 - bring ourselves together again to address elder abuse, neglect, exploitation, and other kinds of maltreatment of older adults. Thank you again to everyone for joining us today and have a great rest of the day.

(Whereupon, the meeting adjourned at 11:52 a.m.)