

Executive Office of Elder Affairs



Twenty One to One

How the Massachusetts Adult Protective Services Unit Defied the Odds To Create A Centralized Intake Unit





Agenda

- Background of MA Protective Services Program**

- Programmatic Changes in FY17**

- Central Intake Unit**

- Web Intake Form**

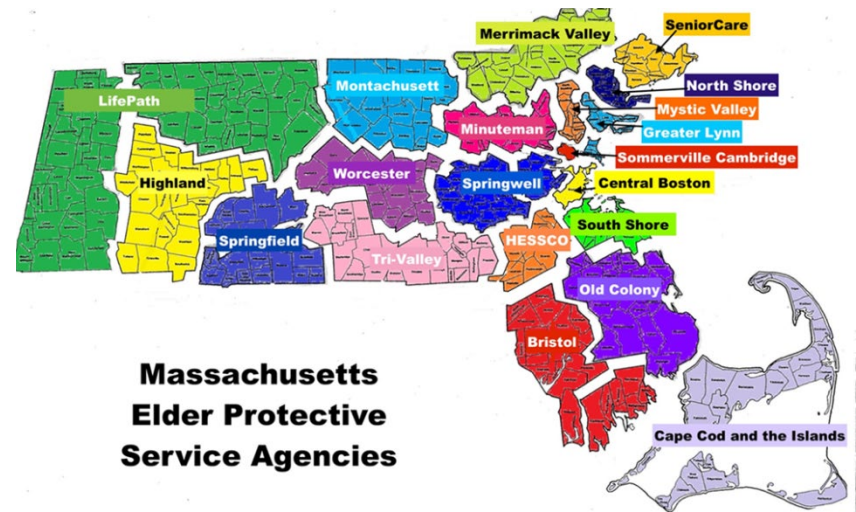
- Trending of Report Methods**

- Questions**



Background

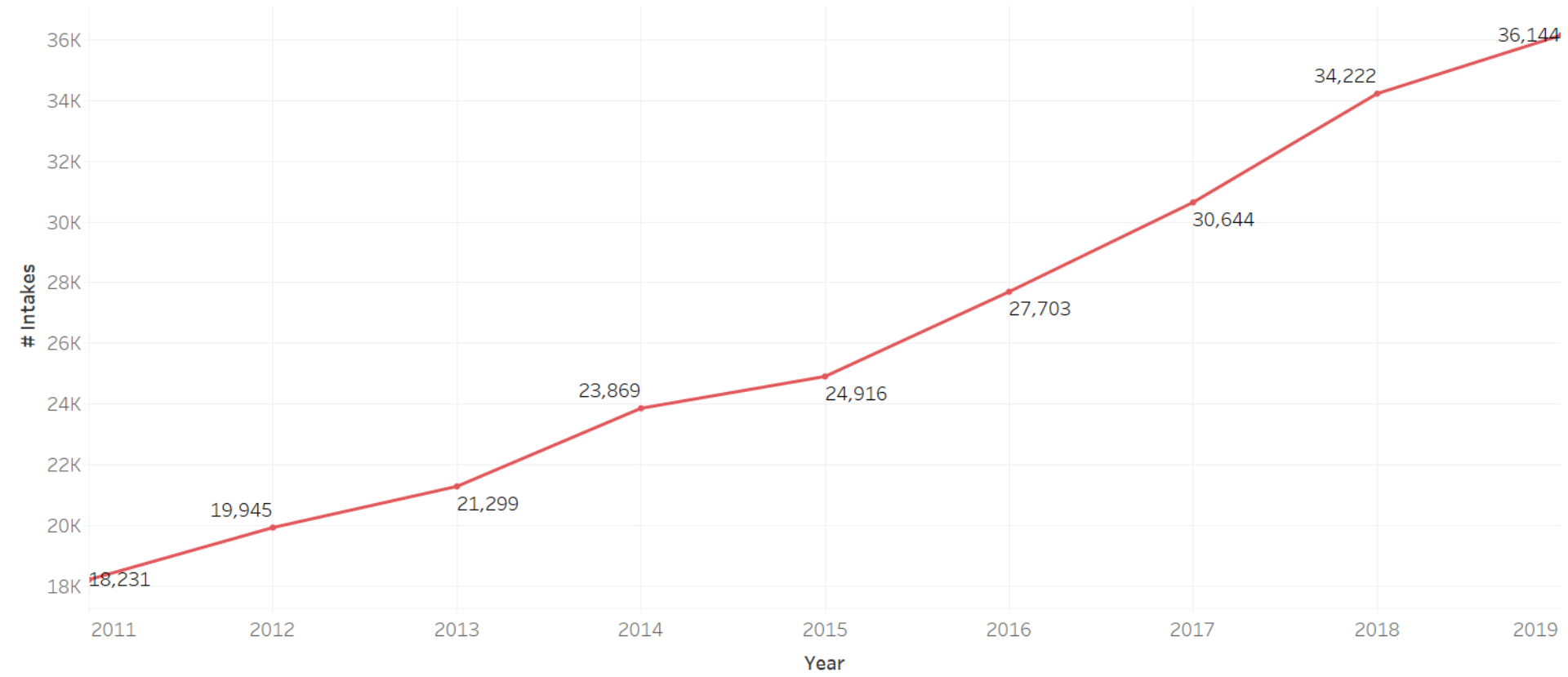
- ❑ Oversight Agency – EOEI
- ❑ The Protective Services Program is made up of 20 community based agencies covering every city and town in Massachusetts.
- ❑ Prior to FY17, PS Agencies handled Intakes in their area.
 - ❑ An Elder Abuse Hotline covered Intakes after-hours/weekends.
- ❑ Statewide APS system implemented in 2009 to track Intakes & Investigations.
- ❑ Major Programmatic changes in FY17 to better meet the needs of the elders.





Elder Abuse Reports in Massachusetts

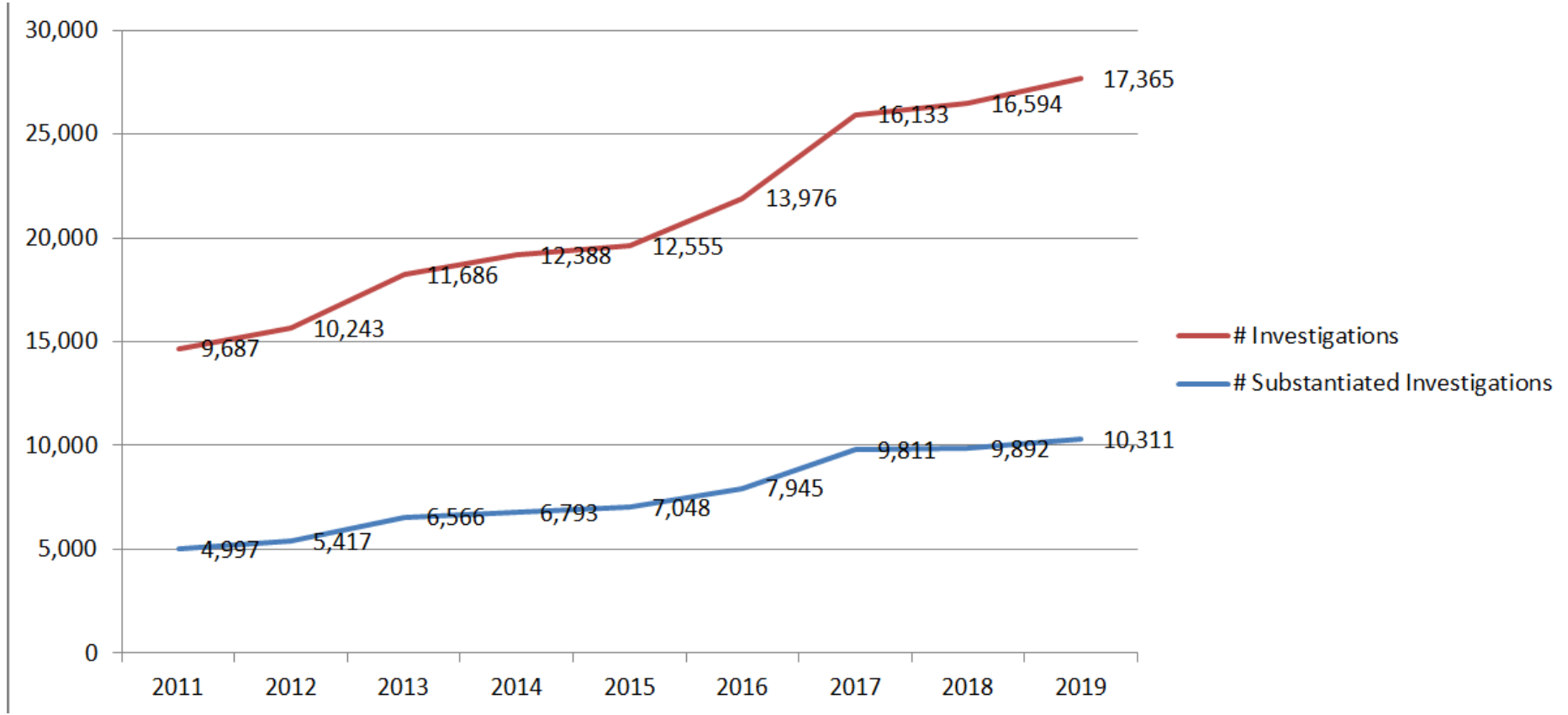
Number of PS Reports Since 2011



The trend of sum of # Intakes for Year.



Investigation History





PS Funding Methodology Prior to FY17

PS Agencies Were Paid for the Following Activities:

- Intakes received**
- Cases screened in for Investigation**
- Completed Investigations**
- Investigations Substantiated**

After-hours Elder Abuse Hotline had a flat-rate contract



FY17 Programmatic Changes

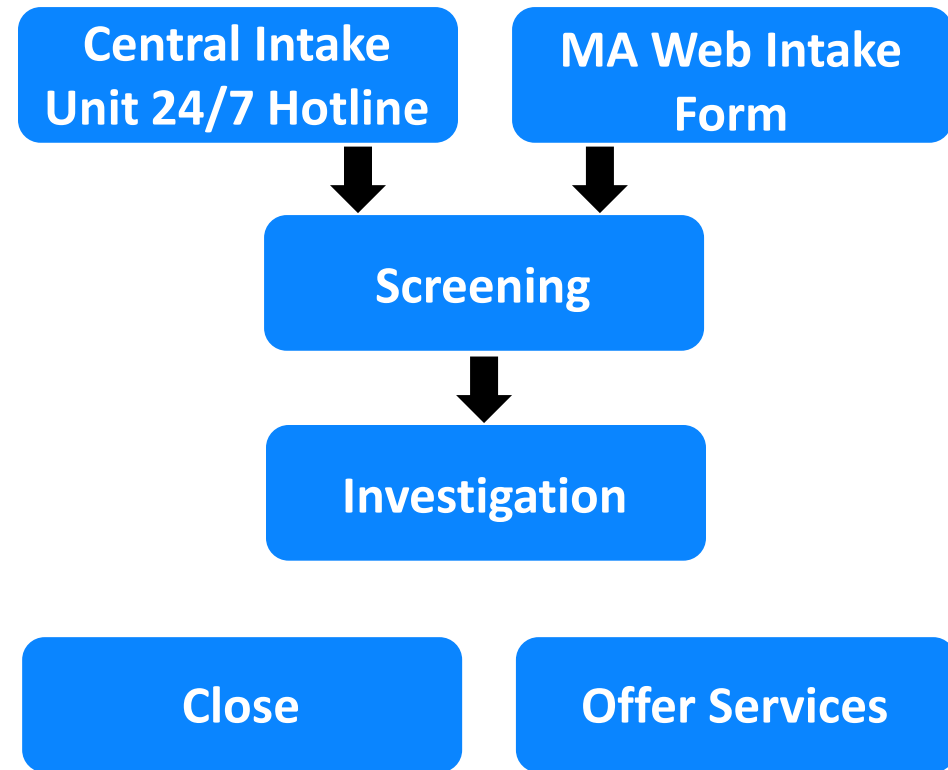
- ❑ **Restructured funding to better meet needs of elders**
 - ❑ **Funding based on completion of specific activities within PS rather than emphasizing the number of reports coming in.**
- ❑ **RFR for a call center with a single phone number available to receive reports 24-hours a day, 365 days a year.**
- ❑ **Launched online reporting functionality using WellSky's Web Intake Form.**





New PS Agency Funding Methodology

- ❑ Central Intake Unit
 - ❑ Per Intake - all inclusive rate (tier 1/intake staff/support & maint.)
- ❑ PS Agencies
 - ❑ Cases Screened Out
 - ❑ Investigations Completed
 - ❑ Investigations Substantiated
 - ❑ Investigations Opened for Ongoing Services (up to 4 months)
- ❑ Annual Maintenance Fee for On-line Web Intake form.





Central Intake Unit

- Affiliate of UMASS Medical School**
- State of the Art Call Center**
 - **MassOptions**
 - **Prescription Advantage**
- 24x7 Operation**
- Staffing**
 - **46 Intake Workers**
 - **7 Supervisors**
- Some users are setup to take calls remotely**



Ramping Up the Central Intake Unit

- Training**
 - **How to do PS Intakes**
 - **Systems Training**
 - **EOEA & Local PS Agency Assistance**
- Go Live – June 30th, 2017**
 - **Higher than normal call volume 1st week**
- Quality Assurance**
 - **QA team and Supervisors Review Recorded Calls**
- Reporting**



Benefits & Challenges of CIU

Benefits

- Single Phone Number for Reporters to Call
- Consistency
- Cost Effective
- Need Live Voice for Emergency Reports

Challenges

- Staffing Levels
- Onboarding of New Staff
- Wait Times
- Documentation



WellSky Web Intake Form

MA Adult Protective Services Report

Copy Address From Spell Check Submit Cancel

Reporter Information

► If this report is an emergency or requires immediate attention, DO NOT file an online report. Additionally, if you do not have the full address where the elder resides you will not be able to file an online report. In such instances please make a verbal report to the Massachusetts Elder Abuse Hotline at 1-800-922-2275. When filing an online report it is important to provide as much detail as possible and complete all required fields. If you include your email address you will receive an email confirmation for your records after the report is submitted.

Mandated Reporter required

Reporter Employer

First Name required Last Name required Middle Initial

Street required

Street 2

City required State required Zip Code required

Phone required Extension Phone Type required

Email Address

Relationship to Alleged Victim

Best time to contact

1000 characters remaining

Incident Information

► In this section, please describe what caused you to fill out a report on the involved person. If anyone saw the incident happen, you will need to add their contact information to the Other Participant Section. Please answer as many of the following questions as you can.

Incident date required

Incident Location required

City Where Alleged Victim Resides required State Where Alleged Victim Resides Zip Code Where Alleged Victim Resides required

Protective Service Agency required

APS Report to be Screened By required Screening Code required

Has law enforcement been involved?

Is this a Self-Neglect report? required

► Please describe the incident in details and include the following information.

Describe the elder's current physical, emotional, and mental status including medical issues, medications the elder takes, services the elder receives, any confusion or memory loss, and whether the elder has the ability to make his/her own decisions. Describe the type of housing the elder resides in (ex. private home, apartment, assisted living, etc.); who lives with the elder (provide names and contact information if possible); any concerns about the physical condition of the elder's housing (be as specific as possible); and any concerns around losing housing (eviction, foreclosure, etc.). required



Web Intake Implementation

- April 2017: Soft Launch**
 - Selected users would enter in Live intakes using web form

- July 2017: Pilot Launch**
 - 15 small Police and Fire Departments

- August 2017: Full Launch**
 - Enhancement: auto-assign web intake to appropriate screening queue and have an email notification sent to the Agency.

- Communicated to Mandated Reporter organizations and held webinars.**

- Link posted on <https://www.mass.gov/how-to/report-elder-abuse>**



Benefits & Challenges of Web Intake Form

Benefits

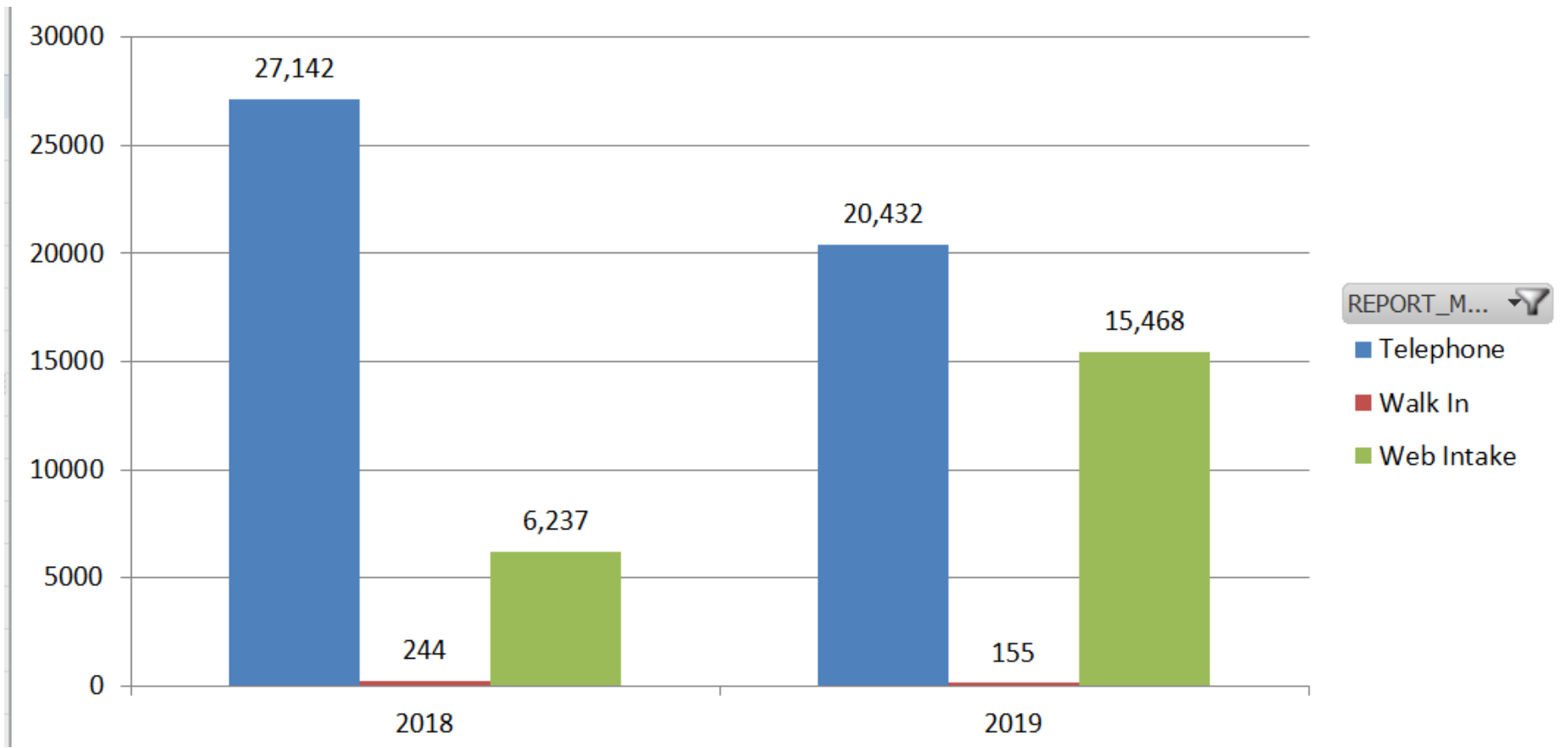
- Low Maintenance Cost
- Little Impact to Existing Process
- Helps Alleviate Wait Times
- High Availability

Challenges

- Troubleshooting issues
- Avoiding Duplicates in System
- Wording of questions to make sure the reporter is giving you the information you need.
- Limitation of available fields.



Trending of How Reports Are Coming In





Lessons Learned

- ❑ **More time for RFR process and Implementation**

- ❑ **PS Agency Buy-In/Communication Earlier in Process**

- ❑ **Adjustments Made**
 - **Adding Tier 1 to triage calls**
 - **Promoting the Web Intake for Non-Emergency Calls**



Questions?