

1

INTRODUCTION

TABLE OF CONTENTS

1.1	Definitions
1.2	Organization of the department
1.3	Mission of APS Division programs
1.4	Purpose of AS
1.5	Purpose of APS
1.6	Distinction between AS and APS
1.7	Philosophy of AS
1.8	Philosophy of APS
1.9	Documentation and record retention
1.10	Code of Virginia
1.10.1	Responsibility of the Department for AS
1.10.2	Homemaker, companion, or chore services
1.10.3	Authority to provide adult foster care services
1.10.4	Criminal history check for agency approved providers of services to adults
1.10.5	Screenings, ALF assessment, and other relevant Code sections
1.10.6	Establishment of APS Unit
1.10.7	Adult Protective Services
1.10.8	Community services boards; local government departments; and behavioral health authorities; powers and duties
1.10.9	<i>Long-term care coordinating committees</i>
1.11	Department regulations
1.12	Service Appeals
1.13	APS Division Program report

1.14 APS Minimum Training Standards

1.14.1 APS on-call workers

Appendix A: Division Information on the web

1.14.2 Manuals, documents, and forms

1.14.3 Other DSS forms

1.14.4 PeerPlace information

1.14.5 Medicaid provider manuals and forms

1

INTRODUCTION

1.1 Definitions

When used in this chapter, the definitions below shall have the following meaning, unless the context clearly indicates otherwise:

Term	Definition
Adult	An individual 18 years of age or older, or under the age of 18 if legally emancipated (§ 51.5-144 of the Code of Virginia).
Adult	Any person 60 years of age or older, or any person 18 years of age or older who is incapacitated and who resides in the Commonwealth; provided, however, “adult” may include qualifying nonresidents who are temporarily in the Commonwealth and who are in need of temporary or emergency protective services (§ 63.2-1603 of the Code of Virginia). Note: This definition is used during the provision of Adult Protective Services.
Adult Abuse	The willful infliction of physical pain, injury, or mental anguish or unreasonable confinement of an adult as defined in § 63.2-1603 (§ 63.2-100 of the Code of Virginia).
Adult Exploitation	The illegal, unauthorized, improper, or fraudulent use of an adult as defined in § 63.2-1603 or his funds, property, benefits, resources or other assets for another's profit, benefit, or advantage, including a caregiver or person serving in a fiduciary capacity, or that deprives the adult of his rightful use of or access to such funds, property, benefits, resources, or

Term	Definition
	other assets. “Adult exploitation” includes (i) an intentional breach of a fiduciary obligation to an adult to his detriment or an intentional failure to use the financial resources of an adult in a manner that results in neglect of such adult; (ii) the acquisition, possession, or control of an adult’s financial resources or property through the use of undue influence, coercion, or duress; and (iii) forcing or coercing an adult to pay for goods or services or perform services against his will for another’s profit , benefit, or advantage if the adult did not agree or was tricked, misled, or defrauded into agreeing, to pay for such goods or services or perform such services. (§ 63.2-100 of the Code of Virginia).
Adult Foster Care	Room and board, supervision, and special services to an adult who has a physical or mental condition. Adult foster care may be provided by a single provider for up to three adults (§ 51.5-144 of the Code of Virginia).
Adult Neglect	An adult as defined in § 63.2-1603 is living under such circumstances that he is not able to provide for himself or is not being provided services necessary to maintain his physical and mental health and that the failure to receive such necessary services impairs or threatens to impair his well-being. However, no adult shall be considered neglected solely on the basis that such adult is receiving religious nonmedical treatment or religious nonmedical nursing care in lieu of medical care, provided that such treatment or care is performed in good faith and in accordance with the religious practices of the adult and there is a written or oral expression of consent by that adult (§ 63.2-100 of the Code of Virginia).
Adult Services	Services that are provided by local departments of social services to an adult with an impairment (§ 51.5-144 of the Code of Virginia).
Adult with an impairment	An adult whose physical and mental capacity is diminished to the extent that he needs counseling or supervisory assistance or assistance with activities of daily living or instrumental activities of daily living (§ 51.5-144 of the Code of Virginia).
Department	The Department for Aging and Rehabilitative Services (§ 51.5-116 of the Code of Virginia).

Term	Definition
Incapacitated Person	Any adult who is impaired by reason of mental illness, intellectual disability, physical illness or disability, advanced age or other causes to the extent that the adult lacks sufficient understanding or capacity to make, communicate, or carry out responsible decisions concerning his well-being. This definition is for the purpose of establishing an adult's eligibility for APS and such adult may or may not have been found adjudicated incapacitated by a court (22 VAC 30-100-10).
Local Department	The local department of social services of any county or city in the Commonwealth (22 VAC 30-130-10).
Virginia Uniform Assessment Instrument or UAI	The department–designated assessment form. It is used to record information about the adult's level of service needs (22 VAC 30-130-10).

1.2 Organization of the department

The Commissioner of the Department for Aging and Rehabilitative Services (DARS), who is appointed by the Governor, directs the Adult Protective Services (APS) Division at the state level. *The APS Division includes APS and Adult Services (AS) Programs.*

The APS Division Home Office staff develops regulations, policies, and training, and allocates and manages funding used by local departments of social services (LDSS). The APS Division programs are state supervised and locally administered.

The Division's APS Regional Consultants and AS Specialists evaluate local programs, serve as resources in the areas of planning, organization, budgeting, and monitoring, and provide training, consultation, and technical assistance to local staff.

LDSS are the setting for direct contact with individuals requesting services. LDSS can assist individuals through benefits and services programs. LDSS determine eligibility for participation in service and benefits programs, authorize payments to individuals and vendors for services, and provide direct services to individuals. LDSS use federal, state, and local funds to deliver services.

1.3 Mission of APS Division programs

The mission of the APS Division programs is to:

- Protect older adults and incapacitated adults from abuse, neglect, or exploitation.
- Prevent the abuse, neglect, or exploitation of older adults and incapacitated adults.
- Prevent the inappropriate institutionalization of the elderly and impaired adults.
- Assist when necessary with appropriate placement.
- Maximize self-sufficiency.

1.4 Purpose of AS

AS allows the adult to remain in the least restrictive setting and function as independently as possible by establishing and/or strengthening appropriate family and social support systems or by supporting the adult in self-determination.

AS supports impaired adults age 18 or older, and their families when appropriate. AS may include the provision of case management, home-based care, transportation, adult day services, nutrition services, placement services, and other activities to *support* the adult.

1.5 Purpose of APS

APS establish and/or strengthen appropriate family and social support systems to protect adults at risk of abuse, neglect, or exploitation and to prevent the occurrence of abuse, neglect or exploitation.

APS consists of the identification, receipt, and investigation of reports of adult abuse, neglect or exploitation (or the risk thereof) of adults 60 years or older and incapacitated adults age 18 or older. If appropriate and available, APS may include the provision of or arrangement for home-based care, transportation, adult day services, meal services, legal proceedings, and other activities to protect the adult *and stop further maltreatment*.

1.6 Distinction between AS and APS

- Provision of AS to eligible adults
 - When there is no valid report of abuse, neglect, or exploitation or the risk thereof, and the adult requests services; or

- Following APS intervention when the adult continues to need ongoing services but is no longer at risk of abuse, neglect, or exploitation.
- Provision of APS to eligible adults
 - When the LDSS receives and investigates a valid report.
 - The investigation determines the adult needs and accepts protective services or the court orders protective services.

1.7 Philosophy of AS

The following principles are inherent to the provision of AS:

- The worker is an advocate for the adult.
- The adult is the focus of service delivery, and the worker shall preserve and protect the adult's right to self-determination even when there is a community or family request for the LDSS to intervene.
- The least restrictive and least intrusive intervention necessary to stabilize the situation is the most appropriate.
- The adult has the right to make decisions on his or her own behalf until he or she delegates that responsibility voluntarily or the court grants that responsibility to another individual.
- A family-based approach to service delivery enhances services, which support and strengthen the adult's informal support system.
- Coordination and combination of formal and informal support systems provide the most effective delivery system.

1.8 Philosophy of APS

The following principles are basic to the planning and delivery of APS:

- Proper protection of adults may require an APS worker to advocate for the right of the capable adult to make his or her own choices even when the community or family may oppose these choices.
- The least restrictive and least intrusive intervention necessary to protect the adult and stabilize the situation is the most appropriate.

- The adult has the right to make decisions on his or her own behalf until he or she delegates that responsibility voluntarily or the court grants that responsibility to another individual.
- Adult abuse, neglect, and exploitation are social problems and their resolution, for the most part, should be sought through the provision of social services and medical services.

However, the legal system often plays a role in remedying adult abuse, neglect, and exploitation and preventing further maltreatment. When appropriate, it is important for APS to partner with legal system representatives, such as law enforcement personnel, during investigations and service delivery.

- Services that support and strengthen the adult's informal support system are vital to the protection of adults who are at risk of abuse, neglect, or exploitation.
- Legal action is considered only after all other alternatives have been explored. When legal intervention is required, the least restrictive means of intervention shall be used.

1.9 Documentation and record retention

The system of record for AS and APS cases is a web-based case management system called PeerPlace. Service workers are required to use all appropriate PeerPlace screens to document AS, APS, and Guardianship Tracking case actions. PeerPlace permits service workers to scan, upload, and attach a variety of documents to a case record.

Worker case notes shall be documented in the PeerPlace record in the following locations:

- AS Case: Enter case notes in the AS registration notes screen.
- Invalid APS Report: Enter notes in APS registration notes screen.
- APS Investigation Case: Enter case notes in the APS investigation notes screen (not APS registration notes).
- Ongoing APS following an investigation with a needs and accepts disposition: Enter case notes in APS registration notes screen.
- Guardianship Report Tracking: Enter notes in the guardianship tracking registration notes screen.

Do not enter notes in "General Comments" screen as other non-LDSS PeerPlace users will be able to view these notes.

The LDSS shall maintain an adult's case records in a professional manner. All records shall be complete, accurate, and organized. All hard copy documents such as purchase of services orders and provider/vendor agreements shall be signed with name and professional title of the author and dated with the month, day, and year.

The Record Analysis Services (RAS) unit at the Library of Virginia is responsible for ensuring that public records are maintained and available throughout their life cycle. RAS publishes Records Retention and Disposition Schedules to assist localities and state agencies with the efficient and economical management of their public records. The record retention and disposition schedule for county and municipal governments social services records (GS-15) is available online on the Library of Virginia's website.

DARS is responsible for purging PeerPlace case records according to LVA requirements. The LDSS is responsible for purging hard copy records of older closed cases that were not entered into PeerPlace according to GS-15.

The Department of Medical Assistance Services (DMAS) requires that adult screening records be retained *for 10 years after the date of case closure per GS-120*. All screening records are to be entered into eMLS. Any screening documentation not entered into eMLS (e.g. medical record supporting a diagnosis) may be attached to that individual's PeerPlace record.

Note: Child screening records shall be retained for at least seven (7) years after such minors have reached **21** years of age. Child screening records are not to be entered into PeerPlace. LDSS may maintain child screening documentation (e.g. medical record supporting a diagnosis) that are not stored in eMLS in a hard copy file or in another manner as designated by the LDSS.

1.10 Code of Virginia

The following serve as the legal basis for AS and APS Programs. Full text of each of the Code sections is available by accessing the Legislative Information System website.

1.10.1 Responsibility of the Department for AS

Section 51.5-145 of the Code of Virginia gives the Department the responsibility for the planning and oversight of adult services in the Commonwealth.

1.10.2 Homemaker, companion, or chore services

Section 51.5-146 the Code of Virginia authorizes the provision of companion, chore, or homemaker services that will allow individuals to attain or maintain self-care and

are likely to prevent or reduce dependency. Such services shall be provided to the extent that federal or state matching funds are made available to each locality.

1.10.3 Authority to provide adult foster care services

Sections 51.5-146 of the Code of Virginia authorizes each local board of social services to provide adult foster care services that may include recruitment, approval, and supervision of adult foster care homes.

1.10.4 Criminal history check for agency approved providers of services to adults

Section 63.2-1601.1 of the Code of Virginia requires each local board to conduct a criminal background check on agency-approved providers as a condition of approval.

1.10.5 Screenings, ALF assessment, and other relevant Code sections

Sections 51.5-146 and 63.2-1602 of the Code of Virginia requires each local board of social services to participate in:

- Screenings for Long Term Services and Supports (LTSS);
- Assessment for assisted living facilities;
- Long-term care service coordination with other local agencies; and
- Social services, as appropriate, to individuals discharged from state facilities or training centers and participate in other programs pursuant to state and federal law.

Pursuant to § 32.1-330 of the Code of Virginia, every individual who applies for or requests community or institutional long-term services and supports as defined in the state plan for medical assistance services shall be screened prior to admission to such community or institutional long-term services and supports to determine his need for long-term services and supports, including nursing facility services as defined in the state plan for medical assistance services. This includes screenings for:

- Nursing facility.
- Programs of All-Inclusive Care for the Elderly (PACE).
- CCC Plus waiver.

The *LTSS* screening team includes a nurse, social worker, or other assessor (i.e. family services specialist) designated by the Department, who is an employee of the

Department of Health or the local department of social services and a physician who is employed or engaged by the Department of health.

The Virginia Department of Health has oversight and responsibility for child screenings in Virginia. LDSS may opt in or opt out of child screening participation.

Pursuant to § 63.2-1804 of the Code of Virginia, in order to receive *an Auxiliary Grant* while residing in an ALF, an adult shall have been evaluated by a case manager or qualified assessor to determine his or her need for care. A UAI setting forth an individual's care needs shall be completed for all individuals upon admission and for all individuals residing in an ALF at subsequent intervals pursuant to regulations promulgated by the Commissioner of the Department for Aging and Rehabilitative Services.

Pursuant to § 37.2-837 of the Code of Virginia, "Discharge from State Hospitals or Training Centers, Conditional Release, and Trial or Home Visits for Consumers," the provision of social services to the individual discharged from a state hospital shall be the responsibility of the appropriate LDSS pursuant to regulations adopted by the State Board of Social Services.

Pursuant to § 37.2-505 of the Code of Virginia, "Coordination of Services for Preadmission Screening and Discharge Planning," local department of social services are required to serve on the preadmission and discharge planning team that is established by the local community services board. The team has responsibility for integrating the community services necessary to accomplish effective prescreening and pre-discharge planning for an individual referred to the community services board.

1.10.6 Establishment of APS Unit

Section 51.5-148 of the Code of Virginia authorizes the establishment of the Adult Protective Services Program in Virginia.

1.10.7 Adult Protective Services

Sections 63.2-1603, 63.2-1605 through 1606 and 63.2-1608 through 1610 of the Code of Virginia authorize provision of protective services to adults 60 years of age or older and to adults who are 18 years of age or older and who are incapacitated.

1.10.8 Community services boards; local government departments; and behavioral health authorities; powers and duties

Sections 37.2-504 and 37.2-605 of the Code of Virginia require local boards of social services to enter into a written agreement with community services boards or behavioral health authorities to specify what services will be provided to individuals. Annual review of the agreement is required.

1.10.9 Long-term care coordinating committees

The Code of Virginia requires the establishment of a local long-term care coordinating committee in each city or county or combination thereof. Pursuant to §§ 63.2-1602 of the Code of Virginia, the LDSS is a member of the committee. The purpose of the committee is to guide the coordination and administration of public long-term care services in the locality.

(§ 51.5-138 of the Code of Virginia). The governing body of each county or city, or a combination thereof, shall designate a lead agency and member agencies to accomplish the coordination of local long-term care services and supports. The agencies shall establish a long-term care coordination committee composed of, but not limited to, representatives of each agency. The coordination committee shall guide the coordination and administration of public long-term care services and supports in the locality. The membership of the coordination committee shall be comprised of, but not limited to, representatives of the local department of public health, the local department of social services, the community services board or community mental health clinic, the area agency on aging, the local nursing home pre-admission screening team, and representatives of housing, transportation, and other appropriate local organizations that provide long-term care services. A plan shall be implemented that ensures the cost-effective utilization of all funds available for long-term care services and supports in the locality. Localities are encouraged to provide services and supports within each category of service in the continuum and to allow one person to deliver multiple services, when possible.

1.11 Department regulations

The following serve as the regulatory legal basis for the Adult Services/Adult Protective Services Program. The full text of regulations is accessible via the Legislative Information System website.

22 VAC 30-100	Adult Protective Services
22 VAC 30-110	Assessment in Assisted Living Facilities
22 VAC 30-120	Adult Services Approved Providers
22 VAC 30-130	Adult Services Standards

1.12 Service Appeals

Pursuant to § 51.5-147 of the Code of Virginia an applicant for or recipient of home-based and adult foster care services may appeal the local board's decision in granting, denying,

changing, or discontinuing services within 30 days after receiving written notice of the decision. An applicant or recipient aggrieved by the failure of the local board to make a decision within a reasonable time may also appeal to the Commissioner.

The adult may use the “Appeal to Department for Aging and Rehabilitative Services” form available on the DSS intranet and on the DARS public site to request an appeal. Additional information on appeals is located in Chapter 9, Appeals.

1.13 APS Division Program report

Each year the APS Division compiles an annual report of statistical data on each of its programs. The report is located the “Publications” page under the “About Us” heading on the DARS public site.

1.14 APS Minimum Training Standards

Section 51.5-148 of the Code of Virginia requires the establishment of minimum training standards for APS workers in the Commonwealth. APS workers shall complete the required training within one year from the date of implementation of the minimum training standards, within the first year of their employment or within the first year of their being assigned to work in APS.

Continuing education after the first year of training is also required as a part of the minimum training standards plan.

The minimum training standards are available to workers on the DSS intranet.

1.14.1 APS on-call workers

CPS workers and others who are responsible for APS on-call or APS intake activities but do not conduct APS investigations, must take **ADS 5052: APS for On-Call Workers**, an online course offered through the Virginia Learning Center. This online course is in lieu of the full curriculum of required APS core courses.

Appendix A: Division Information on the web

APS Division materials including manuals, educational materials and reports are located on the DSS intranet and DARS public site. The DSS intranet, which is accessible only to LDSS staff and DARS APS Division staff, also provides information on other DSS divisions and programs.

1.14.2 Manuals, documents, and forms

AS and APS manuals and other documents are available on the DSS intranet at the Portfolios tab, under the “Partnerships and Initiatives” heading, “Adult Protective Services/Auxiliary Grants” link.

APS Division forms are posted on the DSS intranet and the DARS public site. Forms are usually available in PDF and Word format. The worker can download these forms, as the APS Division cannot provide copies of forms.

1.14.3 Other DSS forms

Other DSS forms are also located on the DSS intranet.

1.14.4 PeerPlace information

PeerPlace information is available on the DSS intranet at the Portfolios tab, under “Partnerships and Initiatives” heading, “Adult Protective Services/Auxiliary Grants” link, then select the PeerPlace page.

- User Guides
- Resources & Job Aids
- Tip Sheets
- Webinar Schedule
- LDSS Program Admin Job Aids
- AS, APS, & Guardianship Registration Closing Codes and Definitions

1.14.5 Medicaid provider manuals and forms

The DMAS Medicaid Enterprise System (MES) web portal has downloadable copies of all its program manuals and forms. Once on this site, manuals may be viewed by selecting “Providers” and then selecting “Manual Library” from the “Provider Menu.” Forms may be found by selecting “MES Forms Library” from the “Provider Menu.”

The DMAS website also has information concerning the various Medicaid LTSS programs and other services offered by DMAS.