30.000 ADULT PROTECTIVE SERVICES

30.100 DEFINITIONS

The following definitions shall apply to these rules.

“Abuse”, pursuant to Section 26-3.1-101(1), C.R.S., means any of the following acts or omissions committed against an at-risk adult:

A. The non-accidental infliction of physical pain or injury, as demonstrated by, but not limited to, substantial or multiple skin bruising, bleeding, malnutrition, dehydration, burns, bone fractures, poisoning, subdural hematoma, soft tissue swelling, or suffocation;

B. Confinement or restraint that is unreasonable under generally accepted caretaking standards; or,

C. Subjection to sexual conduct or contact classified as a crime under the “Colorado criminal code”, Title 18, C.R.S.

“Adult Protective Services (APS) Program” means the State Department supervised, county department administered program that has the authority to investigate and/or assess allegations of mistreatment and self-neglect of at-risk adults. The APS Program offers protective services to prevent, reduce, or eliminate the current or potential risk of mistreatment or self-neglect to the at-risk adult using community based services and resources, health care services, family and friends when appropriate, and other support systems. The APS Program focuses on the at-risk adult and those services that may prevent, reduce, or eliminate further mistreatment or self-neglect. The APS Program refers possible criminal activities to law enforcement and/or the district attorney for criminal investigation and possible prosecution.

“Allegation” means a statement asserting an act or suspicion of mistreatment or self-neglect involving an at-risk adult.

“Assessment” means the process of evaluating a client’s functional abilities to determine the client’s level of risk and, in cooperation with the client whenever possible, to identify service needs for the case plan.

"Assumed responsibility", as used in the definition of caretaker, means a person who is providing or has provided recurring assistance to help meet the basic needs of an at-risk adult. The assumption of responsibility can attach by entering into a formal or informal agreement, whether paid or unpaid; by identifying oneself as a caretaker to others; or based on the nature of the situation or relationship between the caretaker and the at-risk adult.

"At-risk adult", pursuant to Section 26-3.1-101(1)(1.5), C.R.S., means an individual eighteen years of age or older who is susceptible to mistreatment or self-neglect because the individual is unable to perform or obtain services necessary for his or her health, safety, or welfare, or lacks sufficient understanding or capacity to make or communicate responsible decisions concerning his or her person or affairs.
"CAPS" means the Colorado Adult Protective Services (APS) state department prescribed data system.

"Caretaker", pursuant to Section 26-3.1-101(2), C.R.S., means a person who:
A. Is responsible for the care of an at-risk adult as a result of a family or legal relationship;
B. Has assumed responsibility for the care of an at-risk adult; or,
C. Is paid to provide care, services, or oversight of services to an at-risk adult.

"Caretaker neglect", pursuant to Section 26-3.1-101(2.3)(a), C.R.S., means neglect that occurs when adequate food, clothing, shelter, psychological care, physical care, medical care, habilitation, supervision, or other treatment necessary for the health, safety, or welfare of the at-risk adult is not secured for an at-risk adult or is not provided by a caretaker in a timely manner and with the degree of care that a reasonable person in the same situation would exercise, or when a caretaker knowingly uses harassment, undue influence, or intimidation to create a hostile or fearful environment for an at-risk adult. However, the withholding, withdrawing, or refusing of any medication, any medical procedure or device, or any treatment, including but not limited to resuscitation, cardiac pacing, mechanical ventilation, dialysis, artificial nutrition and hydration, any medication or medical procedure or device, in accordance with any valid medical directive or order, or as described in a palliative plan of care, is not deemed caretaker neglect.

"Case" means a report that contains information indicating that there is an at-risk adult and a mistreatment category, and the report is screened in for investigation and/or further assessment.

"Clergy member", pursuant to Section 26-3.1-101(2.5), C.R.S., means a priest; rabbi; duly ordained, commissioned, or licensed minister of a church; member of a religious order; or recognized leader of any religious body.

"Client" means an actual or possible at-risk adult for whom report has been received and the county department has made a response, via telephone resolution or open case.

"Collateral contact" means a person who has knowledge about the client’s situation that supports, refutes, or corroborates information provided by a client, reporter, or other person involved in the case. Examples of contacts include, but are not limited to, family members, law enforcement, health care professionals, service providers, facility staff, neighbors, and friends.

"County Department" means a county department of human/social services.

"Enhanced supervision" means CAPS security access that prevents a caseworker from finalizing an investigation, assessment, case plan, or case closure without supervisory approval.

"Exploitation" means an act or omission committed by a person that:
A. Uses deception, harassment, intimidation, or undue influence to permanently or temporarily deprive an at-risk adult of the use, benefit, or possession of anything of value;
B. Employs the services of a third party for the profit or advantage of the person or another person to the detriment of the at-risk adult;

C. Forges, compels, coerces, or entices an at-risk adult to perform services for the profit or advantage of the person or another person against the will of the at-risk adult; or,

D. Misuses the property of an at-risk adult in a manner that adversely affects the at-risk adult’s ability to receive health care or health care benefits or to pay bills for basic needs or obligations.

"Facility" means a medical or long-term care facility that provides 24 hour care and oversight for residents, and includes a group or host home, alternative care facility, state regional center, or state mental health facility.

"Financial institution" means a state or federal bank, savings bank, savings and loan association or company, building and loan association, trust company, or credit union.

"Fiscal Year" means the State Department fiscal year, which begins July 1 and ends June 30.

"FTE" means Full Time Equivalent. The actual percentage of time a person works on the APS program shall be considered that person’s FTE.

"Inconclusive finding" means that indicators of mistreatment, exploitation, or self-neglect may be present but the investigation could not confirm the evidence to a level necessary to substantiate the allegation.

"Investigation" means the process of determining if an allegation(s) of mistreatment involving an at-risk adult can be substantiated by a preponderance of evidence.

"Least restrictive intervention" means acquiring or providing services, including protective services, for the shortest duration and to the minimum extent necessary to remedy or prevent mistreatment.

"Medical Directive or Order" means a medical durable power of attorney, a declaration as to medical treatment executed pursuant to Section 15-18-104, C.R.S., a medical order for scope of treatment form executed pursuant to Article 18.7 of Title 15, C.R.S., and a CPR directive executed pursuant to Article 18.6 of Title 15, C.R.S.

"Minor impact" means the client may experience some difficulty with the assessment risk indicator, but there is very little impact on the client’s overall health, safety, and/or welfare and no intervention is necessary to improve overall safety.

"Mistreatment", pursuant to Section 26-3.1-101(7), C.R.S., means:

A. Abuse;

B. Caretaker neglect;

C. Exploitation;

D. An act or omission that threatens the health, safety, or welfare of an at-risk adult; or,

E. An act or omission that exposes an at-risk adult to a situation or condition that poses an imminent risk of bodily injury to the at-risk adult.

"Person(s)” means one or more individuals, limited liability companies, partnerships, associations, corporations, legal representatives, trustees, receivers, or the State Department of Colorado, and all political subdivisions and agencies thereof.
"Protective Services" means services to prevent the mistreatment and self-neglect of an at-risk adult initiated and provided by the county department authorized to administer the Adult Protective Services Program. Such services include, but are not limited to:

A. Receipt and investigation of reports of mistreatment and self-neglect;
B. Assessment of the at-risk adult’s physical, environmental, resources and financial, medical, mental and behavioral, and support system needs;
C. Protection from mistreatment;
D. Coordination, implementation, delivery, and monitoring of services necessary to address the at-risk adult’s safety, health, and welfare needs;
E. Assistance with applications for public benefits and other services; and,
F. Initiation of protective and probate proceedings under Colorado Revised Statutes.

"Reassessment" means the process of updating the assessment status areas and the case plan, including the status of any services implemented and any new services and/or goals identified since the last assessment.

“RED Team” is an acronym that stands for Review, Evaluate, and Direct. The RED Team is a decision making process that utilizes a structured framework to determine the county department’s response to reports.

"Report" means an oral or written report of suspected mistreatment or self-neglect of a suspected at-risk adult, received by the county department.

“Risk” means conditions and/or behaviors that create increased difficulty or impairment to the client’s ability to ensure health, safety, and welfare.

“Safety” means the extent to which a client is free from harm or danger, or to which harm or danger is lessened.

"Self-Determination" means the right to decide for one's self; the ability or right to make one's own decisions without interference from others.

"Self-Neglect", pursuant to Section 26-3.1-101(10), C.R.S., means an act or failure to act whereby an at-risk adult substantially endangers his/her health, safety, welfare, or life by not seeking or obtaining services necessary to meet the adult's essential human needs. Refusal of medical treatment, medications, devices, or procedures by an adult or in accordance with a valid medical directive or order, or as described in a palliative plan of care, shall not be deemed self-neglect. Refusal of food and water in the context of a life-limiting illness shall not, by itself, be evidence of self-neglect. "Medical directive or order" includes, but is not limited to, a medical durable power of attorney, a declaration as to medical treatment executed pursuant to Section 15-18-104, C.R.S., a medical orders for scope of treatment form executed pursuant to Article 18.7 of Title 15, C.R.S., and a CPR directive executed pursuant to Article 18.6 of Title 15, C.R.S.

“Significant impact” means that the client’s impairment diminishes the client’s health, safety, and/or welfare and intervention is necessary to improve overall safety.
"Staffing a case" means the review of an APS case between the supervisor and caseworker to ensure the appropriateness of the investigation findings, client assessment, case plan, service provision, need for ongoing services, plans to terminate services, documentation, and overall intervention as it relates to APS rules and best practices. Staffing a case may include the county department APS unit, the State Department APS unit, and/or the APS Team in addition to the supervisor and caseworker.

"State Department" means the Colorado Department of Human Services.

"Substantiated finding" means that the investigation established by a preponderance of evidence that mistreatment, exploitation, or self-neglect has occurred.

"Undue Influence" means the use of influence to take advantage of an at-risk adult’s vulnerable state of mind, neediness, pain, or emotional distress.

"Unsubstantiated finding" means the investigation did not establish any evidence that mistreatment or self-neglect has occurred.

30.200 ADULT PROTECTIVE SERVICES PROGRAM ADMINISTRATION AND OVERVIEW

30.210 APS PROGRAM ADMINISTRATION

A. The Adult Protective Services (APS) Program is mandated by Title 26, Article 3.1, of the Colorado Revised Statutes. The county department shall administer the APS Program in accordance with the statutes and rules governing the APS Program and in general State Department fiscal and program regulations.

B. The county department shall utilize funding appropriated by the State Legislature to make reasonable efforts to maintain a fiscal year caseload average of twenty-five to one (25:1), as intended by S.B. 13-111.

C. In order to ensure the security of CAPS and the Personal Identifying Information (PII) and Personal Health Information (PHI) contained within, the county department shall notify the State Department through a CAPS support request within three (3) working days upon learning of a change in APS staffing, but no later than the CAPS user’s last day of employment. An email to the State Department may substitute for a CAPS support ticket in the event a CAPS support ticket cannot be submitted.

D. The county department shall make reasonable efforts to advise county residents of services available through the APS Program by such methods as Adult Protection Team mandated community education, as defined at Section 30.830, B, 4, press releases, presentations, pamphlets, and other mass media.

E. The county department shall handle responses to requests for services from other agencies, including the State Department, other county departments, or another state’s APS Program, in the same manner and time frames as requests received from within the county.

F. The county department shall report to the State Department at such times and in such manner and form as the State Department requires, including through CAPS, manually generated reports, quality improvement and assurance processes, and other forms of reporting.
30.220 APS PROGRAM REVIEW AND OVERSIGHT

A. The county department shall be subject to the provisions outlined in Section 26-1-111, C.R.S., requiring the State Department to ensure that the county department complies with requirements provided by statute, State Board of Human Services and Executive Director rules, federal laws and regulations, and contract and grant terms.

B. The county department shall be subject to routine quality control and program monitoring, to minimally include:

1. Targeted review of CAPS documentation;
2. Review and analysis of data reports generated from CAPS;
3. Case review;
4. Targeted program review conducted via phone, email, or survey; and,
5. Onsite program review.

C. The focus of the monitoring shall be to identify:

1. Compliance with program statute and rules;
2. Best practices that can be shared with other county departments; and,
3. Training needs.

D. The county department shall be subject to a performance improvement plan to correct areas of identified non-compliance.

E. The county department shall be subject to corrective action and sanction, as outlined in 9 CCR 2501-1 if the county fails to make improvements required under the performance improvement plan.

30.230 ELIGIBILITY

A. Protective services are provided to persons that meet the definition of “at-risk adult” as defined in Section 30.100. Persons shall not be considered “at-risk” solely because of age and/or disability.

B. Protective services are provided to at-risk adults:

1. Who need short term services due to a report of actual or suspected mistreatment or self-neglect; and/or,
2. Who need ongoing protection as the result of substantiation of mistreatment or self-neglect; and/or,
3. For whom the county department has been appointed guardian and/or conservator, or has been designated as representative payee; and/or,
4. Who are residents of long term care facilities, such as nursing homes and assisted living residences, who must relocate due to the closure of the facility and:
   a. The county department has been appointed guardian and/or conservator; or,
30.240 APS PRINCIPLES – CONSENT, SELF DETERMINATION, AND LEAST RESTRICTIVE INTERVENTION

A. The client’s consent is not required for the county department to investigate or assess allegations of mistreatment or self-neglect.

B. The final decision as to acceptance of protective services shall rest with the client unless the client has been adjudicated incapacitated by the court or as outlined in Section 30.600.

C. Protective services provided to and other services arranged for the client shall constitute the least restrictive intervention and be those services provided for the shortest duration and to the minimum extent necessary to meet the needs of the client.

D. It shall not be construed that a person is being mistreated when he or she is being furnished or is relying upon treatment or practices that:

1. Rely on the tenets and practices of that person’s recognized church or religious denomination; or,

2. Do not violate local, state, or federal laws.

E. Choice of lifestyle or living arrangements shall not, by itself, be evidence of self-neglect.

30.250 CONFIDENTIALITY

A. Information received as a result of a report to APS and subsequent investigation and casework services shall be confidential and shall not be released without a court order for good cause except in limited circumstances, as defined in Section 30.250, E.

B. The county department shall treat all information related to the report and the case, whether in written or electronic form, as confidential according to applicable statutes, including, but not limited to, the following:

1. Identifying information, such as the name, address, relationship to the at-risk adult, date of birth, or Social Security Number of the:

   a. At-risk adult;

   b. At-risk adult’s family members;

   c. Reporting party;

   d. Alleged perpetrator; and,

   e. Other persons involved in the case.

2. Allegations, assessment, and investigative findings, including, but not limited to:

   a. Initial report of allegations and concerns;
b. The client’s physical, environmental, resources and financial, medical, mental and behavioral, and social systems status;

c. Medical and behavioral diagnoses, past medical conditions, and disabilities;

d. Services provided to or arranged for the adult;

e. Information learned as a result of a criminal investigation;

f. Information obtained during the APS investigation and the substantiation or non-substantiation of the allegations; and,

g. Legal protections in place including, but not limited to, wills, advance directives, powers of attorney, guardianship, conservatorship, representative payeeship, and protective orders.

C. Individuals or groups requesting information regarding APS reports and/or investigations shall be informed of the confidential nature of the information and shall be advised that a court order is required to release information held by the county department, except as provided at Section 30.250, E. These persons or groups include, but are not limited to:

1. Federal and state legislators;

2. Members of other governmental authorities or agencies, including county commissioners, city councils, school boards, and other city and county department boards, councils, officials, and employees;

3. Courts and law enforcement agencies;

4. Attorneys, guardians, conservators, agents under powers of attorney, representative payees, and other fiduciaries;

5. Family members, reporting parties, or other interested parties;

6. Any alleged perpetrator; and,

7. Media representatives.

D. In a criminal or civil proceeding or in any other circumstance in which the APS report and/or case record is subpoenaed or any request for disclosure has been made, or any county department or State Department representative is ordered to testify concerning an APS report or case, the court shall be advised, through proper channels, of the statutory provisions, rules, and policies concerning disclosure of information.

1. Confidential information shall not be released unless so ordered by the court for good cause.

2. Courts with competent jurisdiction may determine good cause. Although it is not an exhaustive list, the following are examples of court proceedings in which a court may determine that good cause exists for the release of confidential information:

   a. Guardianship or conservatorship proceeding in which either the county is the petitioner or has been ordered to testify;
b. Review of Power of Attorney under the Uniform Power of Attorney Act, as outlined at Title 15, Article 14, Part 7, Colorado Revised Statutes (C.R.S.);

c. Review of a fiduciary under Title 15, Article 10, Part 5, C.R.S.; and/or,

d. Criminal trial.

E. Information held by the State Department or county department may be released without a court order only when:

1. Coordination with professionals and collateral contacts is necessary to investigate mistreatment, exploitation, or self-neglect and/or to resolve health and/or safety concerns.

2. It is essential for the provision of protective services, including establishing eligibility for, arrangement and implementation of services and benefits, and appointment of a guardian and/or conservator.

3. A review of a Power of Attorney is requested under the Uniform Power of Attorney Act, as outlined at C.R.S. Title 15, Article 14, Part 7 or review of a fiduciary under C.R.S. Title 15, Article 10, Part 5.

4. A case is reviewed with the adult protection team, in accordance with the adult protection teams by-laws, and when in executive session with members who have signed a confidentiality agreement.

5. A criminal complaint or indictment is filed based on the APS report and investigation.

6. There is a death of a suspected at-risk adult and formal charges or a grand jury indictment have been brought.

7. The coroner is investigating a death suspected to be a result of mistreatment or self-neglect.

8. The client requests his/her file and provides a written release of information, in accordance with the county department’s policy. The county department shall review the request to determine whether the client has the ability to provide informed consent related to the release of the file.

F. Whenever there is a question about the legality of releasing information or the ability of the client to provide informed consent, the requestor, whether the client or another person, shall be advised to submit a written request to the appropriate court to order the county department to produce the desired records or information within the custody or control of the county department.

G. Information released under Section 30.250, D and E, shall be the minimum information necessary to secure the services, conduct the investigation, or otherwise respond to the court order or request for information. The county department shall:

1. Provide the information only to persons deemed essential to the court order, criminal investigation, Adult Protection team activities, the provision of services, or client request;

2. Edit the information prior to its release to physically remove or redact sensitive information not essential to the court order, criminal investigation, Adult Protection Team activities, provision of services and benefits, or client request;
3. Always redact the reporting party information and other documentation that could identify the reporting party unless specifically ordered by a court or the reporter has given written consent to release his/her information;

4. Always redact all HIPAA protected information and any other confidential information which is protected by law unless specifically ordered by a court; and,

5. Redact all other report and case information not directly related to the request.

H. When a court order or other written request for the release of information related to an APS report or case is received, as outlined in Sections 30.250, D and E, the county department shall:

1. Comply within the time frame ordered by the court, or in accordance with county department policy; and,

2. Provide a written notice with the information to be released regarding the legality of sharing confidential information.

I. All confidential APS information and data shall be processed, filed and stored using safeguards that prevent unauthorized personnel from acquiring, accessing, or retrieving the information.

1. Client files shall be kept in a secured area when not in use.

2. Passwords to CAPS shall be kept secured.

3. The State Department shall ensure that only State Department and county department staff persons with a business need to do so shall have access to CAPS.

4. Laptops and other mobile devices used to document in the field shall be protected and encrypted in compliance with HIPAA security requirements.

5. Email correspondence that contains APS confidential information shall be sent through secure encryption programs.

6. All CAPS users must electronically sign the CAPS Security and Confidentiality Agreement annually.

J. County departments shall not access information in CAPS that is not necessary to serve the client. Violations may result in loss of access to CAPS, at the discretion of the State Department.

K. Any person who willfully violates confidentiality or who encourages the release of information related to the mistreatment and self-neglect of an at-risk adult from CAPS or the APS case file, to persons not permitted access to such information, commits a Class 2 petty offense and shall be punished as provided in Section 26-3.1-102(7)(c), C.R.S.

L. Clients shall be referred to the Colorado Address Confidentiality Program (ACP) as appropriate to determine their eligibility for services including the legal substitute mailing address and mail forwarding services. The State Department and county department shall comply with any applicable provisions for APS clients enrolled in the ACP.
30.260 DOCUMENTATION

A. The county department shall thoroughly document all Adult Protective Services (APS) reports and case information in CAPS. There shall be no parallel paper or electronic system used to enter APS documentation. Documentation shall include all aspects of the APS case, including:

1. Initial report;
2. Investigation;
3. Assessment;
4. Case plan;
5. Contact records for the client, alleged perpetrator, reporter, and all collaterals and supports;
6. Ongoing case notes;
7. Case closure; and,
8. Any other processes related to the case.

B. All documents and evidence critical to the APS case record shall be scanned into CAPS, to include:

1. A release of information form(s) signed by the client, when appropriate;
2. All of the client's Powers of Attorney(s), living will declaration, and/or other advance directives, as applicable;
3. All documents, reports, and correspondence related to guardianship, conservatorship, and representative payeeship, whether county department held or private, as applicable; and,
4. Other documentation, such as medical reports, results of psychiatric evaluations, photographic documentation, and other evidence collected during the investigation and assessment.

C. All documentation pertaining to APS reports and cases, including interview and case notes, evidence gathered, such as photos, medical records, and bank statements shall be kept in a secure location until documented in CAPS and then shall be destroyed.

   a. Hardcopy and electronic aps files created prior to July 1, 2014 shall be kept in a secured location.
   b. All APS files created July 1, 2014 or later shall be documented in CAPS and the file/notes destroyed.
   c. Original legal documents such as guardianship, representative payeeship, birth certificates, or tax documents may be retained in a hardcopy file, in addition to CAPS, that is in a secured location.
D. The county department shall use CAPS to document all other APS program activities, including Adult Protection team activities, APS staff qualifications, FTE, new worker and continuing education received, cooperative agreements, and other activities required by rule.

E. Case records shall be retained for a minimum of three (3) years, plus the current year, after the date of case closure.

30.300 STAFF QUALIFICATIONS, TRAINING, AND DUTIES

30.310 EDUCATION AND EXPERIENCE QUALIFICATIONS

A. The county department shall ensure that all personnel who supervise or provide professional services in the APS program possess the following minimum qualifications for education and experience:

1. The Professional Entry (Training) Level position shall require a Bachelor’s degree with an equivalent of thirty (30) semester or forty-five (45) quarter hours in human behavioral sciences or health care related courses, such as, social work, sociology, psychology, psychiatry, gerontology, nursing, special education, family intervention techniques, diagnostic measures, therapeutic techniques, guidance and counseling, criminal justice, other human behavioral sciences, or a medical field relevant to the APS program and/or at-risk adults.

2. Professional Journey Level position shall meet the requirements for the Professional Entry (Training) Level position and shall have obtained the skills, knowledge, and abilities to perform duties at the fully independent working level, as follows:
   a. One (1) year of professional casework in a public or private social services agency completed after the degree is obtained; or,
   b. A Master's degree in a field as listed in 30.310, A, 1.

3. The Casework Supervisor position shall meet the requirements for the Professional Journey Level position plus have at least three years professional casework experience at the journey level obtained after the Bachelor’s or Master’s degree. County department managers, administrators, and directors with direct supervision shall meet this requirement.

4. The Case Aide and Intake Screener positions, if available in the county department, shall have obtained a high school diploma or a General Equivalency Diploma (GED) plus have at least six (6) months full time public contact in human services or a related field. Substitution for public contact is successful completion of a certificate program in gerontology and/or at least six, college level credit hours in a human behavioral sciences or health care field.

B. If proven recruitment difficulty exists or the APS staff person was hired to perform APS duties prior to November 1, 1998, the county department may request a waiver of these requirements by submitting a request to the State Department Adult Protective Services unit. The request shall include:

1. The position for which the county department is requesting a waiver, including the percentage of time the position will be performing the duties of the APS program (% FTE).
2. Justification of the need for a waiver, to include:
   a. Documentation of the recruiting effort;
   b. Educational background of the proposed candidate, including degrees and post degree training, such as completion of a gerontology certificate, post graduate coursework, or other relevant training courses;
   c. Years of direct experience working with at-risk adults or other vulnerable populations applicable to the APS Program and clients; and,
   d. Other relevant qualities and information that demonstrate the candidate would be acceptable as a training level caseworker.

3. A plan on how and when the candidate will meet the coursework requirement or will otherwise meet the educational requirements of the position.

4. If the waiver request is not approved and the county department disagrees with the decision, the county department may request review of the decision by the Executive Director of the State Department.

D. All APS staff education and experience shall be documented in CAPS.

30.320 BACKGROUND CHECK REQUIREMENTS

A. The county department shall complete a criminal background check on all prospective APS employees who, while in their employment, have direct, unsupervised contact with any actual or potential at-risk adult.

B. If the county department has not previously requested and received a criminal background check on a current employee hired on or after June 1, 2010, the county department shall immediately request a fingerprint criminal background check. The county department shall pay the fee.

C. The county department shall require a fingerprint background check for all prospective employees.

1. The county department shall submit to the Colorado Bureau of Investigation (CBI) a complete set of fingerprints taken by a qualified law enforcement agency to obtain any criminal record held by the CBI.

2. The background check shall include a check of the records at the Colorado Bureau of Investigation and the Federal Bureau of Investigation.

3. The county department is strongly urged to require the background check be flagged for future notification of arrest and/or conviction.

4. The prospective employee shall pay the fee for the criminal record check unless the county department chooses to pay the fee.
5. The prospective employee’s employment shall be conditional upon a satisfactory criminal background check.

   a. The current employee or applicant shall be disqualified from employment, regardless of the length of time that may have passed since the discharge of the sentence imposed, for any felony criminal offenses as defined in Title 18, Articles 2-10, 12-13, 15-18, 20, 23 of the Colorado Revised Statutes, or any felony offense in any other state the elements of which are substantially similar to the elements of any of the offenses included herein.

   b. At the county department’s discretion, a person shall be disqualified from employment either as an employee or as a contracting employee if less than ten years have passed since the person was discharged from a sentence imposed for conviction of any of the following criminal offenses:

      1) Third degree assault, as described in Section 18-3-204, C.R.S.;

      2) Any misdemeanor, the underlying factual basis of which has been found by the court on the record to include an act of domestic violence, as defined in Section 18-6-800.3, C.R.S.;

      3) Violation of a protection order, as described in Section 18-6-803.5, C.R.S.;

      4) Any misdemeanor offense of child abuse, as defined in Section 18-6-401, C.R.S.;

      5) Any misdemeanor offense of sexual assault on a client by a psychotherapist, as defined in Section 18-3-405.5, C.R.S.;

      6) Any misdemeanor offense of arson, burglary and related offenses, robbery, or theft, as defined in Title 18, Articles 1-4, C.R.S.;

      7) A pattern of misdemeanor convictions within the ten years immediately preceding the date of submission of the application, or;

      8) Any misdemeanor offense in any other state, the elements of which are substantially similar to the elements of any of the offenses described above.

4. Prospective employees who are transferring from one county department to another are not required to be re-fingerprinted if they complete the following process:

   a. New employees must obtain their CBI clearance letter or a photocopy of their processed fingerprint card from their former employer. They must attach it to a new fingerprint card, with the top portion completed.

   b. The new fingerprint card must include the new employer’s address. "Transfer – County Department" must be inserted in the "Reason Fingerprinted" block.

   c. The CBI clearance letter (or photocopy of the old fingerprint card) and the new fingerprint card shall be sent with payment by the county department to the CBI.
d. County departments that have accounts with CBI are not required to send payment, but the county department shall enter its CBI account number in the OCA block of the new fingerprint card.

30.330 TRAINING REQUIREMENTS

A. The county department shall ensure that all new APS staff completes required APS training, as follows:

1. New entry and journey level caseworkers shall successfully complete the Pre-Academy Workbook (PAW) within one (1) month of hire or transfer to the APS program and shall not be assigned cases until the paw has been completed. The caseworker shall document completion of the PAW in CAPS.

2. New entry and journey level caseworkers shall complete the APS training academy.
   a. Small county departments with only one (1) caseworker who is less than a twenty-five percent (25%) FTE in APS shall complete the training academy within nine (9) months of hire or transfer to the APS Program. Caseworkers shall request case consultation support from a county APS supervisor or lead worker who has attended training academy or the State Department on any cases opened prior to attending training academy.
   b. All other county departments with at least one (1) caseworker with a twenty-five percent (25%) or higher FTE in APS shall complete the training academy within six (6) months of hire or transfer to the APS Program.

3. New supervisors, managers, administrators, and/or county department directors with direct casework supervision duties shall successfully complete the web-based APS supervisor training within six (6) months of hire, transfer to the APS Program, or promotion from a caseworker position. The web-based training requirements shall be waived if the supervisor, manager, administrator, or director attends the APS training academy.

4. New case aides shall complete the Pre-Academy Workbook (PAW) within one (1) month of hire or transfer to the APS Program. Case aides may attend APS training academy, space permitting.

B. The county department shall ensure that any APS staff member on the job longer than twelve (12) months completes ongoing training relevant to the APS Program and client populations. Attendance at any specific training event is at the supervisor’s discretion.

1. Caseworkers shall successfully complete at least forty (40) hours of ongoing training per fiscal year related to the APS Program, target populations, and the provision of casework services, as follows:
   a. At least fifteen (15) hours shall be State Department provided training specifically related to the APS Program, which may include:
      1) Statewide or regional training;
      2) Quarterly training meetings;
      3) County department onsite training; and/or,
4) Live webinar or self-directed web-based training.

b. Additional training options relevant to the APS Program, target populations, and/or the provision of casework services shall include, but are not limited to:

1) National APS organizations’ webinar training;

2) Child Welfare Training Academy coursework that has cross-over relevance and has been approved by the State Department APS unit;

3) Other state or national APS conferences; and/or,

4) Regional training or conference conducted by agencies or professionals that work with older adults or people with disabilities including, but not limited to, a community centered board, Alzheimer’s association, Colorado legal assistance developer, Colorado Coalition for Elder Rights and Abuse Prevention (CCERAP), Colorado Long-Term Care Ombudsman, local law enforcement, AP team, APS supervisor or county department attorney.

5) Reading reports or professional journals about current APS best practices, research, and interventions.

2. Supervisors, managers, administrators, and/or county department directors with direct casework supervision duties shall successfully complete at least thirty (30) hours of ongoing training per fiscal year related to the APS Program, target populations, the provision of casework services, or general supervision of employees, as follows:

a. At least fifteen (15) hours shall be State Department provided training specifically related to the APS Program, as outlined for caseworkers.

b. Additional training options include those outlined for caseworkers plus training options related to general employee supervision.

3. Case aides shall successfully complete at least twenty (20) hours of ongoing training per fiscal year, as outlined for caseworkers. At least seven (7) hours shall be State Department provided training.

4. Required training hours as outlined in Section 30.330, B, 1-3, shall be prorated for part time APS staff.

a. Persons working less than twenty-five percent (25%) in APS shall complete a minimum of:

1) Ten (10) hours for caseworkers, six (6) of which shall be state provided; and,

2) Five (5) hours for supervisors, managers, administrators, and/or county directors with direct casework supervision duties, three (3) of which shall be state provided; and,

3) Four (4) hours for case aides, two (2) of which shall be state provided.
b. Persons working twenty-five through forty nine percent (25-49%) in APS shall complete a minimum of:
   1) Twenty (20) hours for caseworkers, at least ten (10) shall be state provided;
   2) Ten (10) hours for supervisors, managers, administrators, and/or county directors with direct casework supervision duties, at least six (6) shall be state provided; and,
   3) Ten (10) hours for case aides, at least five (5) shall be state provided.

c. Persons working fifty through seventy-four percent (50-74%) in APS shall complete a minimum of:
   1) Thirty (30) hours for caseworkers, at least fifteen (15) shall be state provided;
   2) Twenty (20) hours for supervisors, managers, administrators, and/or county directors with direct casework supervision duties, at least fifteen (15) shall be state provided; and,
   3) Twelve (12) hours for case aides, at least six (6) shall be state provided.

d. Persons working seventy-five through one hundred percent (75-100%) in APS shall complete the full training requirement outlined in 30.330, B, 1-3.

C. All training hours shall be documented in CAPS within fourteen (14) calendar days of completion of the training.

30.340 STAFF DUTIES AND RESPONSIBILITIES

A. The direct supervisor or lead worker shall, at a minimum:
   1. Receive reports of mistreatment and self-neglect as outlined in Section 30.400.
   2. Evaluate the report, determine the response, and develop a plan for caseworker safety, as outlined in Sections 30.400. At the option of the county, the county department may use the RED Team process.
   3. Staff open cases of each caseworker monthly to ensure cases meet program requirements related to the provision of protective services.
   4. Review cases to ensure:
      a. Timely casework;
      b. Investigation, assessment, and case planning were thorough and complete;
      c. Case closure, if applicable, was appropriate; and,
      d. Documentation in CAPS is complete and accurate.
5. Review of cases shall be completed using one of two approved methods:
   a. Method One: using the case review score card in CAPS, each month review not less than fifteen percent (15%) of each caseworker’s cases that were open and/or closed during the month; or,
   b. Method Two: approve every county APS case at key junctures of the APS casework process utilizing the automated approval process in CAPS, as follows:
      i. Upon completion of the initial investigation, assessment, and case plan;
      ii. Upon completion of a six month reassessment for cases open longer than six months; and,
      iii. At case closure.

6. Assess APS caseworkers’ professional development needs and provide opportunities for training.

7. Respond to APS reports or have a contingency plan to respond within assigned time frames, including emergencies, and to provide protective services when no caseworker is available.

B. APS caseworkers shall, at a minimum:
   1. Receive reports of mistreatment and self-neglect as outlined in Sections 30.400;
   2. Investigate allegations and assess the client's safety and needs as outlined in Section 30.500;
   3. Develop, implement, and monitor case plans, conduct required client visits, and provide protective services as outlined in Section 30.600;
   4. Document case findings as outlined throughout 12 CCR 2518-1; and,
   5. Assume responsibility for own learning and required training hours.

C. APS case aides may assist caseworkers in completing non-professional level tasks that do not require casework expertise, but shall not perform the duties of the caseworker or supervisor, such as completing:
   1. The investigation and/or assessment;
   2. The case plan;
   3. The required monthly client contact visits; or,
   4. Required reports to the court, for cases in which the county department is the guardian or conservator.

D. APS intake screeners or administrative support staff may:
   1. Receive and document intake reports in CAPS or through the CAPS web2case form;
   2. Assign all reports to the supervisors for determination of appropriate response; and,
3. Direct urgent calls to the appropriate internal and external authorities.

30.400 REPORT RECEIPT AND RESPONSE

30.410 INTAKE

A. The county department shall receive oral or written reports of at-risk adult mistreatment and self-neglect, occurring in the community or in a facility.

B. The county department shall have an established process during business and non-business hours for receiving such reports.

C. The county department shall input oral reports directly in CAPS or the CAPS web2case form. Written reports received via email, fax, or mail shall be documented in CAPS within one (1) business day of receipt. If unable to enter the report in the system within one business day, the county department shall document the reason.

D. CAPS shall guide the information gathered for the report to include:

1. The client’s demographic information, such as name, gender, date of birth or approximate age, address, current location if different from permanent address, and phone number;

2. The reporter’s demographic information, unless the reporter requests anonymity, such as name, phone number, address, relationship to client and, if applicable, the reporter’s agency or place of business;

3. Allegations of mistreatment or self-neglect;

4. Safety concerns for the client;

5. Safety concerns for the caseworker; and,

6. The alleged perpetrator’s information, such as name, gender, address, phone number, and relationship to the client, when mistreatment is alleged.

E. The county department shall determine jurisdiction for responding to the report.

1. The county department with jurisdiction for responding to a report is the county in which the adult resides.

2. When the adult is homeless, as defined in 42 U.S.C. Section 11302, the county department with jurisdiction is the county in which the adult’s primary nighttime residence is located.

3. If jurisdiction is unable to be determined by 1 or 2, above, the county department with jurisdiction is the county in which the adult is currently present.

4. If an emergency response is necessary, the county department where the adult is located at the time of the report is the responsible county department until jurisdiction is determined.

F. County departments shall utilize all available resources to determine jurisdiction, such as:

1. History within CAPS;
2. Colorado Benefits Management System (CBMS);
3. Colorado Courts;
4. Where services are being provided; and/or,
5. The adult’s school.

G. If a county department receives a report and determines that the report was made to the wrong county, the receiving county department shall transfer the report to the responsible county department as soon as possible, but no later than eight (8) hours after determining the correct county.

30.420 REPORT CATEGORIZATION

A. The county department shall review and evaluate the report utilizing the RED team process and framework or a supervisory review to determine whether the:

1. Client meets the definition of an at-risk adult; and,
2. Allegations involve mistreatment or self-neglect.

B. The county department shall not investigate reports of verbal and/or emotional abuse when no other mistreatment indicators exist because verbal and/or emotional abuse are not included as mistreatment in C.R.S. Title 26, Article 3.1.

C. CAPS will generate a response recommendation.

1. The APS supervisor shall have the final decision to screen in or out the report.
2. The APS supervisor shall document in CAPS why the CAPS recommendation was reversed.

D. The county shall document and screen all reports received from law enforcement utilizing the RED team framework or supervisory review, to determine if the victim and the allegations meet AP eligibility criteria outlined in Sections 30.230 and 30.420, A.

E. At the option of the county, county departments may develop and implement a process utilizing the RED team framework in caps to review reports to determine report categorization and response time frames. The supervisor or lead worker has the discretion to overrule the RED team decision.

F. Reports that do not involve an at-risk adult and mistreatment or self-neglect, as outlined in Section 30.420, A, shall be screened out no later than the third working day after the receipt of the report. The county department shall not conduct an investigation.

1. The county department may provide information and/or referral(s) to the reporting party, as appropriate.
2. The county department may inform the reporting party of the decision not to investigate.
3. The county department shall document the reason the report was screened out.

G. Reports that involve an at-risk adult and mistreatment or self-neglect, as outlined in Section 30.420, A, shall be screened in and are determined to be a case.
30.430 RESPONSE PRIORITY

A. The county department shall determine a time frame response to the case based upon the reported level of risk.

B. When factors present indicate the client is in clear and immediate danger or urgent and significant risk of harm due to the severity of the mistreatment or self-neglect, or due to the vulnerability or physical frailty of the client, the county department shall:

1. Determine the case to be an emergency;

2. Call 911, if appropriate based on the circumstances of the report; and,

3. Make an initial response as soon as possible, but no later than twenty-four (24) hours including non-business days, after the receipt of the report. An initial response shall be:

   a. A face-to-face visit with the client; or,

   b. An attempted face-to-face visit with the client; or,

   c. An outreach to another professional, such as law enforcement hospital staff, to ascertain the client’s immediate safety.

4. If the initial response was not a face-to-face contact with the client and the county department was unable to ascertain the client’s safety, the county department shall attempt a face-to-face client contact each day following the initial attempt at contact, including non-business days.

   a. A law enforcement welfare check may be substituted for attempts at contact during non-business days. The county department shall follow up on the next working day.

   b. If the county department has confirmed the client to be unavailable or safe, such as in the intensive care unit (ICU), the reason for delayed response shall be documented.

   c. Initial and subsequent attempts at contact shall begin immediately when the client becomes or is expected to become available.

   d. Following the third day of unsuccessful attempts at contact, the county department may choose to send a letter requesting an appointment with the client.

   e. If attempts at contact remain unsuccessful, the county department shall close the case no later than thirty-five (35) calendar days after the last attempt at contact.

   f. The county department shall document all attempts to contact the client.

5. If the initial response was not a face-to-face contact with the client but the county department was able to ascertain safety, it shall make a face-to-face client contact on the first working day following the report.

   a. If the county department has confirmed the client to be unavailable, such as in the intensive care unit (ICU), the reason shall be documented.
b. Initial and subsequent attempts at contact shall begin immediately when the client becomes or is expected to become available.

c. Following the third day of unsuccessful attempts at contact, the county department may choose to send a letter requesting an appointment with the client.

d. If attempts at contact remain unsuccessful, the county department shall close the case no later thirty-five (35) calendar days after the last attempt at contact.

e. The county department shall document all attempts to contact the client.

C. When the report and subsequent supervisory review and/or RED team process indicate the client is not in immediate danger or urgent risk of harm but mistreatment or self-neglect is present or likely present, the county department shall:

1. Determine the case to be a non-emergency.

2. Make an initial response no later than three (3) working days beginning the day after the county department’s receipt of the report. An initial response shall be:

a. A face-to-face visit with the client; or

b. An attempted face-to-face with the client;

c. An outreach to another professional such as law enforcement or hospital staff, to ascertain the client’s immediate safety.

3. When the initial response was not a face-to-face contact with the client or the county department was unable to ascertain the client’s safety, the county department shall attempt a face-to-face client contact every other working day for a minimum of three attempts.

a. A law enforcement welfare check may be substituted for one attempt at contact, and qualifies as one of the three required attempts at contact.

b. If the county department has confirmed the client to be unavailable or safe, the reason for delayed response shall be documented.

c. Initial and subsequent attempts at contact shall begin immediately when the client becomes or is expected to become available.

d. Following the third unsuccessful attempt at contact, the county department may choose to send a letter requesting an appointment with the client.

e. If attempts at contact remain unsuccessful, the county department shall close the case no later than thirty-five (35) calendar days after the last attempted contact.

f. The county department shall document all attempts to contact the client.
4. If the county department was able to ascertain safety,
   a. The county department shall attempt a face-to-face client contact within the response time frame or beginning on the first working day after ascertaining safety if safety were ascertained on the last day of the response time frame. Attempts at contact shall continue every other working day for a minimum of three attempts.
   b. If the county department has confirmed the client to be unavailable, the reason shall be documented.
   c. Initial and subsequent attempts at contact shall begin immediately when the client becomes or is expected to become available.
   d. Following the third unsuccessful attempt at contact, the county department may choose to send a letter requesting an appointment with the client.
   e. If attempts at contact remain unsuccessful, the county department shall close the case no later than thirty-five (35) calendar days after the last attempt at contact.
   f. The county department shall document all attempts to contact the client.

D. Prior to the initial face-to-face client contact visit, the county department shall determine whether:
   1. The visit and investigation should be made in conjunction with law enforcement and/or personnel from other agencies in accordance with the county department's cooperative agreements;
   2. The client is in CAPS and/or is otherwise known to the county department;
   3. Safety concerns exist, based on historical data and information provided in the report, requiring the caseworker to be accompanied by:
      a. Law enforcement;
      b. The supervisor;
      c. Another case worker; or,
      d. Emergency, medical, and/or mental health personnel, if known or suspected medical or psychiatric conditions exist.

E. If the case originally appears to indicate a need for a face-to-face investigation but further assessment determines that a face-to-face contact is not required to resolve potential safety and risk concerns, the county department may collaborate with other professionals or responsible family or supports to resolve the safety concerns. Cases appropriate for phone collaboration include those:
   1. That present heightened worker safety concerns and upon consultation, law enforcement directs APS not to respond.
   2. That present heightened worker safety concerns due to environmental or infectious disease concerns and upon consultation, first responders, public health officials, and/or code enforcement directs APS not to respond.
3. In which it is determined that responsible family is aware of the concerns and is working appropriately to address the concerns.

4. Regarding a chronic situation in which APS has had a visit with the competent client in the past thirty (30) calendar days and determined APS intervention is unwanted or could not resolve the concern.

5. Regarding clients that have a case manager in place, such as a Single Entry Point (SEP) case manager, and calls between APS and the case manager can resolve the reporter’s concerns.

6. In which the client is hospitalized or institutionalized prior to the initial visit, and the county has determined that ongoing protective services is not required.

30.500 INVESTIGATION AND ASSESSMENT

30.510 INVESTIGATION AND ASSESSMENT OVERVIEW

A. The county department shall conduct a thorough and complete investigation into the allegations unless the initial visit and assessment confirms that the client is not an at-risk adult. If the client refuses to participate in the investigation, the county department shall complete the investigation by gathering evidence and interviewing other collateral contacts that have knowledge of the client or the alleged mistreatment.

B. The county department shall conduct an assessment of the client’s risk, safety, and strengths during the initial face-to-face visit to further clarify the level of risk of mistreatment or self-neglect to the client and the client’s immediate needs, whenever possible.

C. The investigation and assessment may be conducted independent of one another or simultaneously, depending on the nature of the allegations.

D. If upon initial investigation, the county department determines a different county has jurisdiction, the originating county department shall transfer the case in CAPS. The county department determined to have jurisdiction shall uphold the screening decision and conduct the investigation and assessment, unless:

1. Additional or new information related to the safety of the adult or alleged mistreatment or self-neglect indicating the case may be closed is gathered by the county department determined to have jurisdiction.

2. The basis for the decision to close the case shall be documented in CAPS.

30.520 INVESTIGATION

A. The county department shall conduct an investigation to determine findings related to allegations of mistreatment or self-neglect. The investigation shall include, but may not be limited to:

1. Determining the need for protective services. If the client is in clear and immediate danger, the county shall intervene immediately by notifying the proper emergency responders.

2. Determining if the investigation should be conducted jointly with another entity, such as:

   a. Law enforcement and/or the district attorney;
b. Community Centered Board;

C. Health Facilities Division;

D. Attorney General’s Medicaid Fraud Unit; and/or,

e. The long-term care ombudsman.

3. Conducting a face-to-face interview with the client, unannounced and in private, whenever possible, and if not unannounced and/or in private, the reason shall be documented in CAPS.

4. Conducting interviews with collateral contacts.

5. Interviewing the alleged perpetrator(s), with or without law enforcement, when appropriate and safe, and if the perpetrator is not interviewed, the reason shall be documented in CAPS.

6. Collecting evidence and documenting with photographs or other means, when appropriate, such as:

a. Police reports;

b. Any available investigation report from a currently or previously involved facility and the occurrence report from the Health Facilities Division;

c. Medical and mental health records;

d. Bank records;

e. Care plans for any person in a facility or receiving other services that require a care plan and any daily logs or charts; and/or,

f. Staffing records and employee work schedules when investigating in a facility.

7. Making a finding regarding the substantiation or unsubstantiation of the allegations;

8. Determining the identity of, and making a finding related to, the perpetrator(s) of the mistreatment.

9. Determining whether there are additional mistreatment concerns not reported in the initial allegations and investigating and documenting any newly identified concerns.

10. Notifying law enforcement when criminal activity is suspected.

B. The county department shall complete the investigation within forty-five (45) calendar days of the receipt of the report, ensuring that documentation of the investigation is occurring in CAPS throughout the investigation process, as follows:

1. All interviews, contacts, or attempted contacts with the client, collaterals, alleged perpetrators, and other contacts during the investigation shall be documented within fourteen (14) calendar days of receipt of the information.

2. All evidence collected during the investigation shall be scanned and attached to the case by the conclusion of the investigation.
3. Findings for the allegations and alleged perpetrator shall be documented no later than forty-five (45) calendar days from receipt of the report.

4. If the investigation cannot be completed within this time frame, the county department shall document the reason why.

30.530 ASSESSMENT

A. The county department shall complete a baseline assessment of the client to determine if there is a need for protective services. If the client is in clear and immediate danger, the county shall intervene immediately by notifying the proper authorities or arranging for appropriate emergency responders.

B. The county department shall determine the client’s risk and safety using the assessment tool in CAPS.

C. The county department shall complete and document the assessment in CAPS within forty-five (45) calendar days of the receipt of the report, as follows:

1. All impacts and mitigating services, and the narrative summary shall be documented and the assessment marked complete no later than forty-five (45) calendar days from receipt of the report.

2. If the assessment cannot be completed within this time frame, the county department shall document the reason why.

30.600. CASE PLANNING AND IMPLEMENTATION

30.610. CASE PLAN DEVELOPMENT

A. The county department shall develop a case plan for protective services based upon the findings of the investigation and assessment and in accordance with APS principles.

B. A case plan shall not be developed when the allegations are unsubstantiated and there is no other identified need.

C. The case plan shall include:

1. THE service needs necessary to successfully achieve safety improvement for any identified risk factors, characterized with a significant impact, for which there is no adequate mitigating service in place at the time of APS initial response;

2. The person responsible for arranging each identified service need, and if other than the county department, document the individual’s agreement to arrange the service need; and,

3. The status of all identified service needs.

D. The county department shall complete and document the case plan within forty-five (45) calendar days of the receipt of the report. If the case plan cannot be completed within this time frame, the county department shall document the reason why in CAPS.
E. The county department shall implement services, upon consent of the client, that are available in the community and that the client is eligible to receive at no or reduced cost or is able to pay for privately. The county department shall not be required to provide and/or pay for services that are not available in the community or those that the client is not eligible to receive at no or reduced cost or is able to pay for privately.

F. If services are unavailable through other government programs or local service providers and the APS client is unable to pay for the services, the county shall utilize APS client services funds, within available appropriations, to purchase goods and services for the APS client.

1. The county department shall not open an APS case only to purchase a service for a community member and shall not use APS client services funds for any service that does not benefit the APS client.

2. Client services funds may be used in the following situations:
   a. Emergency situations, such as emergency shelter, food, medicine, or utilities;
   b. When the purchase(s) resolves the immediate need; or,
   c. For one-time, temporary, or short-term needs while the APS client is waiting for other service providers or funding sources to be approved and services begun; and/or,

3. Goods and services acceptable for purchase with client services funds shall be the minimum necessary to resolve the safety concern.

4. Client services funds may be used to develop a county or regional contract with an agency or professional to provide a specific service for multiple APS clients throughout the contract duration, such as a specialist to conduct in-home capacity evaluations, a registered nurse to do in-home medical evaluations, or a long-term care facility to provide emergency shelter beds.

30.620 PROVISION OF SERVICES

A. The county department shall provide protective services for the shortest duration necessary to ensure the client’s safety by implementing case plan goals as quickly as possible in order to stabilize the client’s situation and prevent further mistreatment or self-neglect.

B. If the client appears to have capacity to make decisions:

1. The county department shall ask the consenting client to sign a release of information that covers general, medical, and/or money management, as appropriate to the client’s needs. However, a release of information is not required for the county department to provide protective services.

2. The client may refuse protective services, but the county department shall attempt to obtain the client’s consents to additional visits or phone calls from the caseworker if the situation appears to require further services. The caseworker shall document the consent or refusal to additional visits or phone calls.

3. Caseworkers shall provide clients who refuse services with the county department contact information for future reference.
C. If a client is suspected to lack capacity to make decisions, is at risk for harm, and refuses to consent to services, the county department shall document the client’s inability to provide consent.

1. Documentation shall include:
   a. Observations of client behaviors and actions;
   b. Medical documentation of client’s suspected incapacity and safety concerns to support involuntary case planning; and/or,
   c. Investigative evidence.

2. The county department shall ensure immediate safety and make its best effort to obtain an evaluation of the client’s decision making capacity from a qualified professional.

3. These situations shall be staffed with the supervisor and/or county attorney to:
   a. Determine the client’s risk and safety;
   b. Assess the client’s ability to consent;
   c. Determine urgency of safety concerns if intervention is not taken;
   d. Review previous interventions; and,
   e. Ensure the intervention is done ethically and is the least restrictive intervention to ensure the client’s safety.

4. The county department shall intervene when appropriate to coordinate with the responsible agency in taking action to protect the immediate safety and health of the client, such as:
   a. Gaining access to the client with assistance from law enforcement, family, or another person the client trusts;
   b. Emergency hospitalization;
   c. Coordinating with municipal authorities to arrange a home clean up, when there is a clear biohazard;
   d. Mental health hold, per Title 27, Article 65, C.R.S.;
   e. Coordinating with family members, law enforcement, or financial institutions to freeze client bank accounts to prevent further loss of assets;
   f. Emergency protection order, per Title 13, Article 14, C.R.S.;
   g. Authorization of a Medical Proxy Decision Maker, per Title 15, Article 18.5, C.R.S.;
   h. Requesting a judicial review of a fiduciary, per Title 15, Article 10, Part 5, C.R.S., and Title 15, ARTICLE 14, PART 7, C.R.S.;
i. Contacting the Social Security Administration or other pension administrator to secure a representative payee;

j. Petitioning the court for emergency guardianship and/or special conservatorship, per Title 15 Article 14, Parts 3 and 4, C.R.S., or,

k. Alcohol and drug involuntary commitment, per Title 27, Article 81, Part 112 and Title 27, Article 82, Part 108.

D. If a client lacks capacity and has a fiduciary to make decisions on behalf of the client, the county department shall consult with supervisors, the county director, the county attorney, law enforcement, and/or the district attorney to determine whether the county department should petition the court for a review of the fiduciary’s actions if:

1. The fiduciary refuses to allow the provision of protective services, which places the client at-risk for continued mistreatment or self-neglect; or,

2. There are allegations and evidence of mistreatment of the client by the client’s fiduciary.

3. The county department shall petition the court under the appropriate statute:
   a. Uniform Power of Attorney Act, as outlined in Title 15, Article 14, Part 7, C.R.S.;
   b. Guardianship or conservatorship statutes as outlined in Title 15, Article 14, Parts 3 and 4, C.R.S.; and/or,
   c. Fiduciary oversight statute, as outlined in Title 15, Article 10, Part 5, C.R.S.

E. The county department shall maintain ongoing client contact as long as the case is open.

1. For clients living in the community, a face-to-face client contact shall occur at least once every month, not to exceed thirty five calendar days (35) from the last face-to-face contact.

2. For clients living in a facility, a face-to-face client contact shall occur at least once every month, not to exceed thirty five calendar days (35) from the last face-to-face contact.
   A. The county department has the option of substituting a phone call to the direct care provider to ascertain the client’s current status, in lieu of a face-to-face visit for every other required monthly face-to-face contact.
   B. If it has been reported that the client has been mistreated at the facility, whether caused by a staff person, visitor, or other resident, and the facility has not appropriately resolved the cause of the mistreatment or put adequate safety measures in place, then a phone call to ascertain the client’s current status is not appropriate and the required monthly contact shall be a face-to-face visit.

3. During the monthly contact, the county department shall:
   a. Continue the investigation of allegations, if applicable;
   b. Continue assessment of client’s strengths and needs, including changes to the client’s status;
   c. Pursue the continued safety improvement and reduction and/or mitigation of risk;
d. Monitor the effectiveness of arranged services to determine whether continued
    aps intervention is needed; and,

E. Document information gathered during the contact per the above monthly contact
    requirements and update all contact records as information is obtained and/or
    changes occur for the client, alleged perpetrator, reporting party, and supports
    within fourteen (14) calendar days of the visit.

F. County departments may, as a courtesy, complete monthly visits on behalf of other county
    departments, as follows:

1. When a client temporarily or permanently relocates to a licensed facility more than
    seventy-five (75) miles outside the county boundary and the county department of
    original jurisdiction maintains the case, the county department of original jurisdiction shall
    ensure ongoing protective services.

2. Monthly contacts, required by Section 30.620, E, may be conducted by the county of
    original jurisdiction or may be conducted via courtesy visits by the county department in
    which the facility is located or by another county department that is visiting the facility.

3. No county department should be expected to provide more than three courtesy visits per
    twelve (12) month period at the request of the county department of original jurisdiction.
    County departments may negotiate to provide more than three courtesy visits.

4. Upon completion of each courtesy visit, the county department that conducted the visit
    shall document the monthly contact in caps, including any identified need for services or
    follow up by the county department of original jurisdiction, as required in Section 30.620,
    E, within fourteen (14) calendar days of the monthly contact. The county department of
    original jurisdiction shall be advised immediately of any need for emergency services
    identified during the courtesy visit.

5. The county department of original jurisdiction is responsible for ensuring the courtesy visit
    is conducted and is responsible for implementing any necessary services or follow up
    identified during the courtesy visit.

6. A county department conducting a courtesy visit shall not document the visit as a new
    report or case for the purpose of data collection.

G. If the client permanently relocates to another county and the client no longer needs protective
    services, or the client permanently relocates to another state, the county department shall close
    the case, as outlined in Section 30.660.

H. If the client relocates to another county and the client continues to need protective services, the
    county department shall transfer the case to the client’s new county of residence within five (5)
    calendar days of learning the move is permanent. The county department shall update the case
    in caps prior to completing the transfer, as follows:

1. Update the client, perpetrator, reporting party, and collateral contact information;

2. Update the investigation, assessment, case plan, and case notes to include all
    information gathered to date; and,

3. Call the receiving county department supervisor to staff the case prior to the transfer.
I. When a client permanently relocates to a new county, the case may remain with the former county department only when:

1. The case is within thirty-five (35) calendar days of resolution and the former county department chooses to retain the case;

2. The former county department holds representative payeeship and chooses to retain the case; and/or,

3. The former county department holds guardianship or conservatorship. Either county department may, with the agreement of the receiving county department, petition the court for a transfer of guardianship and/or conservatorship to the receiving county department.

J. County departments shall work collaboratively to provide protective services to clients, as needed.

K. The county department shall reassess the client’s needs and review the provision of protective services at least every 180 days as long as the case remains open, by:

1. Completing and documenting a new assessment on or before the reassessment due date;

2. Determining the appropriateness of continued protective services, based on the new assessment; and,

3. Updating the client services in the case plan.

30.630 COURT INTERVENTION

A. When the investigation and assessment indicates probable incapacity and there is immediate danger to the client’s health, safety, and welfare and the client is unable and/or unwilling to accept services, the county department is urged to petition the court for an order authorizing the appointment of an emergency guardian and/or special conservator in order to resolve the immediate safety concern(s).

1. Prior to reaching a decision to petition the court for guardianship or conservatorship, the county department shall ensure that the following factors are met and have been documented:

   a. No other method of intervention will meet the client's needs; and,

   b. Court intervention will resolve safety concerns; and,

   c. The county department does not seek guardianship solely to make medical decisions on behalf of the client (See Section 15-18.5-103(8), C.R.S.); and,

   d. Court intervention is warranted by either:

      (i) The degree of incapacity, as supported by medical or psychiatric evidence, and the degree of risk, as supported by investigative evidence; or,
(ii) The suspected incapacity of the client and the degree of risk, as supported by the investigative evidence, where medical or psychiatric evidence of incapacity cannot be obtained without court intervention.

2. The type of court intervention sought shall be the least restrictive intervention required to meet the needs of the client and only for those areas in which the client lacks the capacity or ability to understand the consequences of decisions, as medically or psychiatrically substantiated.

B. In the absence of other responsible parties, such as family or friends, the county department is urged to accept guardianship and/or conservatorship.

1. The county department shall consult with an attorney prior to filing a petition and throughout the process.

2. The county department shall provide all information deemed necessary by legal counsel.

3. A representative of the county department shall be prepared to testify in support of the petition.

4. When a county department is appointed by the court to act as guardian or conservator, a copy of the letter of appointment and all other court documents and reports shall be maintained in CAPS and the client’s case record updated to reflect fiduciary information.

C. The county department may choose to accept or reject any appointment of guardianship, based upon county department policy.

D. The county department shall initiate proceedings to withdraw as guardian and/or conservator when:

1. Medical or psychiatric evidence indicates a guardian and/or conservator is no longer necessary;

2. Another appropriate guardian or conservator has been identified; or,

3. The county department is no longer able to fulfill guardianship responsibilities, as appointed.

E. When a person or agency other than the county department is requesting appointment as the guardian and/or conservator of the client, the county department shall assist responsible parties, as needed, in identifying legal counsel or providing other assistance in initiating the petition(s).

30.640 REPRESENTATIVE PAYEE

A. The county department shall only apply for appointment as a representative payee when no other reliable person or agency is available and willing to seek the appointment and:

1. The reported financial issues pertaining to mistreatment and/or self-neglect have been substantiated and determined to present significant harm to the client’s health, safety, or welfare without intervention; and,

2. Other less restrictive intervention options have been assessed and found to be inadequate to protect and assist the client; and,
3. Medical, psychiatric, and/or financial evidence exists to show the client is unable to manage his/her personal finances.

B. The county department shall follow the procedures and guidelines for payees as set forth by the SSA or other organization(s).

C. The county department shall initiate procedures, as outlined by the SSA or other organization(s), to discontinue its services as representative payee when:

1. Medical, psychiatric, and/or financial evidence indicates a payee is no longer necessary;
2. Another appropriate payee has been identified;
3. The county department is no longer able to fulfill payee responsibilities, as appointed; or,
4. The client dies.

30.645 TRUST ACCOUNTS

A. The county department shall ensure that all guardianships, conservatorships, representative payeeships, and personal needs accounts that are held by the county department, and in which the county department has some financial authority or responsibility, have an established trust account.

B. The established trust account shall bear the name of the county department or the name and the title of the director of the county department as trustee for the client or as otherwise required by the Social Security Administration (SSA).

1. Withdrawals from savings, checking, or investment accounts shall require two signatures, neither of which may be the caseworker or the bookkeeper.
2. Shortages in trust accounts are the responsibility of the county department.

C. The county department shall manage any trust account established pursuant to such department’s fiduciary duty as a guardian, conservator, representative payee, or other purpose in accordance with any State and Federal requirements for said accounts.

30.650 PROVISION OF PROTECTIVE SERVICES

This section has been recodified under 30.500 and 30.620.

30.660 CASE CLOSURE

A. Cases not requiring additional protective services shall be closed within thirty-five (35) calendar days of the last monthly contact with the client.

1. If the client cannot be located and the county department has sent a letter to the client or is reaching out to others who might know the client’s location, the case may remain open until the county department exhausts all attempts to locate the client.
2. The county department shall document all attempts to locate the client.
B. Cases in which the client is relocated to a long-term care facility may remain open for up to thirty-five (35) calendar days in order to ensure the placement is appropriate for the client’s needs. The county department may keep the case open past the thirty-five (35) days if there is good cause and the department documents the reason in CAPS.

C. Cases in which the county department has been appointed as the client’s guardian, conservator, and/or representative payee shall remain open for the duration of the court order or for as long as the county remains as the representative payee.

D. A decision to close a case shall be made for any or all of the following reasons:

1. After investigation and assessment, the client does not meet the definition of an at-risk adult.

2. After investigation and assessment, the allegations are determined to be unsubstantiated and there are no other identified needs as determined by the assessment.

3. The investigation and assessment substantiates situations of mistreatment or self-neglect but the client is competent to make decisions and refuses services.

4. If, after repeated and documented efforts, the whereabouts of the client cannot be established or the client refuses contact.

5. The client no longer needs protective services.

6. Service goals are completed.

7. Repeated efforts at service delivery have proven to be ineffective and no additional alternatives exist.

8. Critical services necessary to improve safety are unavailable in the community or to the client.

9. The client moved out of the state.

10. The client has been sentenced to incarceration for longer than thirty (30) calendar days.

11. The client died.

E. The county department shall document the case closure, to minimally include:

1. A final assessment, if applicable, to determine the safety improvement as a result of APS intervention;

2. Update of all case, client, perpetrator, reporting party, and collateral contact information to reflect the most current data and information;

3. Reason for case closure;

4. Whether there is continued perpetrator involvement; and,

5. A narrative to address the overall outcome of aps intervention, to include why safety was or was not increased and why risk was or was not decreased.
30.700 COUNTY ASSIGNMENT AND COURTESY VISITS

30.710 COUNTY ASSIGNMENT

This section has been recodified under 30.410, 30.510, and 30.620.

30.720 COURTESY VISITS

This section has been recodified under 30.620

30.800 COMMUNITY COLLABORATION

30.810 COOPERATIVE AGREEMENTS

A. Per Section 26-3.1-103(2), C.R.S., the county department shall cooperative agreements in conjunction with its local:

1. Law enforcement agencies;
2. District Attorney;
3. Long-Term Care Ombudsman; and,
4. Community Centered Board.

B. The focus of such agreements shall be the coordination of investigations and protective services that promotes the protection of at-risk adults and each agreement shall provide that each agency shall maintain the confidentiality of the information exchanged pursuant to joint investigations.

C. The agreement with law enforcement shall include, at a minimum:

1. A process outlining the role of law enforcement for receiving, assessing, referring, and responding to reports received during the county department's non-business hours, if applicable;
2. A procedure regarding sharing of reports of mistreatment and self-neglect between the local law enforcement agency(ies) and the county department;
3. Procedures for the provision of assistance from one agency upon the request of the other agency;
4. Procedures to coordinate investigative duties; and,
5. The beginning and ending date of the agreement, the term of which shall not exceed five years.

D. The agreement with the District Attorney shall, at a minimum, include:

1. A procedure regarding the sharing of reports of mistreatment and self-neglect between the District Attorney and the county department;
2. Procedures for the provision of assistance from one agency upon the request of the other agency;
3. Procedures to coordinate investigative duties; and,
4. The beginning and ending date of the agreement, the term of which shall not exceed five years.

E. The agreement with the Long-Term Care Ombudsman shall, at a minimum, include:
   1. A procedure regarding the sharing of reports of mistreatment and self-neglect from one agency to the other;
   2. Procedures for the provision of assistance from one agency upon the request of the other agency;
   3. Procedures to coordinate investigative duties; and,
   4. The beginning and ending date of the agreement, the term of which shall not exceed five years.

F. The agreement with the Community Centered Board shall, at a minimum, include:
   1. A procedure regarding the sharing of reports of mistreatment and self-neglect from one agency to the other;
   2. Procedures for the provision of assistance from one agency upon the request of the other agency;
   3. Procedures to coordinate investigative duties; and,
   4. The beginning and ending date of the agreement, the term of which shall not exceed five years.

30.820 COLLABORATION

This section has been recodified under 30.500 and 30.810.

30.830 ADULT PROTECTION TEAMS

A. The director of each county department with ten (10) or more screened in reports of at-risk adult mistreatment and/or self-neglect in the prior state fiscal year is required to establish or coordinate an Adult Protection Team.
   1. The county department may establish its own Team or may coordinate with another contiguous county department(s) that is required to coordinate a Team.
   2. The Team shall meet quarterly, at a minimum.
   3. The county department shall determine the level of decision making authority for the Team. The role of the Team may be advisory only.

B. The purpose of the Team shall be to:
   1. Review the processes used to report and investigate mistreatment and self-neglect of at-risk adults;
   2. Staff particular cases or possible cases with Team members, such as those that:
a. Have proven difficult to resolve and Team members may be able to identify solutions;

b. Are situations where early intervention by other community systems may prevent mistreatment; and/or,

c. Are valuable for educating Team members on APS program processes and requirements.

3. Facilitate interagency cooperation regarding services to at-risk adults including the development of solutions and action steps necessary to reduce risk and improve safety; and,

4. Provide community education on the mistreatment and self-neglect of at risk adults. The county department shall be the primary training agency, but may utilize training provided by team members or another designee. The county department shall:

   a. Determine the topic to be presented, based upon county department or community need;

   b. Use materials developed by the county department, the State Department, national associations, or other professional adult protective services agencies;

   c. At a minimum, provide five (5) training activities per fiscal year, in any combination of the following:

      1) A live presentation to a community or professional group;

      2) Participation in a senior or community forum, such as:

         a) Providing an article for a newsletter or local community newspaper; or,

         b) Providing brochures or other written materials at a county department or other community event.

      3) Sponsorship of a community Elder Abuse Awareness Day or similar event.

C. The director of the county department or the director's designee shall identify and recruit team members consistent with professional groups as specified in Section 26-3.1-102(1)(b), C.R.S., and other relevant community agencies.

D. Each Team member shall be advised of the confidential nature of his/her responsibilities in accordance with Section 26-3.1-102(7), C.R.S., and shall be required to sign a confidentiality agreement annually.

E. The Team shall develop and adopt written By-laws or a Memorandum of Understanding that minimally include the Team's:

   1. Purpose;

   2. Structure, including:
a. Meeting facilitation. Teams that conduct education to the community as part of
the Team meeting shall adjourn to executive session prior to staffing any case or
discussing any APS client or community member;

b. Frequency of meetings; and,

c. Composition of the Team.

3. Rules for membership, including:

a. Member duties;

b. Process for resignation and causes for termination from the Team.

4. Process for handling potential conflicts of interest.

F. The county department shall enter all Team activities in CAPS within fourteen (14) calendar days
of the activity.

Editor’s Notes

History
Entire rule eff. 08/01/2012.
09/01/2014.
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