SUMMARY

A Review of the Dept. of Social Services Adult Protective Services Program

BACKGROUND

S.C. Code §2-15-64 requires that the Legislative Audit Council audit a program of the Department of Social Services (DSS) every three years.

We published an audit of the department's child welfare services in 2014. In 2016, after consultation with the members of the General Assembly, the Legislative Audit Council determined that it would review the department's adult protective services (APS) program.

APS provides for the health and welfare of vulnerable adults who are victims of actual or potential abuse, neglect, and/or exploitation.

Because DSS is the only entity legally authorized in South Carolina to investigate reports of noncriminal maltreatment of vulnerable adults in community settings outside of institutions, we believe that this program should be continued.

JULY 2017

INTRODUCTION

DSS investigates reported maltreatment of vulnerable adults in the community with physical and/or mental conditions that impair their ability to care for and/or protect themselves. The jurisdiction of the APS program does not include vulnerable adults in institutions, such as nursing homes and assisted living facilities, nor does it include criminal investigations.

DSS arranges for needed treatment services to mitigate the factors that place the vulnerable adults at risk or harm.

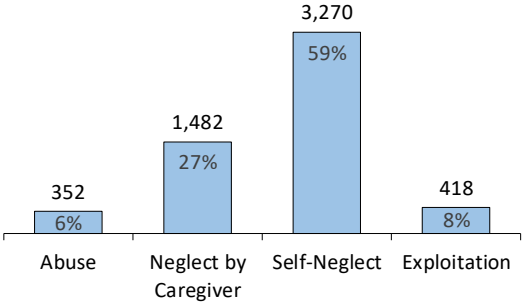
The investigations and treatment services provided by DSS are complex, requiring that caseworkers interact with victims, families, law enforcement officers, courts, medical professionals, and other state and local agencies.

DSS is based in Columbia with 46 county offices organized into 5 regions. For FY 15-16, the department reported spending approximately $8.4 million in primarily federal funds on its APS program.

STATISTICAL OVERVIEW

From FY 13-14 through FY 15-16, DSS substantiated 5,567 (42%) out of 13,289 allegations of maltreatment. The following graph summarizes the number of substantiated APS allegations for the period of review. When considering this data, it is important to note that national studies have estimated that only a small fraction of incidents of vulnerable adult maltreatment are reported.

SUBSTANTIATED APS ALLEGATIONS
FY 13-14 THROUGH FY 15-16



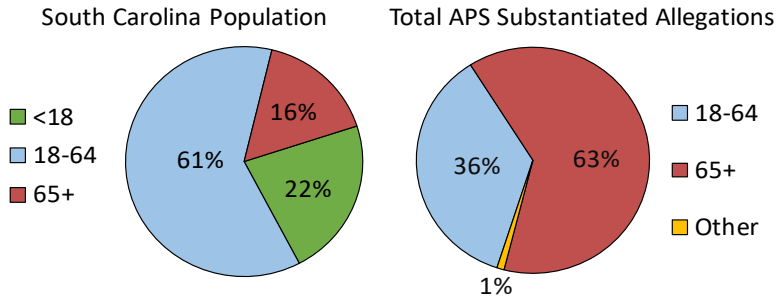
Note: An additional 45 allegations were substantiated; however, the type of maltreatment was not identified in the agency's database.

Source: LAC analysis of CAPSS data.

The elderly are disproportionately represented among maltreated vulnerable adults. In FY 15-16, persons aged 65 and older represented 16% of the total population but 63% of substantiated vulnerable adult maltreatment cases.

In addition, the elderly are the fastest growing age group in South Carolina. From 1990 to 2015, the state's population increased 40% while the number of persons aged 65 and older increased 100%.

S.C. Population as of July 1, 2015 Versus Substantiated APS Allegations in FY 15-16 by Age Group



Notes: The "South Carolina Population" chart is 1% less than 100% due to rounding.

The "Other" subgroup includes substantiated APS allegations in which the age of the victim was not identified in the agency's database.

Source: LAC analysis of CAPSS data.

Caseworker Qualifications, Salaries, and Caseloads

We reviewed the efforts of DSS to ensure that it has a well-qualified and well-trained workforce with reasonable workloads. The department has not:

- Clearly defined the minimum education and experience requirements for caseworkers.
- Formally required pre-hire fingerprint background checks for all agency caseworkers.
- Conducted a formal salary study for caseworkers yet has increased the salaries for the different types of caseworkers at varying rates.
- Established a career path adequate for retaining qualified caseworkers.
- Analyzed APS caseworker turnover nor established standards for acceptable rates of turnover.
- Ensured that APS caseloads do not exceed the department's caseload standard.

Training and Certification

The training of new APS caseworkers is conducted by the University of South Carolina (USC) operating under a contract with DSS. We identified the following issues:

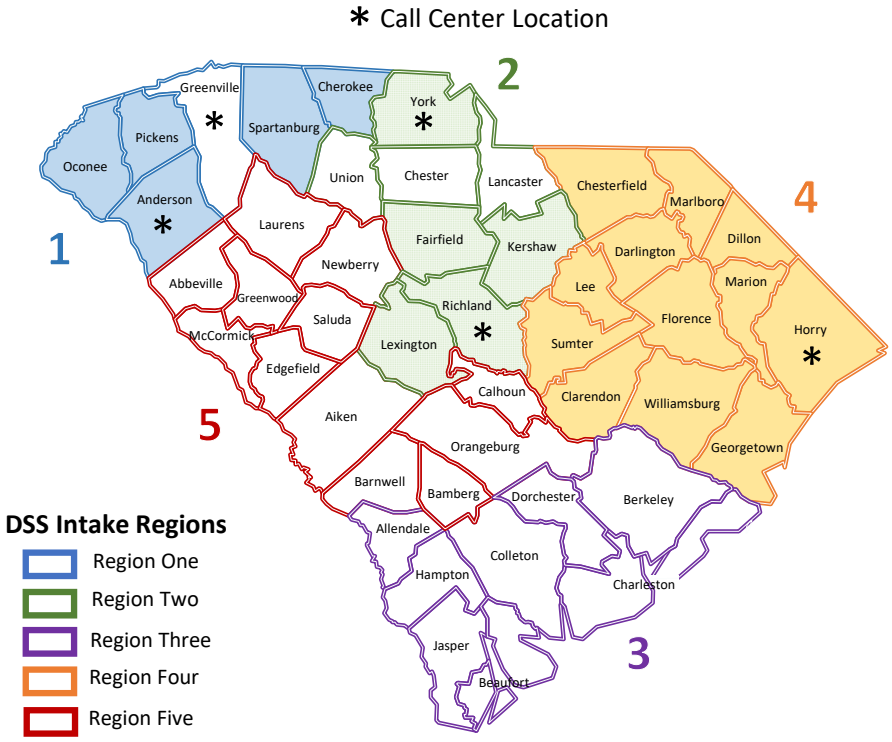
- No written training policies.
- Inadequate input when designing the training curriculum.
- No formal written approval of training content by DSS.
- A non-competitive process for awarding a contract to USC.
- A lack of contract monitoring.

Receiving and Screening Maltreatment Reports

In 2015, DSS began to implement a process in which reports of maltreatment are received and screened at regional call centers, which the department refers to as intake HUBS, instead of county DSS offices.
At the time of our review, the department had implemented regional call centers for 22 of the state's 46 counties.

Regional Call Centers

Shaded counties are currently part of the call center system.



Note: Although Greenville County is not currently part of the call center system, some call center staff are located at the Greenville County DSS office.

Source: LAC map created using DSS information.

We reviewed the regional call center process and found that DSS:

- Successfully increased access to APS intake staff, improved consistency, and increased the number of cases of adult maltreatment being identified and addressed.
- Had long call wait times for persons reporting maltreatment, insufficient quality assurance practices, and inadequately trained staff.
- Had inconsistent procedures for reporting maltreatment on nights, weekends, and holidays.
- Should have investigated an estimated 15% of the reports it screened out in FY 15-16.
- Did not have a clear policy on how previously-completed investigations should be used when determining whether to accept a new report regarding the same victim.
- Did not adequately document all maltreatment reports and referrals to other agencies.
- Did not consistently refer reports with suspected criminal activity to law enforcement.

INVESTIGATING ALLEGATIONS OF MALTREATMENT

We found areas needing improvement in state law and DSS practice regarding the investigation of maltreatment reports.

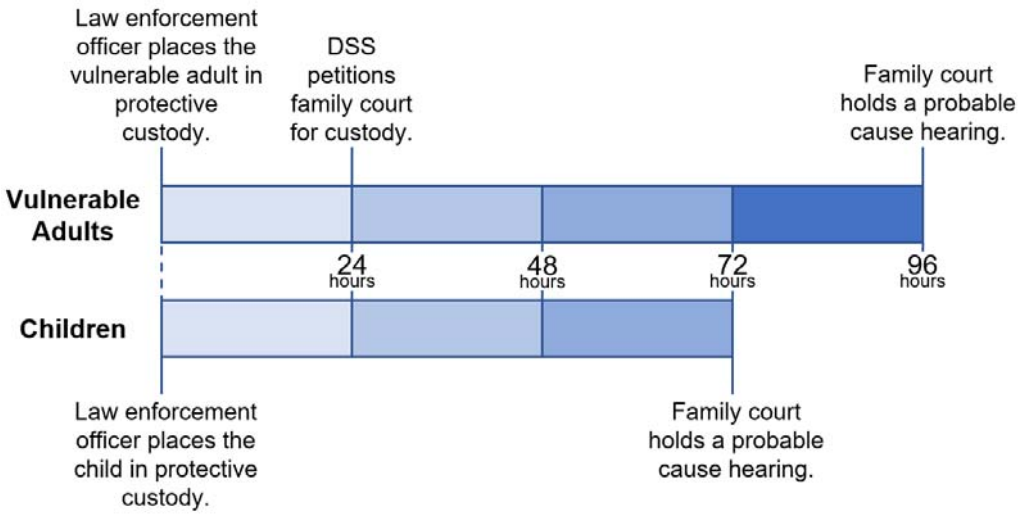
STATE LAW

South Carolina law regarding APS does not:

- Require DSS to initiate and complete investigations of vulnerable adult maltreatment reports within a specified period of time.
- Require representation of vulnerable adults by an attorney and a guardian ad litem before a court hearing is held to determine whether probable cause exists to remove them involuntarily from their homes and take them into protective custody.
- Establish standards of proof for case determination and provision of protective services.

In addition, the maximum time a maltreated *vulnerable adult* may be held involuntarily in protective custody by DSS without a hearing is at least 24 hours longer than the maximum time a maltreated *child* may be held in protective custody without a hearing. We found no reason for this difference.

TIMELINES FOR PROTECTIVE CUSTODY COURT HEARINGS



Note: This timeline assumes no delays due to weekends or legal holidays.

Source: LAC analysis of S.C. state laws.

DSS Practice

From FY 13-14 through FY 15-16

- Caseworkers did not promptly initiate 16.5% of investigations through face-to-face contact with the alleged victims.
- Caseworkers did not close 28% of investigations within 45 days, as required by policy.

From FY 14-15 through FY 15-16

- Based on a random sample of the non-self-neglect investigations, caseworkers did not attempt to interview the alleged perpetrator in an estimated 17% of cases.
- Based on a random sample of investigations lasting more than 60 days, caseworkers did not visit the vulnerable adult for a period of two or more consecutive months in an estimated 68% of cases. During the treatment (post-investigation) phase of services, caseworkers did not visit the vulnerable adult for a period of two or more consecutive months in an estimated 35% of cases.

APS Investigations and Treatment Services Metrics

* FY 13-14 through FY 15-16
** FY 14-15 through FY 15-16

Source: LAC analysis of DSS data

Measuring Performance

DSS keeps records of and tracks maltreatment cases through an internal database. We analyzed selected data from the agency's database and found that it did not have adequate controls within the system to ensure data integrity and utility. We also found omissions and inconsistencies in the data reported.

In addition, DSS has not adequately communicated the performance of its APS program or addressed potential root causes of underperformance. The department has some measures regarding its processes but does not have outcome measures indicating the extent to which the program is accomplishing its mission.

Organizational Structure

We reviewed the organizational structure for responding to the maltreatment of vulnerable adults and found several areas in need of improvement.

- State law does not require that all state and local agencies that investigate vulnerable adult maltreatment report outcome data to the S.C. Adult Protection Coordinating Council.
- In 2019, a change in the S.C. Constitution will place the Lieutenant Governor under the authority of the Governor. This will create an opportunity to operate the APS program, currently under the Governor, with the long term care ombudsman and aging network programs, currently under the Lieutenant Governor, in a single entity.
- The internal organizational structure of DSS has not given adequate focus to APS, which reports through the child welfare division of the department.
- In its program for children who are victims of maltreatment, DSS uses multi-disciplinary teams to coordinate its services with those of other service providers. There is not, however, an equivalent DSS program of coordinating services for vulnerable adults who are victims of maltreatment.

In Beaufort County, the non-profit Collaborative Organization of Services for Youth (COSY) hosts and staffs a multi-disciplinary team of government agencies and non-profit organizations to identify, coordinate, and provide needed services to local youths. The Beaufort County program, which is not part of DSS, is implementing an expansion of its scope of services to include vulnerable adults who are receiving or who need therapeutic services.

FOR MORE INFORMATION

Our full report, including comments from relevant agencies, is published on the Internet. Copies can also be obtained by contacting our office.

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