4.9.1 EXPANDED NO IN-PERSON RESPONSE

I. Introduction
   a. APS is required by State regulations to respond by an immediate or 10 day in-person response to reports of abuse, neglect, and exploitation (ANE), in order to protect the health and safety of vulnerable elders and dependent adults. (California Welfare & Institutions Code (WIC) 15763 (b) (2).
   b. Due to the current community risk environment from the Covid-19 (novel coronavirus), this procedure provides interim guidelines to ensure the health and safety of clients who are at risk of ANE and to avoid unnecessary exposure for clients and APS staff.
   c. APS State regulations allow for no in-person response (NTD) in certain situations when the client is evaluated to not be in imminent danger of abuse and that an in-person response is not necessary to protect the health and safety of the vulnerable adult. (WIC 15763 (2).
      i. When evaluating any APS report of abuse, the most important overriding concern is imminent risk of abuse and safety needs of the vulnerable adult from further ANE.
      ii. The decision to apply the expanded NTD procedure should be made during the screening of new reports by APS Supervisors.
   d. Effective immediately APS Supervisors and Case Assigning Supervisors are to assess all incoming reports to ensure that reports assigned for an in-person response are for disabled or older adults who are:
      i. In imminent danger or
      ii. If the in-person response is required, is necessary to protect health and safety of the disabled or older adult.

II. Investigations Requiring In-Person Response
   a. An immediate or 10-day in-person response is required for reports involving the following types of abuse and case situations:
      i. Physical abuse or sexual abuse;
      ii. Severe neglect or isolation;
      iii. Severe self-neglect;
      iv. Clients reported to have dementia and/or cognitive impairment unless conditions are met under IV. B. iii.”
      v. Mental health disorder that puts client at risk of death/severe impairment;
      vi. Wounds;
      vii. Clients who are Medically Dependent Consumers of Electricity (MDCE) without supports;
      viii. Confirmed no food or life-sustaining medications, and no way to obtain;
      ix. Bedbound or homebound clients without support or who have lost support;
x. Clients on life-sustaining medications, with no support, who typically receive such at an ADHC that has been closed.
xi. Seriously mentally ill clients [SMI] who are without stabilizing medications or supports [consider joint visits with Mobile Crisis Team or San Francisco Police Department (SFPD), as appropriate].

xii. Clients with no support, who typically receive daily medications at a Mental Health clinic that has been closed.

xiii. Clients with severe ADL deficits with no supports.

III. Evaluation of Reports for Expanded NTD

a. NTD cases still require investigation.
b. Decision for Expanded NTD determination is to be made during screening of new reports by APS supervisors and Case Assignment Supervisors.
c. When a case situation is in question for NTD appropriateness, APS Supervisor is to consult with APS Manager/Director.

i. Steps to evaluating a potential NTD client situation, as reported, should be completed by APS Supervisor or Worker by:
   1. Calls to the client;
   2. Calls to the reporting party;
   3. Calls to any appropriate collaterals and/or
   4. Review of any pertinent client case history

d. By following the above method to gather information, if the APS Supervisor and Worker are unable to determine whether a client requires an in-person response, the in-person response shall be made.
e. If a client/reporting party/appropriate collateral source cannot be reached to provide necessary information to evaluate client’s health and safety and imminent danger, an in-person response should be made with APS Supervisor assigning the appropriate response time.

IV. Potential Situations for Expanded No In-Person Response

a. The following are current NTD criteria (in accordance with WIC 15763(2):
   i. Report did not involve a protection issue.
   ii. The elder or dependent adult has an adequate level of protection and the protection issue has been resolved.
   iii. The elder or dependent adult received or will receive intervention from another agency or resource.
   iv. The elder or dependent adult was placed in a permanent facility and the allegations of abuse have been resolved.
   v. The allegation of abuse/neglect is from a non-credible source and the abuse/neglect cannot be corroborated.
   vi. Reports involving other circumstances.
   vii. Unable to obtain Information to contact/locate – closed investigation without findings due to lack of information.
b. Expanded NTD criteria can include the following:
   i. Financial abuse cases with unknown alleged abuser, particularly if it is the first
      report received by APS where education and coaching on self-protection can be
      used to prevent future incidents.
      1. APS Worker would make police report.
   ii. Self-neglect cases where the client has on-site support that can follow up with
       client.
   iii. In cases where the client is in the hospital, an Emergency Department, an RCFE,
       a SNF, or any type of licensed facility, the APS Worker will contact their staff
       (e.g. the RP, case manager, social worker, etc.) and request that they let APS
       know when the client will be discharged.
      1. The APS Worker may then participate in multidisciplinary calls in
         preparation for discharge.
   iv. If the report alleges physical or sexual abuse or severe neglect, the APS Worker
       will request the hospital, an Emergency Department, an RCFE, a SNF, or any
       type of licensed facility to call SFPD to initiate a report.
      1. The APS Worker will then follow up with SFPD’s Special Victim’s Unit, if
         necessary, to ensure a police report was made.
      2. If upon conversation with the facility’s staff, the APS Worker believes
         they will not call the police, then the APS Worker will call SFPD to have
         them dispatch an officer to the APS Worker so the APS Worker can
         make the report.
   v. Psychological abuse with no direct threats/plan.
   vi. Clients only in need of tangible goods and/or services that will resolve the
       protection issue.
      1. In consultation with their Supervisors, APS Workers may assess that
         clients who are not in need of an in-person response are in need of
         tangible goods and/or services.
         a. In these cases, the APS Worker must develop a service plan for
             the client, containing the areas of need that are being
             addressed and appropriate services to be provided.
         b. Human Services Technicians (HSTs) can be appropriately used in
            the process of purchasing and delivering items.
            i. In these situations, the following is to be documented in
               the APS database,
               1. Who has purchased and delivered the items;
               2. Confirmation via client or reporting party or
                  collateral that the items or services have been
                  received by the client.
         c. All appropriate payment forms and methods, i.e., P-Cards,
            Special Payments, Petty Cash, remain under the guidelines set
            forth by CCSF Purchasing & Contracts, and by CCSF APS MPP §§
            7.6, 7.7, 7.8.

V. Documentation of the Investigation
a. When the APS Supervisor and Worker have initially investigated and assessed a
   report/client situation, and the Supervisor has determined that the disabled or older
   adult is not in imminent danger, and that an immediate or ten-day response is not
necessary to protect the health and safety of the client, documentation in the APS database must include:

i. Supervisor rationale for changing response time from in-person response to no in-person response.

ii. APS Worker and/or Supervisor contacts with the client, and/or; the reporting party, and/or; appropriate collaterals.

iii. As investigated and assessed, and for each allegation, the protective factors, formal and informal supports, and client strengths that indicate no in-person response is necessary at this time.

b. Whenever possible and appropriate, documentation that the reporting party; and/or client; and/or collateral have been informed of the no in-person response designation.

c. Whenever possible and appropriate, documentation that the client; and/or reporting party; and/or collateral have been provided with the APS 24-Hour Hotline number, and/or appropriate referrals/partner agency information.