



World Elder Abuse Awareness Day

Adult Protective Services Program

“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.

Adult Protective Services

- ▶ APS will screen the report and determine the appropriate response.
- ▶ The report may be shared with law enforcement.
- ▶ APS will take appropriate action, which may include an investigation.
- ▶ APS may request a joint investigation with law enforcement or another agency.
- ▶ APS may offer protective services to the at-risk adult

APS Priorities

Confidentiality

- APS investigations and reports are confidential and cannot be shared except in very limited circumstances.

Consent

- At-risk adults must consent to protective services. APS does not need consent to conduct an investigation into allegations of mistreatment or self neglect.

Self-Determination

- At-risk adults have the right to make their own choices, unless they no longer have capacity, or unless their choices violate a law or are a danger to others.

Least Restrictive Intervention

- APS will always try to implement services for the shortest duration and the minimum extent necessary to protect the at-risk adult.

What's with this "At-Risk Adults" Term?

"At-risk adult", pursuant to Section 26-3.1-101(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.

Mistreatment Must be Present

"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.

The Forms of Mistreatment

- ▶ **“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.

The Forms of Mistreatment

- ▶ **"Self-Neglect"**, pursuant to Section 26-3.1-101(10), C.R.S., means an act or failure to act whereby an atrisk 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. In addition to those exceptions identified above, access to Medical Aid in Dying, pursuant to Title 25, Article 48, C.R.S., shall not be considered self-neglect.

The Forms of Mistreatment

- ▶ **"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. In addition to those exceptions identified above, access to Medical Aid in Dying, pursuant to Title 25, Article 48, C.R.S., shall not be considered caretaker neglect.

Who Is a Caretaker?

"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; Note: These are the APS Rules that will become effective May 30, 2018.
- ▶ 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.

Common Signs Of Mistreatment

- ▶ **Common signs of mistreatment:**
 - ▶ The adult is not allowed to visit alone.
 - ▶ The adult reacts with fear to a caregiver and can't speak openly in their presence.
 - ▶ Severe anxiety, depression, fearfulness which is abnormal for the adult.

Signs of Physical Abuse:

- ▶ **Signs of Physical abuse:**
 - ▶ Visible unexplained injuries such as burns, cuts, bruises, and bleeding.
 - ▶ Sprained or broken bones.
 - ▶ Injuries that happen over and over.
 - ▶ The individual doesn't want to see a doctor about their wounds.
 - ▶ Fingerprints or handprints visible on the individual's face or body.

Signs of Sexual Abuse

- ▶ **Signs of Sexual Abuse:**
 - ▶ Torn or bloody clothing, especially underwear.
 - ▶ Bruises, especially on both sides of the body or around the breasts or genitals.
 - ▶ Bleeding from the vagina or bottom.

Signs of Caretaker Neglect

▶ **Signs of Caretaker Neglect:**

- ▶ An injury that hasn't been cared for properly.
- ▶ Malnourishment, dehydration, or appearing hungry.
- ▶ Appearing disheveled, in soiled clothing or inappropriately attired for climate.
- ▶ Bedsores
- ▶ Missing or broken dentures, eyeglasses, hearing aids, or walkers
- ▶ Caregivers not following an identified care plan or doctors orders.
- ▶ Medications not being given to adult as ordered.

Signs of Self-Neglect

▶ **Signs of Self-Neglect:**

- ▶ Inadequate heating, plumbing or electrical service disconnected.
- ▶ Pathways unclear due to large amounts of clutter.
- ▶ Animal feces in home.
- ▶ Residence is extremely dirty, filled with garbage, or very poorly maintained.
- ▶ Not cashing monthly checks.
- ▶ Needing medical care, but not seeking or refusing.
- ▶ Lacking fresh food, possessing only spoiled food, or not eating/
- ▶ Refusing to allow visitors into residence.
- ▶ Giving away money inappropriately.
- ▶ Dressing inappropriately for existing weather conditions.
- ▶ Confusion or memory loss.

Questions/Comments?

Thank you for your time!

- ▶ APS Intake Line 719-444-5755
- ▶ Aric Bidwell, Supervisor 719-444-5600
- ▶ Tracy Munson, Supervisor 719-444-5754