

COUNTY OF MILWAUKEE
Inter-Office Communication

DATE: May 20, 2020

TO: Supervisor Marcelia Nicholson, Chairwoman, Milwaukee County Board of Supervisors

FROM: Shakita LaGrant-McClain, Interim Director, Department of Health and Human Services and Department on Aging

SUBJECT: **An informational report from the Interim Director, Department of Health and Human Services/Department on Aging, providing an update on a pilot between the DHHS - Disabilities Services Division and Milwaukee County Department on Aging**

Background

Chapters 46 and 55 of the Wisconsin State Statutes mandate that each county provide protective services for residents of vulnerable populations. In Milwaukee County, those services are provided by the Adult Protective Services (APS) and Elder Abuse (EA) programs.

APS is currently operated within the Disability Services Division (DSD) in the Department of Health and Human Services (DHHS). APS responds to reports of abuse, neglect, financial exploitation, and self-neglect of people ages 18-59 who have severe and persistent mental illness, degenerative brain disorders, developmental disabilities, and other like incapacities that substantially impair a person's ability to care for his or her needs. APS responded to 500 reports in 2019.

EA is a unit within the Aging Resource Center in Milwaukee County's Department on Aging (MCDA). Staff responds to reports of abuse, neglect, financial exploitation, and self-neglect of people age 60 and older. EA responded to over 1,100 reports in 2019.

Both units are required to respond to and investigate reports of abuse, neglect, financial exploitation, and self-neglect which can include, but are not limited to, a visit to the person's residence, observation of the person at risk, interviews with involved persons, and a review of treatment plans or financial records. The unit determines whether the person at risk needs services and provides or coordinates those services, which can include residential placement, in-home services, Publicly Funded Long-Term Care, or AODA treatment. Referrals to law enforcement, the district attorney, and other regulatory bodies are completed if the unit substantiates the report of abuse or neglect. Guardianship (a court-appointed legal decision-maker) is pursued if needed for the health and safety of the adult-at-risk.

Both units also oversee annual WATTS reviews for individuals who are protectively placed by Milwaukee County. A WATTS review is conducted annually by a guardian ad litem on the status of a person protectively placed under Ch. 55 of the Wisconsin Statutes. Timely completion is vital to comply with court orders.

Most of the statutes that govern both APS services (Wis. Stat. Ch. 55) and EA (Wis. Stat. Ch. 46.9) are exactly the same. Throughout the State of Wisconsin, all counties other than Milwaukee provide their protective services to adults with one division that serves all adults-at-risk, no matter their exact age or ability. According to their websites, Cook County (home of Chicago) and Hennepin County (home of Minneapolis) also structure their protective services to encompass all persons over age 18. The practice of serving people regardless of age or ability is a nationally recognized and practiced model. According to the federal DHHS - Administration on Community Living, “Most APS programs serve both older and younger vulnerable adults.” (Retrieved from <https://acl.gov/programs/elder-justice/supporting-adult-protective-services>)

APS/EA Pilot

DHHS and Aging both share a “No Wrong Door” vision of customer service for Milwaukee County residents. “No Wrong Door” means that anyone, regardless of age or disability, can and will be served regardless of a person’s entry point into the system. Milwaukee County also has a vision of achieving racial equity to become the healthiest county in Wisconsin. These visions are particularly important for our most vulnerable populations. For this reason, DHHS and Aging began piloting a combined protective service unit on June 1. The goal is to serve all Milwaukee County adult residents in need, regardless of age or ability. We strive to make protective services easy to access and seamless to operate. With a combined protective services unit, we expect many positive impacts to our customers, including:

- Creative solutions to problems with a combined team of professionals who all work in the same field but have expertise in various areas.
- Streamlining processes and making the best use of management-level employees.
- Improved customer satisfaction outcomes.
- Improved timelines of getting adults-at-risk the services they need.
- More robust services by having the expertise of investigators, a nurse, and a paralegal on one team.

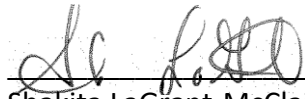
DHHS and Aging leaders have identified key performance indicators to measure the success of the pilot. The pilot will assess the volume of residents the combined programs are able to serve, how well adults-at-risk and other stakeholders are assisted, and customer satisfaction. Comparing data from before and during the pilot will provide valuable insight to the success of these two units working as one.

The APS and EA units currently collaborate on outreach, training, and multi-disciplinary teams with key members of the community, including law enforcement, Emergency Management Services (EMS), community health providers, and Long-Term Care administrators. EA employs a paralegal and an RN both of whom possess expertise and services that can best be maximized by working for a combined protective services unit. Additionally, APS recently hired a position to start completing WATTS reviews

after the provider network decreased. EA would benefit from being able to utilize that position as needed.

Next Steps

The pilot team plans to collect data throughout the remainder of 2020 and will periodically assess the results of the integration. If successful, this change would be incorporated into the 2021 Budget for approval by the County Executive and County Board.



Shakita LaGrant-McClain, Interim Director

Department of Health and Human Services and Department on Aging

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