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Santa Clara County’s APS Program Introduction

Housed within the Social Services Agency, Adult Protective Services APS is the second largest of five programs, along with In-Home Supportive Services (IHSS), Senior Nutrition, Office of the Public Administrator/Guardian/Conservator, and Seniors’ Agenda, that together comprise the Department of Aging and Adult Services (DAAS).

The Social Services Agency (SSA) has provided community and investigative response to victims of Elder and Dependent Adult abuse since 1978. Throughout the history of the APS program in Santa Clara County, the SSA, county leadership and Board of Supervisors (BOS) have demonstrated a thoughtful, progressive, and extremely supportive relationship to the mission and goals of the APS Program.

In California, APS programs are mandated by the California Welfare and Institutions Code and are a critical safety program that provides services for victims of abuse for two populations: Elders (residents of California age 60 and older) and Dependent Adults (residents of California age 18-59 with disability who are unable to advocate for themselves and make their own decisions.)

The Santa Clara County APS program provides a critical safety net to protect and prevent elder and dependent adults from abuse, neglect, and financial exploitation. In 2022, the APS program responded to 7,612 reports of abuse and conducted over 10,300 case investigations.

The FY 2022 APS Annual Report represents how APS accomplishes the vision of providing compassionate and innovative responses to the needs of Elders and Dependent Adults, to the community, and in collaboration with partnerships, and stakeholders. The APS staff are recognized for their dedication to the social work profession, the aging and disabled populations, and meaningful approaches to preventing and resolving elder and dependent adult abuse, neglect, and financial exploitation.
FY 2022 YEAR IN REVIEW

FY 2022 was a significant year for several reasons, primarily for marking the third year of the COVID-19 pandemic, which has had lasting effects and changes to all aspects of life, wellbeing, and community involvement globally, nationally, and locally. The APS program highlights of the year are the growth of the APS program due to recent AB 135 legislation and funding, the ongoing services provided through Home Safe and program outcomes.

APS remains focused on the needs of elder and dependent adults who are victims of abuse neglect, and financial exploitation. As the population of Santa Clara County residents who are 60 years of older continues to grow, the number of reports and cases of elder and dependent adult abuse neglect and financial exploitation has increased consistent with previous years.

Growth in APS: New Legislation and Funding:

**AB 135 APS Expansion**

AB 135 was implemented on January 1, 2022, changing the definition of an “elder” to a person who is 60 years of age or older (previously 65 or older) and a “dependent adult” to a person who is between 18 and 59 years of age (previously between 18 and 64) and has specified limitations.

By 2030, the number of Californians ages 65 and older will have increased by more than 30 percent since the APS program was realigned in 2011. AB 135 provides APS with funding for additional tools and structure to address the state’s growing aging population. This bill states it is the intent of the legislature to enable the APS program to intervene five years earlier and the opportunity to provide longer case management for those with more complex needs.

Since the bill was enacted, Santa Clara County APS received significant increases in reports and case investigations for people ages 60 and over.
AB 135 Caseload Outcome

As illustrated in Figure 1 below the APS program has seen an increase of 70% in abuse reports for ages 60-64 between 2021 and 2022.

Figure 1: Abuse Reports Ages 60-64

As illustrated in Figure 2 below the APS program has seen an increase of 51% in active cases for ages 60-64 between 2021 and 2022.

Figure 2: Active Cases Ages 60-64
Home Safe Program

The Home Safe Program supports the safety and stability of individuals in the APS program who are experiencing, or at imminent risk of homelessness due to Elder and Dependent Adult abuse, neglect, and financial exploitation.

The Home Safe program was initially a three-year pilot demonstration program starting in 2019 and ending in June 2021. The California Budget Act of 2021 (signed in July 2021) expanded the Home Safe program, making it a permanent sub-program within APS and providing an allocation for services.

APS contracts with Silicon Valley Independent Living Center (SVILC) for Home Safe services. Ongoing collaboration with the Office of Supportive Housing and the Continuum of Care provides additional coordination, including an integrated intake process and case review at multi-disciplinary team meetings.

Home Safe Program Outcomes

As illustrated in Figure 3 below, the APS Home Safe Program has served a total of 207 participants between July 2019 and December 2022. Client participation in 2022 in comparison to 2019 increased by 223%.

Figure 3: Home Safe Program 2019-2022
FY 2022 APS Outcomes and Services at-a-glance

7,612 Reports generated
5,000 Referrals to Services and supports
14,775 calls to the APS Call Center

156 PHN Responses
345 Behavioral Health Connections Program Responses
10,235 Active Cases

52% confirmed Investigative Findings
49 FAST Cases
97 Home Safe Cases
County of Santa Clara APS Program Operations

The County of Santa Clara APS program complies with state mandates to receive and respond to reports and perform case investigations of elder and dependent adult abuse, neglect, and financial exploitation.

APS Staffing

As part of the AB 135 APS Expansion and allocation of $1.9 million, APS received approval from the Board of Supervisors to add 26 positions for the APS program. During 2022, 18 of the new positions have been filled. The APS program is in the process of recruiting for the remaining positions in FY 2023. We look forward to the much-needed additions of staff, and the system improvements and efficiencies that will benefit the APS program and community from the recent legislation, funding, and budget process. As part of the APS expansion, APS is adding a Case Management Unit, that will enable longer term support and case coordination for elders and dependent adults to assist in maintaining their safety, independence and to reduce the risk of future abuse, neglect, and financial exploitation. Updates on the case management unit will be provided in the 2023 APS Annual Report.

Adult Protective Services 24-hour Hotline / Call Center

APS is required to provide a 24-hour hotline/call center to receive reports of known or suspected abuse of elders or dependent adults. APS is also required to provide information, referrals, and consultation to callers related to elder and dependent adult abuse neglect and financial exploitation. For this reason, not all calls received by the APS hotline become official reports of abuse.
Outcomes of the APS Hotline / Call Center

Total number of calls received during business hours:
  - 14,775

Total number of calls received after business hours:
  - 4,999

APS Intake and Response to Reports of Abuse

The APS program is mandated by the state to receive and respond to reports of elder and dependent adult abuse, neglect, and financial exploitation for people who do not live in licensed facilities. As part of the APS Intake process, Social Workers assess eligibility and risk, perform assessments using a structured decision-making tool, and create a disposition for the type of response needed for each report based on the state criteria and definitions.

Figure 4 below displays the disposition of reports in FY 2022: 86% of all abuse reports were assigned for case investigation. 14% of the abuse reports did not meet the state criteria for an APS investigation were not assigned.
Outcomes of the APS Intake Team

In FY 2022, the suspected Elder and Dependent Adult abuse reports made to the APS program, increased by 6% compared to FY 2021.

- 7,471 reports
- Provided information and referral to 1,353 callers

Types of Abuse Reported to Adult Protective Services

The State mandates monthly reporting of abuse reports received. In addition, the State requests information about the types of alleged abuse which are distinguished by two general categories:

- Abuse Perpetrated by Others and Self-Neglect.

*Within each of these categories, there are additional types of abuse Criteria:*

- Financial Exploitation
- Mental Suffering
- Neglect
- Physical Abuse
In FY 2022, APS received 7,329 reports of Abuse Perpetrated by Others and 3,658 Reports of Self-Neglect as illustrated in Figure 5.

**Figure 5: Abuse allegations Three-year comparison**

![Bar chart showing abuse allegations over three years](chart)

*Data for Fiscal Year

The detailed breakdown of reports made to APS with allegations of abuse/neglect/financial exploitation perpetrated by others is illustrated in Figure 6.

**Figure 6: Abuse Allegations by others Three-year comparison**

![Bar chart showing abuse allegations by type over three years](chart)

*Data for Fiscal Year
Self-Neglect

A general definition of self-neglect is the inability of an elder or dependent adult to perform essential self-care tasks that a person in a similar position would exercise and that is likely to result in injury or illness.

In FY 2022, Self-Neglect reports comprised 33% of all abuse allegations received and investigated by APS during the year. Self-Neglect allegations are broken down into subsets as illustrated in Figure 7 below.

- Self-neglect of physical care was 63%
- Self-neglect of residence was 25%
- Self-neglect of finances was 12%

Figure 7: Self Neglect Allegations Three-year comparison

![Bar chart showing allegations of self-neglect by category and year]

*Data for Fiscal Year

APS Active Cases and Outcomes

The primary APS goal is to enhance the quality of life for elder and dependent adults in Santa Clara County with services that protect and prevent abuse. APS social work staff investigate allegations of elder and dependent adult abuse, self-neglect, and financial exploitation. The process includes, completing biopsychosocial assessments, creating service plans in partnership with the client, and advocating for services including health related needs. APS social workers make referrals to APS Public Health Nurses, Social Worker Is and the Connection Program as well as referrals and coordination for services with other county partners and community-based agencies. In addition, APS social workers engage families and support systems to reduce risk, maintain, and enhance quality of life, promote self-sufficiency, and respect the right to self-determination.
Self-neglect cases most often require longer term interventions to address unmet needs, safety risks, and isolation. They are often more complex due to the absence of a support system, barriers to accessing service and resources and unknown or untreated health conditions. Social workers in the self-neglect unit are assigned to Home Safe cases and services include eviction prevention and addressing unsafe/unstable housing situations.

As illustrated in Figure 8, in FY 2022, APS experienced a slight increase in the overall numbers of case investigations.

- Active cases increased by 2% when compared to FY 2021
- Annual total of 10,235 active cases

Figure 8: Caseload Volume – Three-year comparison

![Caseload Volume Chart]

*Data for Fiscal Year

Since APS is structured as a crisis intervention short-term program, APS cases are assigned to social workers and closed on a flow basis. Weekly assignments average four per week and may be increased based on business need. However, the social workers have caseload standard of 26 cases at any time.

The APS Social Work Supervisory team performs quality assurance of all cases assignments and closures and works diligently with the social work staff providing consultation and support to ensure case work practices.
**Figure 9: 2022 APS Caseload activity**

![Graph showing APS Caseload Activity]

*Data for Fiscal Year*

**Number of Days Cases are Open**

As APS is designed for short-term investigation and intervention, state guidance recommends cases be open longer when there are ongoing APS protective issues. When cases are open longer than 90 days, it indicates the cases are more complex and it takes longer to find solutions and mitigates safety and risk.

Figure 10 below demonstrates that in FY 2022, the number of cases closed within 30 days increased by 26%.
Outcomes of Case Investigations

The County of Santa Clara APS program investigates elder and dependent adult abuse, neglect, or financial exploitation. APS social work supervisors assign the report to social workers for a case investigation. The social worker conducts case investigations and are required to determine an investigative finding regarding the abuse/neglect/financial exploitation allegation. State regulations define the terminology and include three outcomes:

**Figure 11: FY 2022 Allegations Investigative Findings**

<table>
<thead>
<tr>
<th>Investigative Findings</th>
<th>FY 2022 Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confirmed</td>
<td>3,680</td>
</tr>
<tr>
<td>Inconclusive</td>
<td>1,816</td>
</tr>
<tr>
<td>Unfounded</td>
<td>1,582</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7,078</strong></td>
</tr>
</tbody>
</table>

*Data for Fiscal Year

In figure 12, the abuse allegations confirmed by an APS investigation, show that financial exploitation has the highest rate of confirmed findings, followed by self-neglect, psychological abuse, physical abuse, and neglect.

**Figure 12: FY 2022, Investigative Findings by Abuse Type**

In the figure, investigative findings are broken down by abuse type, with financial exploitation leading, followed by self-neglect, psychological abuse, physical abuse, and neglect.

*Data for Fiscal Year
APS FY 2022 Caseload Demographics

*Data for Fiscal Year

**Language**

- English: 83%
- Vietnamese: 8%
- Spanish: 6%
- Other/Unknown: 3%

**Age**

- 65 to 84: 64%
- 85 and Older: 18%
- 60 to 64: 11%

**Client Type**

- Elder: 86%
- Dependent Adult: 14%

**Ethnicity**

- Caucasian: 36%
- Latino: 15%
- African-American: 14%
- Other: 2%
- Unknown: 29%

**Clients by Gender**

- Female: 5,718 (56%)
- Male: 4,450 (43%)
- Transgender: 21 (<1%)
- Other/Non-Binary: 1 (<1%)
- Unknown: 45 (<1%)
APS was fortunate to receive one-time federal funding from the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 with an allocation total of $216,238 to supplement existing practices and programs. APS is utilizing the funds for three initiatives:

**COVID 19 Funds**
- Acquiring laptop / tablet devices to enable real-time case documentation.
- Developing web-based training curriculum and program for APS Structured Decision-Making (SDM) assessment tools
- APS Law Enforcement Liaison (ALEL) position to enhance collaboration with local enforcement and the District Attorney’s Office

### Collaborative Practices

**FAST (Financial Abuse Specialist Team)**

Nationally, financial abuse has cost older adult billions of dollars. Various studies estimate the cost from $2.9 billion per year or greater. Women are nearly twice as likely to be victims of elder financial abuse as men. The Financial Abuse Specialist Team (FAST) was created in 1999 to stop exploitation, protect older adults from scams, and advise them about the possibilities of their financial situations. In Santa Clara County, financial exploitation represent 27% of all reports made to APS and is the second highest type of alleged abuse reported.

Per the Welfare and Institutions Code, APS agencies are mandated to maintain multi-disciplinary teams. To meet this need, APS continues to lead and chair the Financial Abuse Specialist Team for the purpose of providing interagency strategies. FAST cases are assigned to various team members for investigation which typically includes multiple interviews, visits to financial institutions, researching legal documents, financial statements and other documents associated with the alleged abuse. The team is composed of selected members from the offices of APS, County Counsel, the District Attorney (DA), the Public Administrator/Guardian/Conservator (PAG/C), and law enforcement.

In 2022, 49 FAST cases were received and investigated. Figure 13 displays the amount of assets protected by FAST in 2022, and the total since inception in 1999.

#### Figure 13: Amount of assets protected by FAST

<table>
<thead>
<tr>
<th></th>
<th>FY20</th>
<th>FY21</th>
<th>FY22</th>
<th>Since 1999</th>
</tr>
</thead>
<tbody>
<tr>
<td>Real Property</td>
<td>$32,088,142</td>
<td>$53,146,321</td>
<td>$79,878,950</td>
<td>$385,268,476</td>
</tr>
<tr>
<td>Liquid Assets</td>
<td>$1,856,184</td>
<td>$17,557,453</td>
<td>$13,142,583</td>
<td>$106,167,222</td>
</tr>
<tr>
<td>Stocks and Bonds</td>
<td>$2,540,317</td>
<td>$525,349</td>
<td>$8,714,585</td>
<td>$57,814,132</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>$64,836,460</td>
<td>$88,807,446</td>
<td>$142,610,435</td>
<td>$643,721,577</td>
</tr>
</tbody>
</table>
Rapid response, team confidentiality, and a multi-disciplinary approach are critical components of the success of FAST. Speaking out against financial abuse, educating the public, and supporting legislative changes designed to deter financial exploitation of elders and dependent adults are team values. With these key aspects and motivated members, prompt, and decisive action to prevent and remedy financial abuse is accomplished.

FAST presented at the 2022 NAPSA Conference and Elder Financial Exploitation Summit. Several members of the FAST team presented a workshop about FAST and the many accomplishments over its 20+ year history. The audience was impressed by the collaboration and astounded by the millions of dollars the team protected from financial abuse.

Public Health Nurses

Public Health Nurses (PHN) in APS have been essential to address the unmet health and medical needs of elders and dependent adults. PHNs assess APS clients who are experiencing complex chronic medical conditions that are either untreated or undiagnosed, which can make them vulnerable to abuse.

The PHN services support APS social workers to finding solutions to prevent recidivism and maintain independence. As part of the AB 135 Expansion, APS is in the process of adding two PHN II positions to support APS clients during 2023.

The type of Complex health conditions that PHNs address include:

- Diabetes
- High blood pressure
- Dementia
- Chronic obstructive pulmonary disease (COPD)
- Congestive heart failure
- Renal Failure
- Physical disabilities
- Others that are often untreated or undiagnosed

PHN interventions include:

- Educating clients and care givers regarding medication and care
- Assisting in procurement of medical equipment and supplies
- Assessing for emergency care need
The Connections Program – Partnership with Behavioral Health

The Connections Program serves APS clients with untreated mental illness who are isolated, homebound, and not currently connected to mental health services. The program assesses individuals for behavioral health needs and makes efforts to connect them to existing County services. The Connections Program currently has one Behavioral Health Department clinician who collaborates with APS on community calls or visits that involve the elder and dependent abuse, neglect, and financial exploitation.

The Connections Program works collaboratively with APS social workers to provide coordinated services to the referred individuals. Services offered may include short-term mental health counseling, brief case management, crisis intervention, risk assessments, and linkage to community agencies for older adults. Due to the passing of AB 135 the Behavioral Health Services Department (BHSD) is proposing to add additional staff to the Connections Program in APS with MHSA funds.

Elder Population Growth and Demographics

By 2030, the last of the Baby Boomers will be 65 years old and older adults will outnumber children in Santa Clara County, five years before the United States as a whole.

As illustrated on Figure 14 below projected by the California Department of Finance, adults ages 65 and older will make up 20 percent of Santa Clara County’s population by 2030 and will grow to over 25 percent by 2060. The number of adults ages 60 and older has already climbed beyond the 20 percent mark and will make up over 30 percent of the total population of the county by 2060.

Figure 14: Projected Population Growth in Santa Clara County
CONCLUSION

The Santa Clara County APS program provides a critical safety net to protect elders and dependent adults from abuse and prevent abuse. As the elder population continues to grow, the ability to meet the service need in the same way is becoming ever more challenging. The APS program collaborates with various community agencies that provide affordable housing, medical assistance and transportation services for elders and dependent adults in the community.

The APS program maintains professional and highly motivated staff who are dedicated to finding solutions for elders and dependent adults while maintaining dignity, improving quality of life, and respecting the right to self-determination. APS case investigations social workers are in the community daily, engaging, and empowering victims and advocating for their right to live free from abuse. The APS program serves the community with customer-focused services, innovative practices, and with compassion.

![NCEA National Center on Elder Abuse](image)

**Physical Signs of Elder Abuse**
- Dehydration or unusual weight loss
- Missing or unusual clothing
- Unexplained injuries, bruises, cuts, or scars
- Unsanitary living conditions and poor hygiene
- Unattended medical needs

To learn more, visit [ncea.acl.gov](http://ncea.acl.gov)

**Emotional/Behavioral Signs of Elder Abuse**
- Increased fear or anxiety
- Isolation from friends or family
- Unusual changes in behavior or sleep
- Withdrawal from normal activities

To learn more, visit [ncea.acl.gov](http://ncea.acl.gov)

**Financial Signs of Elder Abuse**
- Fraudsent signatures on financial documents
- Unpaid bills
- Unusual or sudden changes in spending patterns, will, or other financial documents

To learn more, visit [ncea.acl.gov](http://ncea.acl.gov)