

Adult Protective Services, What You Must Know



What is APS?

Adult Protective Services (APS) programs promote the safety, independence, and quality-of-life for vulnerable adults who are, or are in danger of, being abused, unable to care for themselves, neglected by others, or financially exploited, and who are unable to protect themselves. APS is a social service program authorized by law in every state to receive and investigate reports of elder or vulnerable adult maltreatment and to intervene to protect the victims to the extent possible.

APS can differ from state to state and even from county to county in terms of definitions, client eligibility requirements and standards of practice. In the vast majority of states, APS clients are “vulnerable adults,” or adults 18 and older with a significant physical and/or mental impairment. In a few states APS serves only older persons (usually age 60 and above) with impairments, while in other states older persons can be served based on age alone; i.e. they do not have to have a disability. APS responds to reports of elder/vulnerable adult abuse in private homes in every state; in about half the states they also investigate reports of abuse in nursing homes and other long-term care facilities.

Reporting elder/vulnerable adult abuse

In nearly every state there are certain professionals such as health care providers, social workers, and bankers, who are required by law to report known or suspected abuse to authorities. These individuals are called mandated reporters. Some states require all citizens to report their concerns. All states accept voluntary reports, allow for anonymous reports, and provide good-faith reporters with legal protections.

For state reporting requirements or to find local services and resources, please visit Elder Locator (eldercare.acl.gov). The Eldercare Locator’s specialists are available Monday-Friday from 8:00 a.m. – 9:00 p.m. ET. You can call them at **1-800-677-1116**, start an online chat, or email Eldercare Locator staff. You also can browse the website 24/7.

When a report is made, APS must determine if the report meets state definitions and criteria. Reports that do not are referred to other agencies for assistance.



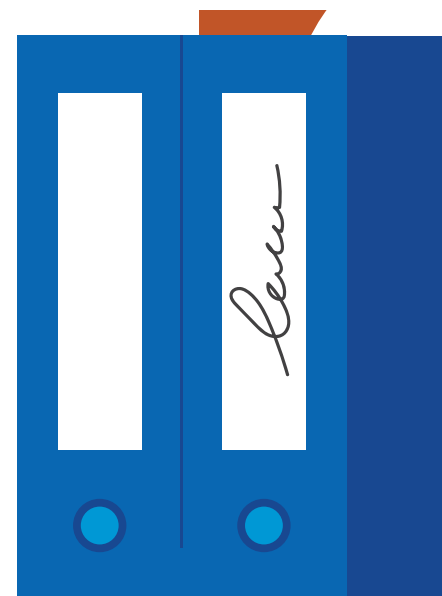
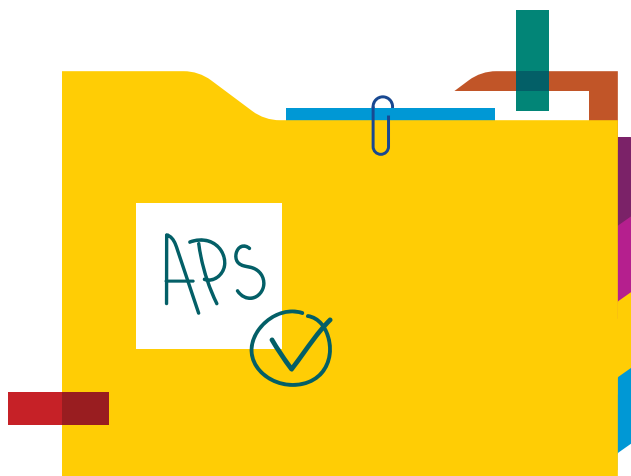
APS must always balance the duty to protect the safety of the vulnerable adult with the adult’s right to self-determination. All vulnerable adults should be treated with honesty, care, and respect.

What does APS do?

- Receives reports of alleged abuse, neglect, self-neglect or financial exploitation and determines if the client is eligible for APS services.
- In most states, APS investigates the allegations by interviewing the client, secondary contacts, and alleged abuser(s). APS also examines evidence such as medical and bank records.
- Addresses emergency needs for food, shelter or law enforcement protection.
- Determines if abuse is occurring. If it is not, referrals for other services may be provided.
- If it is, APS develops a case plan, with the client, to stop the abuse and to address the client's health and safety needs. APS may recommend services such as medical or mental health treatment, housing assistance, legal assistance, financial assistance, personal care, and home delivered meals.

Client protections

- Adults have the right to decline protective services unless a qualified professional determines they are unable to make decisions for themselves. In these cases, APS may need to petition the court to appoint a guardian or conservator, or seek a court order for involuntary protective services. It is the duty of the APS professional to try all other options before seeking involuntary protective services.
- All client information is held in strict confidence by APS and generally may not be disclosed without a court order or a release of information signed by the client.
- APS professionals work together with other professionals to ensure the safety of vulnerable adults. This collaboration often takes the form of multidisciplinary teams consisting of professionals from social services, criminal and civil justice, mental health, medicine, finance, public health and other services.



Frequently Asked Questions (FAQs)

I've witnessed vulnerable adult mistreatment and wish to make a report. Can I make an anonymous report to Adult Protective Services? If I disclose my identity, how will that information be used?

Yes, any person making a report to APS can do so anonymously. Please visit eldercare.acl.gov or call **1-800-677-1116** for more information on how to make a report in your area. You can also visit www.napsa-now.org/help-in-your-area. Providing your information will allow the APS investigator to contact you and request additional details about your concerns. While some state laws protect the identity of the person making the report, others do not. It is important for you to understand that, depending on state law, the vulnerable adult who is the subject of the report may discover that you made the report to APS.

I made a report to Adult Protective Services, but have not heard back from the program about the status of the allegations I reported. Why is this?

APS records and findings are not public. All documentation completed for an APS case must be kept confidential and can only be released to the vulnerable adult or persons designated by the vulnerable adult to receive the information, much like medical records, or by court order.

A close relative of mine was reported to Adult Protective Services. What should I do?

The single most important action you can take is to cooperate fully with the investigation and provide any information you can if contacted by the investigator. If there is not enough evidence to show that more likely than not, mistreatment occurred, the case will be closed. If mistreatment has taken place, you may be asked to assist with whatever action is necessary to keep the vulnerable adult safe.

Someone made a report to Adult Protective Services that I was being mistreated. What are my rights?

It is the duty of the APS investigator to inform you of your rights. You will have the right to determine what happens with your situation and what assistance you will receive unless a psychologist or physician evaluates you and reports that you are unable to make your own decisions and a judge agrees. It is important that you cooperate with APS as they determine if mistreatment has occurred. You may read about the APS Code of Ethics at www.napsa-now.org/about. Remember, APS' only goal is client safety.

I made a report to Adult Protective Services and know that mistreatment occurred, but the case was closed. Why did this happen?

There could be several reasons as to why the case was closed. The APS investigator may have determined that the mistreatment did not meet the legal APS definition. The vulnerable adult may have declined protective services, despite mistreatment occurring. Perpetrators of vulnerable adult abuse are often adult children or other family members whom the vulnerable adult may wish to protect despite the mistreatment.¹

Someone made a report to Adult Protective Services that I was being mistreated. Will I be placed in a nursing facility if the mistreatment is confirmed?

The majority of APS investigations involve voluntary actions by or on behalf of the client. It is very unlikely that you would be placed into a nursing facility without your consent. APS professionals can only seek involuntary intervention when a judge orders the involuntary intervention. It is the responsibility of the APS professional to use the least restrictive services first whenever possible—therefore, giving preference to community-based services rather than institutionally-based services.²

I made a report to Adult Protective Services and the allegations were deemed substantiated (meaning enough evidence supported the claims). The victim appears confused and forgetful, but APS still took no action. Why is that?

There could be several reasons for this outcome. Despite exhibiting some confusion or memory loss, the impairment may not be significant enough for a psychologist/physician to recommend involuntary intervention. Involuntary intervention may not be warranted given the safety of the situation or extent of the mistreatment.

1 McGee, L. & Urban, K. (2022). [Adult Mistreatment Data Report 2021](#). Submitted to the Administration for Community Living, U.S. Department of Health and Human Services.

2 United States Administration for Community Living [ACL] (2020). [Voluntary consensus guidelines for state adult protective services systems](#). Author.



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