

APPENDIX D.1.

OLDER ADULT PROTECTIVE SERVICES AGING & DISABILITY DATA ENTRY REQUIREMENTS

Reports of Need can be received in several different ways (e.g. telephone calls, letters, referrals). Upon receipt of a Report of Need (RON), the consumer shall first be registered in Aging & Disability (A&D), formerly SAMS. The registration of a consumer can also be done in Mobile Assessment.

Protective Service consumers' entire electronic case record is recorded and maintained in A&D (see the definition of "case file, case record, or record" in OAPSA Regulation § 15.2. Definitions.). This information includes consumer details, National Aging Program Information System (NAPIS) data, Care Enrollments, Care Plans, Service Plans, Service Orders/Deliveries, Journal Notes, Assessments, investigative activities/data, and File Attachments.

The table below provides high-level details about the Protective Services program data collection in A&D. The OAPSA *Aging & Disability Documentation Procedural Manual* shall be consulted to obtain specific step-by-step instructions, details, and field level information.

Field Name	Instructions
Consumer Search	<p>Prior to entering a consumer into A&D, it is essential to search for an existing record for that consumer. This reduces the likelihood that duplicate consumers will be generated in A&D. The consumer search may be done in A&D or Mobile Assessments.</p> <p><u>Mobile Assessments:</u> Search using the consumer's name. If no match is identified, registering the consumer can be completed with basic information. When the RON is generated, all applicable information obtained within the RON form will automatically copy to the consumer's Consumer Details record.</p> <p><u>A&D:</u> Search using one or more of the below bulleted items. If it has been determined through a search that the consumer does exist in A&D, their name and demographic summary information will be displayed.</p> <ul style="list-style-type: none">• Search by Name – Last Name, First Name, Middle Initial• Search by Address – Street Number, Street Name• Search by Town of Residence – Town Name• Search by Phone Number – Area Code & Phone Number• Search by Social Security Number <p>If the consumer exists and is registered in another county, DO NOT create a new record (update the Default Agency, if necessary, to indicate the AAA for the county in which the older adult currently resides.)</p> <p>Review the data elements in the Consumer Demographics Section and update as necessary.</p> <p><i>(OAPS Manual Reference Chapter 1)</i></p>

Field Name	Instructions
Consumer Demographics	<p>If it has been determined after searching for the consumer that the individual DOES NOT EXIST in A&D, a new Consumer Record shall be created in A&D. The following information shall be entered/reviewed:</p> <ul style="list-style-type: none"> • First Name • Middle Initial (if known) • Last Name • Date Registered • Date Report of Need received • Gender • Date of Birth • Social Security Number <ul style="list-style-type: none"> ○ If the reporter refuses to provide the consumer's <i>full</i> SSN, utilize the following numbering convention: (000 - AAA# - Last Four Digits of the Consumer's SSN) ○ If the reporter does not know the consumer's SSN, use the last four digits of the A&D ID in place of the last four of the SSN (you will have to save the record without the SSN first to create and obtain the A&D ID). • Default Agency <ul style="list-style-type: none"> ○ Always the county where the consumer resides. • Ethnic Race • Nationality • Home Phone <p><u>Care Manager:</u></p> <ul style="list-style-type: none"> • Primary Care Manager • Default Provider <ul style="list-style-type: none"> ○ The provider is your AAA. <p><u>Home Address:</u> The Home Address is the physical location where the consumer votes, pays taxes, sleeps, etc.</p> <ul style="list-style-type: none"> • If it is known, with certainty, that the consumer is placed in a facility on a temporary basis, then the residential address is still the consumer's permanent address and NOT the facility. • If the consumer is PERMANENTLY placed at a facility, or IF it is unknown whether the consumer is TEMPORARILY or PERMANENTLY placed at a facility, then the <u>facility address</u> is used as the residential address. <p><u>Address 1:</u> The street address shall always be entered in Address 1 if one is provided. If the consumer only has a P.O. Box, or RR Address, that information is entered in Address 1.</p> <p><u>Address 2:</u> If Address 1 has a street address, the P.O. Box, Apartment Number, building name, or facility name shall be entered in Address 2.</p> <ul style="list-style-type: none"> • County • Town

Field Name	Instructions
	<ul style="list-style-type: none"> • State • Zip Code will auto-populate from Address data • Municipality <p><u>Mailing Address:</u> The Mailing Address is the address to which the consumer's mail is delivered. If the Mailing Address is different than the Residential Address, uncheck the "Same for Mailing" checkbox and complete all necessary additional mailing address fields.</p> <p><u>Basic Information in Consumer Details:</u> The following information shall be entered/reviewed:</p> <ul style="list-style-type: none"> • Prefix • Suffix • Maiden Name • AKA Name • Marital Status <p>For the following sections, enter any known information at the time of creating the consumer.</p> <ul style="list-style-type: none"> • NAPIS • Insurance • Other Characteristics • Care Management • Emergency Planning: This information will get completed as the case progresses and as additional information is obtained and entered. <p><i>(OAPS Manual Reference Chapters 1 & 17)</i></p>
<p>Inactive Consumers</p>	<p>Consumers that were previously registered in A&D and have been deactivated shall be reactivated.</p> <p><u>Update Basic Information:</u> The following information shall be updated:</p> <ul style="list-style-type: none"> • Active: Place a checkmark in box • Status Date: Today's date <p><u>Non-Caremanaged Care Enrollment:</u> Consumers who were previously registered in A&D and have been deactivated may need to have the Non-Caremanaged Care Enrollment manually created.</p> <p><i>(OAPS Manual Reference Chapter 1)</i></p>
<p>Report of Need</p>	<p>The RON is a vital component in determining a consumer's needs and categorizing the urgency of the alleged abuse and/or neglect. Accurate intake and documentation of the RON is imperative in order to quickly address and reduce/eliminate risk.</p> <ul style="list-style-type: none"> • Agency:

Field Name	Instructions
	<ul style="list-style-type: none"> ○ OAPSA RONs: County where the consumer resides. ○ APS RONs: The Intake Agency ● Provider: The Intake Agency ● Date of Assessment: The actual date the RON was received ● Password: Leave blank (unless AP has access to A&D; refer to <i>A&D Documentation Procedural Manual</i> for instructions). <p><u>Use of Notes:</u></p> <ul style="list-style-type: none"> ● Information documented in the Notes sections of each individual question is unable to be captured by reports, therefore it is imperative that check boxes are used. ● Notes shall provide supplemental or detailed information relevant to the checked response(s) to the question. <p><u>Use of “Other” Response:</u></p> <ul style="list-style-type: none"> ● The selection of “Other” as a response is to be used <u>only</u> in rare instances when there is no appropriate choice provided. ● A note shall be added to each question where “Other” is a response. <p>(OAPS Manual Reference Chapters 3,4 & 5)</p>
Investigation Summary and Assessment	<p>The Investigation Summary and Assessment (ISA) shall be immediately created by the <u>investigating agency</u> for all RONs except those categorized as “No Need.” The ISA is a working document and shall be promptly updated throughout the investigation. Special attention must be made to complete all required areas of the form, particularly that the correct dates are entered into the appropriate corresponding fields and the determination of the case and types of abuse are identified.</p> <p>Only one ISA form shall be created, regardless of whether subsequent RONs are received while the case is active. If there is an active PS Care Enrollment, the new allegations shall be addressed within the same ISA (and care plan-see below).</p> <ul style="list-style-type: none"> ● Agency: County where the consumer resides ● Provider: Your AAA (Investigating Agency) ● Password: Leave blank (unless AP has access to A&D; refer to <i>A&D Documentation Procedural Manual</i> for instructions). <p><u>Use of Notes:</u></p> <ul style="list-style-type: none"> ● Copy Notes and Narratives: This box must be checked, otherwise information from the RON will not auto-populate in the ISA. ● Information documented in the Notes sections of each individual question is unable to be captured by reports, therefore it is imperative that check boxes are used. <p><u>Use of “Other” Response:</u></p> <ul style="list-style-type: none"> ● The selection of “Other” as a response is to be used <u>only</u> in rare instances when there is no appropriate choice provided.

Field Name	Instructions
	<ul style="list-style-type: none"> A note shall be added to each question where “Other” is a response. <p><i>(OAPS Manual Reference Chapter 6)</i></p>
Care Enrollment (CE)	<p>The consumer shall have, at minimum, the following two active care enrollments in their A&D record:</p> <p><u>Active Care Enrollment:</u></p> <p><u>1. Non-Caremanaged Care Enrollment</u></p> <ul style="list-style-type: none"> Automatically created with the date of registration or was manually created if consumer was reactivated. Shall have a start date on or before the date the Protective Services Care Enrollment was created. <p><u>2. Protective Services Care Enrollment</u></p> <ul style="list-style-type: none"> All active Protective Service consumers shall have a Protective Services Care Enrollment, with one of the following Care Programs, Status Codes, and Reason Codes: <ul style="list-style-type: none"> If consumer is 60+: Protective Services If consumer under 60: Adult Protective Services Act 70 Status: Active Reason: PS RON Received (see below for no-need reports) <p><i>(OAPS Manual Reference Chapter 2)</i></p> <p><u>Terminating Care Enrollments:</u> When <u>the Protective Services Care Enrollment</u> is terminated, the enrollment must be updated as follows:</p> <ul style="list-style-type: none"> Status: Terminated Termination Date: Shall be the date the case is being terminated. Identify reason for termination by using one of the following Reason Codes: <ul style="list-style-type: none"> If Unsubstantiated <ul style="list-style-type: none"> Invest-Unsubstantiated Invest-Incomplete/Death Invest-Incomplete/Unable to Locate Consumer If Substantiated <ul style="list-style-type: none"> Substantiated – Consumer Refused Services Substantiated – Deceased Substantiated – Services Complete Substantiated – No Services Needed If No-Need <ul style="list-style-type: none"> No Need for PS <p>The ONLY time a <u>Non-Caremanaged Care Enrollment</u> is terminated is when a consumer is not likely to be receiving active care managed services or congregate services and is receiving no other services.</p>

Field Name	Instructions
	<ul style="list-style-type: none"> The reason for terminating a Non-Caremanaged Care Enrollment is always: Services Complete <p><i>(OAPS Manual Reference Chapter 21)</i></p>
Care Plan: Status	<p>The Care Plan is an essential component to providing services to those consumers in need. It is one of the ways services to consumers are identified and measured.</p> <ul style="list-style-type: none"> Care Plans shall be entered immediately for OAPSA investigations. All journal entries shall be entered in the Care Plan Journal section of the Protective Services Care Plan to maintain confidentiality. <p><u>Active Care Plan:</u></p> <ul style="list-style-type: none"> Active Protective Services Care Plans shall include: <ul style="list-style-type: none"> Start Date: The date the RON was taken. Status: Active Reason: Current <p><i>(OAPS Manual Reference Chapter 7)</i></p> <p><u>Terminating Care Plan:</u></p> <ul style="list-style-type: none"> When the consumer's Care Enrollment and Care Plan are Terminated, the Care Plan shall have: <ul style="list-style-type: none"> Status: Inactive Reason: Select the appropriate reason from the list below: <ul style="list-style-type: none"> Consumer's death CP Complete Invest-Incomplete-Death Investigation Complete A termination journal entry shall be placed in the PS Care Plan Journal prior to terminating the Protective Services Care Plan and shall give a brief summary of the report, information gathered, the findings of the investigation, and indicate that the case has been terminated. Service Plans and Orders must be deactivated prior to terminating the care plan and case record. <p><i>(OAPS Manual Reference Chapter 20)</i></p>
Care Plan: Journals	<ul style="list-style-type: none"> All PS Journal Entries shall be entered in the PS Care Plan Journal. Every activity/contact shall be documented in a separate journal entry with the date and time of the event/activity. The date the event/activity actually occurred is recorded in the Entry Date field and the time the event/activity actually occurred is recorded in the Entry Time field.

Field Name	Instructions
	<ul style="list-style-type: none"> ○ These “Entry” fields are not used to record the date and time the note is being entered into A&D. ○ The journal entry should be signed and dated with the actual date that the journal entry was entered into A&D. ○ When the journal entry is saved, A&D automatically records the user ID, entry date, and entry time of the journal note in the Audit Trail. <p><i>(OAPS Manual Reference Chapter 8)</i></p>
Service Plan (Substantiated Cases Only)	<ul style="list-style-type: none"> ● A service plan shall be created when any PS related service has been ordered or provided to the consumer by a third-party provider. <ul style="list-style-type: none"> ○ Services provided by the AAA shall not be added to the service plan, unless the AAA is the third-party provider and the AAA is paying for the services (e.g., AAA PS unit authorizes payment for AAA’s meals on wheels program). ● RONS and ISAs shall NOT be added as a service to the service plan. ● Services needed as part of Protective Services shall not be entered into an any other care enrollment. ● A service plan shall be created before generating any service orders and service deliveries, unless the service was provided directly by the AAA. <p><i>(OAPS Manual Reference Chapter 12)</i></p> <p><u>Terminating Service Plan:</u> When the consumer’s Service Plan(s) are being terminated, the Service Plan(s) shall have the following:</p> <ul style="list-style-type: none"> ● End Date: Date investigation/all activities were completed or date which was determined services were no longer necessary. ● Status: Terminated ● Reason: Select appropriate reason ● Status Date: Date data is being entered into A&D <p><i>(OAPS Manual Reference Chapter 19)</i></p>
Service Orders (Substantiated Cases Only)	<ul style="list-style-type: none"> ● All services provided through the Protective Services Plan shall have a service order. ● Service orders shall not be generated for RONS and ISAs. <p><i>(OAPS Manual Reference Chapter 13)</i></p> <p><u>Terminating Service Order:</u> When the consumer’s Service Order(s) are terminated, the Service Order(s) shall have the following:</p> <ul style="list-style-type: none"> ● Status: Closed ● Reason: Select appropriate reason

Field Name	Instructions
	<ul style="list-style-type: none"> Status Date: Date data is being entered into A&D <p><i>(OAPS Manual Reference Chapter 19)</i></p>
Service Deliveries	<ul style="list-style-type: none"> Service Deliveries shall be created in A&D as soon as the service is provided, or the AAA is informed the service has been provided. A Service Delivery shall be created for services provided through the Protective Services program by either a third-party provider or the AAA. If the service was provided with the assistance of the AAA, a Service Delivery shall exist. Any service that the consumer consents to and receives shall have a coordinating Service Delivery. <p><i>(OAPS Manual Reference Chapter 14)</i></p> <p><u>Report of Need:</u> OAPSA (Optional)</p> <ul style="list-style-type: none"> If there are multiple Reports of Need in the same month, each Report of Need shall have its own topic and outcome within a single Service Delivery. If a subsequent RON(s) is/are received in a different month than the original RON, separate Service Deliveries will need to be created for each month. <p>APS: (Required)</p> <ul style="list-style-type: none"> APS RONs may have two Service Deliveries in a single month, depending on if they were taken during or after business hours. If there are multiple Reports of Need in the same month, each Report of Need shall have its own topic and outcome within a single Service Delivery. If a subsequent RON(s) is/are received in a different month than the original RON, separate Service Deliveries will need to be created for each month. <p><i>(OAPS Manual Reference Not Included)</i></p> <p><u>PS Investigation:</u> (Optional)</p> <ul style="list-style-type: none"> When completing a PS Investigation Service Delivery, one of the following Topics shall be used: <ul style="list-style-type: none"> Mandatory Abuse Report PS Voluntary Report <p><i>(OAPS Manual Reference Not Included)</i></p> <p><u>Protective Services Reassessment:</u> (Optional)</p> <ul style="list-style-type: none"> If reassessment(s) is/are completed within the same month as the investigation, the topic and outcome shall be recorded in the already existing ISA Service Delivery with a comment: Reassessment. If the reassessments(s) is/are in a different month than the

Field Name	Instructions
	<p>investigation, a new Service Delivery shall be created.</p> <ul style="list-style-type: none"> • When completing a PS Reassessment Service Delivery, one of the following Topics shall be used: <ul style="list-style-type: none"> ○ Mandatory Abuse Report ○ PS Voluntary Report <p><i>(OAPS Manual Reference Chapter 16)</i></p>
File Attachments	<ul style="list-style-type: none"> • File Attachments associated with “Older Adult Protective Services Information” are confidential and unavailable to those who do not have PS access roles in A&D. • All AAAs have access to the shared “OAPSA Case Documents” File Attachments folder. No action is needed to transfer documents when transferring an active investigation to another AAA. <p><i>(OAPS Manual Reference Chapter 10)</i></p>
Case Transfers	<p>It is recommended to review the OAPSA Manual for additional guidance when there are instances in which a PS case must be transferred due to:</p> <ul style="list-style-type: none"> • Agency receives a Report of Need for a consumer located in a different county. • A Consumer’s Protective Services Care Program has changed due to age or an error in the initially assigned investigative entity. <p><i>(OAPS Manual Reference Chapters 3 & 11)</i></p>