

COLORADO'S ADULT PROTECTIVE SERVICES SYSTEM by Kerry White

Colorado's Adult Protective Services (APS) system is charged with providing investigative and supportive services to older persons and adults with disabilities who are at risk for or are unable to protect themselves from harm. APS services are delivered by county agencies authorized under state law to receive and respond to such reports of abuse. As in many other states, Colorado's APS system continues to experience an increase in demand for services as citizens live longer and awareness of the problems facing this population grows. This issue brief describes Colorado's APS system, including the circumstances under which reports of suspected abuse are to be made and investigated, services provided, and APS-related penalties.

Colorado's Adult Protective Services System

Why do people need protection? According to the Colorado Department of Human Services (CDHS), fewer than one in six cases of mistreatment of at-risk adults are reported. APS clients typically lack the ability to meet their essential needs either due to self-neglect or because they are neglected, abused, or exploited by others. Abuse can include:

- physical abuse;
- emotional abuse (i.e. verbal attacks, threats, isolation, or rejection);
- sexual abuse;
- neglect or abandonment;
- self-neglect; and
- exploitation (theft, fraud, misuse or neglect of authority, and use of undue influence).

Administration. Colorado's current Protective Services for Adults at Risk of Mistreatment or Self-neglect System was enacted in 1991.¹ The law was enacted to protect vulnerable or at-risk adults who, because of age or mental or physical ability, are unable to obtain services or otherwise protect their own health, safety, and welfare. The law requires county departments of social services to investigate all reports of abuse and is administered by CDHS. Residents of licensed long-term care facilities are served through an ombudsman program, rather than through the APS system. For the most recent fiscal year FY 2011-12, total APS funding was \$8.5 million, split as 80 percent state funds, about \$6.8 million, and 20 percent local funds, about \$1.7 million (mostly paid for with county administration funds). Statewide, county staff average a caseload of 32.

Reporting and Investigations

Reporting. Colorado is one of four states (the others include New York, North Dakota, and South Dakota) that does not mandate reporting of known or suspected abuse of at-risk adults. Instead, Colorado law encourages members of certain professions to make reports and provides a telephone hotline for all citizens. All reports are confidential.

Investigations. Counties that receive more than ten referrals for APS services annually are required to establish an Adult Protection Multi-Disciplinary Team (APT), which includes local law enforcement, district

¹Part 1 of Article 3.1 of Title 26, C.R.S.

The Legislative Council is the research arm of the Colorado General Assembly. The Council provides non-partisan information services and staff support to the Colorado Legislature. attorneys, and other agencies. State law requires these parties to cooperate and exchange information. Whether or not an APT is formed, reports are evaluated and investigated by county staff according to a protocol established by the CDHS, which classifies responses as:

- no response needed;
- referral to another agency;
- urgent and requiring immediate follow up;
- requiring a response within 24 hours; or
- requiring a response within three days.

Outcomes. In FY 2011-12, 11,000 new reports were filed. Of this number, 4,733, or 43 percent, required an investigation. Of the reports that required an investigation, 95 percent required a response within three days. In addition, a total of 1,750 investigations were carried forward from the prior year. Over the past five fiscal years, cases requiring an investigation increased annually by an average of 2 percent. APS referral types are shown in Table 1.

Table 1 APS Referrals for FY 2011-12

Referral Type	Percentage of Total
Self-neglect	48 percent
Caregiver neglect	23 percent
Exploitation	21 percent
All other categories	8 percent

Source: Colorado Department of Human Services

Clients served. In FY 2011-12, clients were most often living within a private residence (89 percent), and over the age of 60 (72 percent). Men were slightly more likely to receive services than females. The following major risk factors were also observed:

- 28 percent were considered frail;
- 19 percent had dementia;
- 18 percent were medically fragile;
- 17 percent were disabled; and
- 11 percent had a mental illness; and
- 7 percent had other conditions.

Alleged abusers. In FY 2011-12, alleged abusers were most often family members (75 percent), with friends and neighbors accounting for 19 percent and service providers for 6 percent.

Services Provided

Colorado law allows capable adults to refuse to receive services. With client consent, county APS staff provide a range of services, which may include:

- case management and counseling;
- community referrals or coordination, delivery, and monitoring of supportive services;
- · emergency housing placements; and
- initiation of probate or guardianship.

APS-related Penalties

There are no penalties for failure to make a report and persons who make a report in good faith are immune from civil or criminal liability. Penalties related to the APS system include those for making a false report, releasing confidential information, and harming an at-risk adult, as shown in Table 2.

Table 2APS Penalties and Enhancements

Action	Penalty
Making a false report	Class 3 misdemeanor,
Section 26-3.1-102 (4),	punishable by up to 6 months
C.R.S.	in jail and/or a \$750 fine.
Releasing confidential information Section 26-3.1-102 (7)(c), C.R.S.	Class 2 petty offense, punishable by a fine of up to \$300.
Harming an at-risk	Colorado law requires
adult penalties vary by	enhanced punishments for
crime	crimes and requires the
Article 6.5 of Title 18 and	maximum prison sentence for
Section 18-1.3-406,	crimes of violence committed
C.R.S.	against at-risk adults.