Community Summit on Adult Protective Services and the Vulnerable Adult Act

Welcome!
First, a story
Purpose of this Community Summit

• To determine the core values important to Minnesotans impacted by adult protective services (APS).

• To identify instances where those values may be in conflict and how conflicting values should be weighed within the system.

• To identify outcomes the system should be focused on achieving when values are in conflict.
• How Vulnerable Adult Act is connected to today’s work
• Table introductions
• Overview of the Community Conversations
• Story-specific table discussions
• **BREAK – 10:15 AM**
• (Mostly) large group discussions
• Next steps
• Share your name,
• How you came to be here today, and
• One sentence reflecting on your Conversation experience or one of the stories you read in preparation for today’s Summit.
Redesign Process

1. Community Conversations
2. Community Stakeholder Summit
3. Institutional Stakeholder Summits
4. Solution Groups
5. World Café Review & Feedback
What is the Vulnerable Adult Act?

- Minnesota’s Vulnerable Adult Act (VAA) is law about reporting, investigation, and offering services to adults who are vulnerable to being abused, neglected or exploited. The VAA is to promote safety and dignity of all Minnesotans.

- The VAA guides how Minnesota’s Department of Health and Department of Human Services respond to maltreatment reports within investigation and licensing actions when providers are involved.

- The VAA also guides how Adult Protective Services, which are administered at the county and tribal level, respond to reports with investigation and offering services to vulnerable adults.

The focus of this effort is on county and tribal-based Adult Protective Services
Who is a vulnerable adult under this law?

• A person who receives services licensed by the Department of Health or the Department of Human Services (for example, group home, nursing home, or home care)

• A person who receives Personal Care Assistant (PCA) services

• A person who has a disability that impacts their ability to protect themselves from being abused, neglected, or exploited
What is “maltreatment” according to this law?

• Abuse – Physical, sexual, or emotional
• Neglect – By a caregiver or when a person neglects their own needs
• Financial Exploitation
What are Adult Protective Services?

Social services delivered by counties and tribes to promote safety, independence, and quality of life for people who are vulnerable, by:

- Responding to reduce immediate harm
- Assessing strengths and needs
- Investigating allegations of maltreatment
- Coordinating with law enforcement
- Helping empower people
- Supporting social connections
- Connecting people to services to reduce risk and prevent harm
- Intervening when necessary to protect the person
We invited interested community and service organizations to host community conversations centered around different stories involving adult protective services.

There were **seven stories** to choose from.

The conversations focused on what community members thought the characters would want to happen, what the characters might value, and whether the example Adult Protective Services (APS) response aligned with those values.

Hosts submitted their groups’ input via an online form. Most groups talked about more than one story.
There were a total of 59 different story conversations.

- Older adults
- People with disabilities, both cognitive and/or physical
- People with mental health conditions
- Family members of people with disabilities
- Family members of older adults
- Advocates for people with disabilities
- Caregivers for people with disabilities
- Direct support professionals for people with disabilities
- Caregivers of people with dementia
- Advocates for people with memory impairments
- Social service providers for older adults and/or people with disabilities
- Social workers
- Nursing students
- Group home managers
- Professional guardians
- Community members
You will help us...

• Review the Community Conversations input
• Identify the **most important values** that community members think should form the foundation for the Adult Protective Services system
• Define what those most important values really mean
• Wrestle with the tensions that are a real part of the Adult Protective Services system
If you have more to share today, use the form on your table.
There is a basket by the door where you can place it when you leave.

Community Stakeholder Summit
More Thoughts

*Let us know if there is anything else you want to share:*

Thank you!
Table Discussions

• **Step 1.** Read the story aloud as a group
• **Step 2.** Read the top 5 values for each character and discuss the questions
• **Step 3.** Write the top 3 most important values on your flip-chart paper
• **Step 4.** Read what the characters would want and the preferred APS outcome
• **Step 5.** Decide what your group thinks should be the APS response
• **Step 6.** Write the preferred APS response on your flip-chart paper

15-minute break at 10:15!
15-minute break!
(Mostly) Large group discussions (10:30 – 11:55)
Gut check: Most Important Values

Does the list of “most important” values we gathered from your table work sit well with you?
If it doesn’t, why not?
Assignments to define the most important values
Each small group is assigned one of the most important values.

Work together to decide how you would **define or explain what that value really means**, especially within the Adult Protective Services system.

What does it mean for someone, or for a system, to exemplify that value?

**Write your group’s notes on flip-chart paper!**
Several stories involved a mandated reporter (hospital staff for James, Dr. Yang for Wesley, and Kenney for Joyce).

• For tables that discussed those stories, what desired values do you feel are important to share with the whole group?

• Do those comments sit well with all of you?
Several stories featured possible maltreatment by a family member that had some type of caring responsibility for a vulnerable adult (David for James, Ronald for Althea, Shawna for Cedric, and Mya for Joyce).

• What about APS’s current approach in those situations conflicts with the values you identified as most important?
There can be tension between our desire to express care for our neighbors, friends, and relatives to keep them safe and those adults’ right to live as they wish (Evelyn and Jules, Wesley and Dr. Jang, Althea and Ronald, Joyce and Mya).

• How would you turn that tension into directions for how APS should proceed in those situations?
Discussion: Accountability

Sometimes professionals or care givers can misuse their position and take advantage of a vulnerable adult (like Megan and April; potentially Cedric and Shauna, or Mya and Joyce).

• What ideas emerged for how APS should tend to those people who may be accountable for maltreatment?
Next Steps
What happens next?

Community Conversations → Community Stakeholder Summit → Institutional Stakeholder Summits → Solution Groups → World Café Review & Feedback
• Updates on the process, including a summary of the Community Conversations and this Summit, will be posted to the VAA Redesign website: https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/adult-protection/vaa-redesign.jsp

• Updates will continue to be made to the website as additional steps of the process are completed

• You will receive an email inviting you to the World Café in April, where you’ll get to review and provide feedback on solutions that come from this process. Information about the World Café will also be put on the website!
Thank you!

Please use the “More Thoughts” form or email us at VAAReDesign.dhs@state.mn.us if you have any input that you didn’t get to share today.