Greetings! I hope the summer months brought you some rest and rejuvenation and the fall finds you well and eager to continue taking part in the work we do to support the well-being of adults, children, and families in Maryland. Though the seasons have changed, our commitment to this work remains the same. I want to thank everyone who contributed to the summer edition of this newsletter, which focused on engaging youth and empowering them to become the future leaders of tomorrow. In this fall edition, the spotlight is on Adult Services.

Though the Adult Services staff is small in comparison with the Child Welfare staff, the services they provide to vulnerable adults — including the elderly and disabled — and their caregivers is extensive and invaluable. I am excited to highlight Adult Services’ efforts to support family caregivers, improve quality of service, educate and train colleagues and professionals, protect vulnerable adults against exploitation, and provide clients with unique and meaningful life experiences.

I want to thank all Adult Services staff across Maryland for striving to meet the needs of vulnerable adults, and their families and caregivers. Your commitment is commendable. Also, thank you to those who contributed to this newsletter and for allowing us all the opportunity to better understand the work Adult Services does.

As always, I appreciate your continued commitment to meeting the needs of Maryland’s children, families, and adults.

Enjoy the fresh air of fall!

Carnitra White
Although Adult Services is mainly known as the service system focusing on the vulnerable adult at risk of abuse, neglect, self-neglect, and exploitation, did you know that much of our daily contact with the public comes from family caregivers?

Maryland has over 600,000 informal family caregivers and we are among the top 20 states in the number of family caregivers providing uncompensated care to spouses, children, siblings, parents, grandchildren, and grandparents. It is no surprise that so many of them turn to Adult Services when needing advice, direction, or support in providing this care. As the number of older adults living alone with self-care limitations increases, and the number of family members looking after these individuals while still working full-time jobs grows, we find ourselves responding more and more to the family caregiver who is at the “end of their rope.”

Local Adult Service programs, as well as the Office of Adult Services, receive calls, e-mails, and letters from stressed family caregivers wanting to know where to turn for medical care, mental health care, in-home aide services, respite care, financial assistance, transportation, home modifications, and so on for their family members with an array of disabilities. We provide assistance to navigate the complex network of service systems they need. Increasingly, we are also seen by our DHR colleagues and co-workers as the “go-to” place for this information and guidance, as more of us find ourselves in the role of caregivers within our own families.

Through our Respite Care program, we aim to provide family caregivers with periodic and temporary breaks from the demands and stresses of care giving, so they can continue providing care at home over the long term. The Office of Adult Services is also responsible for staffing the governor-appointed Maryland Caregivers Support Coordinating Council, which serves as the official voice of the family caregiver in Maryland and as an advocate for addressing their needs.

Our role as a supporter of the informal family caregiver is a key part of our mission. We recognize these family caregivers as crucial partners in our ability to serve the vulnerable adult population. Without support for the capacity to take care of their family members at home, the vulnerable adult maybe at risk of being placed in a more expensive and restrictive institutional setting.

For more information on resources and information for the unpaid family caregiver, the Office of Adult Services can be reached at (410) 767-7725.
The Office of Adult Services has been moving full steam ahead on a number of projects over the past few months. Our primary focus is to clarify our functions, improve our service delivery system, and give our local programs the tools they need to better serve their customers.

For the past two years, we have been engaged in the development of projects designed to meet the challenges of increasingly difficult cases and the growing demand for services. The catalyst for the development of these new projects was the 2009 Adult Services Summit, where we met with stakeholders from our partner agencies and the community to discuss the challenges of providing services to the vulnerable adult population. It was determined at the summit that we needed to focus on planning, partnership, collaboration, and innovation. It is said that necessity is the mother of invention and we needed to reinvent ourselves in order to meet the needs of the ever-increasing population of vulnerable adults.

First, we began with the Universal Adult Services Risk Screening Tool, a unique tool designed by adult services staff and piloted across the state. The tool went “live” in February 2011, and provides local adult service programs with the ability to determine which referrals can make the best use of our array of services and which are not appropriate for our programs. With the assistance of Dr. Rodger Friedman and the University of Maryland School of Social Work, we have developed the Adult Services policy and practice Initiative which, when implemented, will give our case managers new tools to help them prioritize and analyze caseloads, develop and utilize family and community resources, and address the issue of secondary trauma for our workers.

In the spring, we sent out a Multi-D team survey to our local departments to determine which jurisdictions were participating in interdisciplinary teams. Any jurisdiction that is not involved in a Multi-D team or would like to beef up existing teams will receive technical assistance from the Office of Adult Services. All of these projects are assisting us in achieving our goal of having Maryland recognized as outstanding in the field of Adult Services with an eye toward sharing in the potential funding of the Elder Justice Act.

In addition to these initiatives, we have continued to do our day-to-day program activities. The Maryland Legislature has given us the task of conducting a summer study of recently proposed adult guardianship legislation. Working with a group of stakeholders, we are looking at changes to the current bill under study and also discussing related adult guardianship issues affecting our customers. We developed a MOU between the Social Services Administration and the Developmental Disabilities Administration to continue work on an interagency activities and protocols manual and to develop joint staff trainings between our two agencies.

We’re not done yet. We hope to continually improve the quality of our service while creating a good working environment for our staff. We will keep you posted on our progress.
In the July edition of this newsletter, Gary Anderson offered an introduction to the new Adult Services Practice Model. Here he provides further information regarding specific aspects of the new model, as well as training, leadership, and the implementation plan for the model.

**New Adult Services Model**

The new Adult Services model emphasizes a family centered/systems centered approach to case management rather than the more traditional client centered perspective. The case manager enters into a partnership with the client and constructs a picture of all current and potential supports, nearby or not, that could play a role in assisting the client with needs and goals. Under the new model, assessment will ultimately lead to a “Caseload Priority Analysis” of the client and his or her system. One important question that needs to be asked is, “given the total assessment, who are the people who can best serve this client?” In addition to considering the system variables, the case manager also needs to carefully factor in the client’s level of risk and the outcomes the client needs to achieve.

No longer will assessed cases be opened “automatically” for ongoing services at local departments. As a result of the Caseload Priority Analysis, case managers will “sort” their assessed clients into the following dispositional categories:

- Close immediately.
- Transfer to another service, and then close.
- Open, with case manager finding additional supports to reduce the client’s dependency. In these cases, the client is too isolated from any other supports.
- Open, with case manager providing intense direct services because the client requires them for the foreseeable future.
- Consult with supervisor and peers because the best direction for the client is not clear.

**Trainings for the New Model**

As local departments begin the new model transition process, each of its Adult Services staff members will attend a pivotal three-day training series developed by clinical psychologist Roger Friedman, Ph.D. The first session focuses on “Caseload Priority Analysis.” It explains how the new model will reduce client dependence, un-stick caseload log jams, and reduce worker burn-out. The second session focuses on “Family and Community Oriented Casework in Adult Services.” It expands the definition of case management and describes the importance of dynamic interventions with clients and their families. The third session focuses on “Traumatic Stress in Adult Services.” This staff-focused session addresses secondary trauma and how an Adult Services team can build a “recovery environment” in its unit.

**Leadership: a Key to New Model’s Success**

Accomplishing the sweeping changes required to implement the new Adult Services model requires every Adult Services staff member, both central and local, to bring their leadership skills to the table and to work on increasing their leadership capacity. The essential leadership components required for this shift include the importance of having a clear vision of how the model works and then applying that vision to each unique
role. Staff will need flexibility to take an active part in the cultural and behavioral modifications. Staff suggestions regarding innovations to the new model or ways to improve implementation will be welcomed and considered. Staff will identify ways to embrace the changes that they are facing. Demonstrating leadership skills such as these will inspire others who are going through the process.

**Leadership from Central**

Staff will demonstrate these leadership components in different ways, depending on the tasks that are associated with a specific part of the Adult Services organization. For example, the Office of Adult Services tasks include orchestrating the implementation plan; developing Adult Services policies that support the new model; creating training manuals; laying out blueprints for forms, procedures, staff behaviors and other steps of change; inventing new case record requirements; establishing Caseload Priority Analysis tools; and providing technical assistance and oversight. The Office of Adult Services will coordinate its activities with the Implementation Advisory Group. As the new model becomes operational in local departments, the Office of Adult Services will also collect and share local jurisdiction innovations and lessons learned. In addition, with the assistance of the University of Maryland School of Social Work, the Office of Adult Services will design evaluation mechanisms to measure the impact of the new model.

**Leadership from Local Departments**

Local department of social services administration will use leadership skills to roll out a variety of new model requirements. These include laying out local department implementation timelines, creating a change team, and engaging staff in team-building activities. In addition, local department administrations will market the new model to the community and seek alternative community sources of services for adult clients.

Local department Adult Service units will also use leadership strategies to accomplish a variety of new model tasks. For example, supervisors will need to modify their supervisory style to fit the staff expectations required by the new model. In addition, supervisors need to develop new community interface mechanisms, such as establishing a multi-disciplinary team that reviews cases and helps determine case dispositions. Case managers and in-home aides need to embrace required behavioral changes that are essential for new practice protocols. Adult Services staff also need to foster excellent relationships with actual and potential alternative sources of service for adults.

**Implementation Plans**

The Office of Adult Services implementation plan calls for a three year phase-in of the new model. In each of the three years, approximately six to nine jurisdictions will make the transition. The Office of Adult Services will provide technical assistance with the first year jurisdictions and these jurisdictions will also share best practice experience with each other. Piloting the Caseload Priority Analysis provides stakeholders the opportunity to refine and make modifications as necessary before full implementation statewide. The second and third year jurisdictions will have the benefit of technical assistance, as well as shared experience from those jurisdictions already on board. We are tentatively looking at developing an application process for participation in the pilot. This would give leadership in each local department the opportunity to assess and submit its readiness to begin the transition process, either immediately or in stage two or three.

This promises to be a stimulating journey for everyone associated with the transition to a new Adult Services practice model. In the long run, the benefits of the new model for clients and staff will make the journey well worth the effort.
There is no end to the talents we in Adult Services possess. Many of our staff members share their knowledge and experience with our partners and with the community through presentations and trainings. Here are just a few examples of some of the opportunities we have taken to share facts and information with others.

Valarie Colmore of the Office of Adult Services served as a co-trainer along with retired Adult Protective Services Program Manager, Baltimore City DSS, Richard Benjes, in recent two-day training for new staff in Adult Protective Services. She has also presented at several statewide annual conferences: Maryland National Association of Social Workers, Aging in Worcester County, and Adult and Evaluation Review Services. In addition to statewide trainings, she also has worked with Home and Community Based Medicaid Waiver for Older Adults, Provider Training, Alzheimer’s Association of Greater Maryland Chapter, Hotline Volunteer Staff and United Way of Central Maryland 211 Hotline Staff.

Glynda Walker, Adult Services Resource Bureau Chief in Prince George County DSS has developed a fascinating and informative presentation on the dynamics of Elder Abuse and Community Collaborations. Glynda was trained in Elder Abuse by the U.S. Department of Homeland Security in 2010 along with Prince George’s County Elder Abuse taskforce members. Recently, Glynda presented at the Aging in Worcester County conference, where she stressed that one agency cannot combat abuse, neglect and financial exploitation alone, but the community must work together. Other agencies that must be involved include the postal service, Department of Environmental Resources, Police, Sheriff’s Department, Domestic Violence groups, State’s Attorney’s Office, nonprofit organizations and the list goes on. Her presentation emphasizes that elder and vulnerable adult abuse is not just an Adult Protective Services problem. To combat these horrible injustices and crimes the entire community

Mario Wawrzusin, Adult Services Administrator, APS, Assessment and Case Management Services of Montgomery County Department of Health and Human Services has developed a presentation about the importance of working with Multi-D Teams including how to develop a functioning team, what partners should be recruited for the team and benefits to our local agencies. Pictured here is an inter-county Montgomery Elder/Vulnerable Adult Abuse Task Force meeting. Included in the taskforce are Montgomery County, Prince George County and Frederick County.
must work as a team, because together we can achieve more and that achievement begins with educating the community.

**Kathleen Ward** of the Office of Adult Services, and a Project Home Consulting RNs, **Saundra Brown-Asante**, from Montgomery County are presenting two workshops on the Self Administration of Medication. Based on the Project Home Model of teaching self-Administration of Medication to their residents, Kathleen and Saundra teach that self-medication increases independence and safety with clients of all ages. One of the upcoming workshops will focus on working with older persons and will be presented at the Conference on Aging to be held at Anne Arundel Community College on October 14th. The other workshop focused on persons on all ages with disabilities and was presented at the Respite Awareness Day Conference to be held October 24 at the Maritime Institute.

**Tom Curtin**, Adult Protective Services Program Manager in Baltimore City delivered a workshop presentation on *The Spiritual Language of Change and Social Work Practice* at two national conferences:
- November 2010: the National Adult Protective Service Association, and
- June 2011: The North American Conference on Spirituality and Social Work

**Aimee Bollinger**, Administrator in Adult Services at the Baltimore County DSS is a presenter at the Adult Service Pre-Service Training for new staff. Aimee’s topics include Assessment, Case Planning and Documentation. She reviews the elements of case management, the knowledge base, skills and tools we use for assessment, the elements of an assessment document and more. Aimee addresses clinical, legal and policy issues and even discusses the importance of grammar and writing skills in keeping good records. Aimee’s presentations are always well received.

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**Adult Service Pre-Service Training – Important and Informative**

*By Richard Benjes, LCSW-C*

Former APS Program Manager Baltimore City DSS, Current Pre-Service Trainer

For the past four years, the Social Services Administration, in partnership with the University of Maryland School of Social Work, has required all new local DSS Adult Services staff to attend seven days of pre-service training. This training package is presented twice yearly. Each session takes place over a three week period, allowing participants to be at their workstation some days and at training at the School of Social Work during others. So far a total of 154 individuals have been trained.

The training accents the basics of information and tools that case managers, supervisors and administrators need in order to clearly understand the purpose of all of Adult Services programs and how our programs and services interact with our partner agencies. Guests from the Developmental Disabilities Services, the Maryland Department of Aging, and mental health agencies are invited to give presentations that highlight our interrelated goals and our cooperative efforts to work with each other. All of our presenters provide an overview of specific program services and resources, social work methodology, and elements of day-to-day Adult Services practice.

There is constant DHR supervision of the training process and updating of the teaching material between sessions. The response has been overwhelming positive from participants, and the supervisory and administrative staff of the local departments of social service.
Charles County Adult Services: In-Home Aides are Guardian Angels  
By Delia Meadows, Supervisor Charles County

The In-Home Aides Services (IHAS) program helps to maintain individuals in their own homes, provides respite, and gives assistance to family members who are elderly and frail. In-Home Aides are the first line of defense for the Adult Services Case Managers. The aides are “guardian angels” who have their eyes on customers weekly. They are the first to note when a customer is showing improvement or a decline, and they alert the case managers to any changes.

Ms. DeNeane Chase, who has been an In-Home Aide since 1995, shares that “Aides go into the community to assist customers, not to take away their independence or limit their self-sufficiency.” Ms. Chase states that part of her job is to ensure that any customer who is able to do for herself/himself is given the opportunity to do so. Aides coach and prompt customers to do as much as possible rather than relying strictly on the aide. “Don’t say you can’t; try first,” is Ms. Chase’s philosophy.

Ms. Allison Carroll, who has been an In-Home Aide since 1993, says, “we have two ears, two eyes and one mouth. I therefore observe and listen and then develop the most effective approach in working with people.” Ms. Carroll has worked with family members who were once caretakers and now themselves are receiving IHAS services. Ms. Carroll’s favorite saying is, “people are not our problem; they are our purpose.”

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Beware of Home Improvement Repair Scams in working with Elderly and Disabled Clients  
By Valarie Colmore, Social Services Administration

Maryland’s vulnerable elderly and disabled adult citizens have experienced considerable damage to their homes and property as a result of the recent earthquake in late August and Hurricane Irene and Tropical Storm Lee in early September. It is estimated that states bordering the Eastern Seaboard will assume up to seven billion dollars in repair costs from damages caused to homes and businesses by these natural occurrences. With this in mind, our clients may fall victim to home improvement repair scams by con artists that prey on vulnerable elderly and disabled individuals. Con artists are known to survey neighborhoods after such natural disasters looking for homes that appear to be in need of repair due to weather-related damage. These individuals look for residential homes that have carpeted steps, handicap-accessible ramps, late-model vehicles parked in driveways, or that display the American
flag. These are often tell-tale signs that an elderly or disabled person resides in that home, with or without a spouse or a dependent caregiver.

For these reasons, we implore Adult Services staff to be vigilant advocates for our vulnerable elderly and disabled clients when conducting investigations, providing personal care and chore services, and completing a six-month reconsideration visit. A client may express to the worker that they have concerns about repairs being done, may lack the financial resources to pay for such repairs, or possibly mention that a man stopped by the house to drop-off a flyer and talk with them about doing the repair work for a very low cost. If this information is shared, workers should be suspicious! According to the Maryland Attorney General’s Consumer Protection Division, individuals should be dealing with a licensed contractor that is recommended to them from a trusted friend, neighbor, or reputable agency. It is important to share this information with our client and the client’s spouse or caregiver that they should first check out the contractor’s professional credentials before considering any such work to be performed on their homes.

If such home improvement repair work has already been completed or a client is expressing concern about being pressured to pay the contractor’s stated high repair bill amount, refer the situation to the Adult Protection Services Unit for an investigation. Adult Protective Services staff at the local department of social services level will investigate the allegations of exploitation and refer the case to a local law enforcement agency, if criminal intent is indicated. In addition to reporting this incident to Adult Protective Services Unit, workers can encourage the client and his/her spouse or caregiver to also contact the Maryland Office of the Attorney General’s Consumer Protection Division. The Consumer Protection Division offers the following warning signs to vulnerable seniors, disabled adults, and caregivers to help them avoid being the victim of a home improvement/repair scam:

- Beware of roving con artists
- Deal only with licensed contractors
- Don’t pay for unnecessary repairs
- Insist on a complete written contract
- Know your right to cancel
- Don’t pay more than one-third of the total contract price in advance
- Be cautious of home repair/improvement financing offers

To access additional information about other consumer protection tips, go to the Maryland Office of the Attorney General’s website at www.oag.state.md.us/consumer.
Talbot County Touches Clients with Unique Card Exchange

By Debbe Fairbank, Supervisor Talbot County DSS

Ms. G is a Talbot County Department of Social Services, Social Services to Adults (SSTA) client who has extensive medical needs. Her medical needs restrict her ability to leave the home, which inhibits her ability to socialize. For quite some time she has been participating in a greeting card ministry through her church. Funds within the church have been exhausted and she is no longer provided with the resources to complete that activity. This activity has been providing her with great pleasure.

Ms. G was presented with the idea of switching her consumer focus to other SSTA and Adult Protective Services (APS) clients as opposed to church members. She has agreed to do that. As a result, Talbot County Department of Social Services has put a plan into place to provide birthday, holiday, and cards of encouragements to all SSTA and APS clients who provide permission. In exchange, the department will provide Ms. G with the cards to address and include kind messages.

Bachelor level social work students will be utilized to call SSTA/APS clients to obtain their permission to participate in the program. Ms. G will be provided with a list of clients’ first names, dates of birth and gender. The department will make arrangements for mailing labels and the distribution of the cards. Thanks to Ms. G’s donation of time and talent and the assistance from DSS, Talbot County’s Adult Service clients will be receiving greetings and a message of support.

Harford County Project Home Alum Is Celebrated

By Maggie Hurtt, Harford County Adult Services

Harford County DSS considers Tom Rigdon an invaluable asset to their agency for the past 25 years. Mr. Rigdon was a Project Home resident for over 20 years and successfully moved to independence, but never gave up his part-time position at the local agency. Recently, Harford County asked its staff if they ever wonder how top secret and confidential information is disposed of at their agency. The answer: Mr. Rigdon is the one who diligently collects and shreds the confidential paperwork in those blue bins. He is a dependable, responsible, hardworking, and good-natured person. He takes pride in his work and he is an important part of the DSS family. Congratulations to Tom for 25 years of great service!
Senior Prom: Dreams Still Do Come True
By Cathy Woodward, Worcester County Adult Services Supervisor

Four Salisbury University students pursuing their Masters in Social Work degree partnered with Worcester County Maryland Access Point (MAP) Office to sponsor a Dream Again “Senior” Prom for the elderly and physically challenged population. The project consisted of a fundraiser and community event.

The Worcester County MAP Office (consisting of Office of Aging, Worcester Social Services, and Worcester Health Department) provides financial assistance to help meet the needs of the elderly and vulnerable adults in Worcester County. The proceeds from the sale of raffle tickets benefited Worcester County MAP Gold community activities. The event was held at the Northern Worcester County Senior Center in Berlin.

Participants included representatives from Worcester, Wicomico, and Somerset Counties Adult Services. Oldies but goodies music was rendered by DJ Billy Dickerson as the attendees danced the day away! The Grand March allowed the participants to flaunt their semi-formal to formal attire.

The judges had a difficult time deciding who to select as the King and Queen. Mr. Alfred Fields, Jr., and Ms. Catherine Brown, both of Crisfield, were declared the honorees of the day. The day was filled with smiles, joy and laughter. There was a light-fare lunch provided as a result of generous donations from Subway, McDonalds, Sysco, Wal-Mart, and a private sponsor, Maurice Ames. Also, Lowes Home Improvement supplied many pansy plants which served as beautiful centerpieces and door prizes. For some people, this spectacular event served as a remembrance of former years and for others it was a first opportunity. Wow, dreams still do come true!
Now is a great time to **FALL** into training!

The MD CHESSIE training team takes their show on the road. Please let us know if you would like us to come and visit your local and provide training on MD CHESSIE. We have also recently added the very popular Health/Education, Case Plans, Staff Management, Mother/Baby, and GAP modules. The MD CHESSIE training calendar has been updated to reflect training classes through January 2012. Learning a new area of MD CHESSIE or getting a refresher course is the perfect way to start something new with the change in seasons. So, FALL into learning that is conveniently offered face-to-face or via WebEx. Register online or for more information please contact:

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Join the Conversation …

SSA is partnering with a consultant to develop a state-wide child welfare communication plan. There are several upcoming opportunities in the form of focus groups, surveys, and interviews to provide you input and opinions. There are more details and information forthcoming. Your voice is important, so don’t miss the opportunity to be a part of the conversation!