

# APS Case Documentation: Skill Building

INSTRUCTOR LED TRAINING (Blended with eLearning)

PARTICIPANT MANUAL



The Academy for Professional Excellence is a project of the San Diego State University School of Social Work

## Funding Sources



**This training was developed by the Academy for Professional Excellence, with funding from the California Department of Social Services, Adult Programs Division.**

**Curriculum Developer (Revisions), 2025**

**Amy Waszak, LMFT**

With additional expertise provided by:

Workforce Development Specialist Brenda Wilson-Codispoti, LCSW

Previous Curriculum Developers

Susan Castaño, LCSW (original)

Krista Brown, 2015

Dawn Gibbons-McWayne, APSWI Program Manager, 2016

Kat Preston-Wager, Curriculum Development Specialist, 2019

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## Introduction

We are pleased to welcome you to **APS Case Documentation: Skill Building Instructor-Led Training (blended with eLearning) Participant Manual**, developed by Adult Protective Services Workforce Innovations (APSWI), a program of the Academy for Professional Excellence under a grant from the California Department of Social Services, Adult Programs Division.

The Academy for Professional Excellence, a project of San Diego State University School of Social Work, was established in 1996 with the goal of revolutionizing the way people work to ensure the world is a healthier place. Our services integrate culturally responsive and recovery-oriented practices into our daily work to promote healing and healthy relationships. Providing around 70,000 learning experiences to health and human service professionals annually, the Academy provides a variety of workforce development solutions in Southern California and beyond. With five programs, three divisions and over 100 staff, the Academy's mission is to provide exceptional learning and development experiences for the transformation of individuals, organizations and communities.

APSWI is a program of the Academy for Professional Excellence. APSWI is designed to provide competency-based, multidisciplinary training to Adult Protective Services professionals and their partners. APSWI's overarching goal is the professionalization of Adult Protective Services professionals to ensure that abused and vulnerable older adults and adults with disabilities receive high quality, effective interventions and services.

APSWI partners with state and national organizations and experts in the older adult and adults with disabilities professions to empower APS professionals and those they serve to live safely, peacefully and in a world that is free from abuse and neglect.

APSWI's partners include:

- National Adult Protective Services Association (NAPSA) Education Committee and the National Adult Protective Services Training Center (NATC)
- California Department of Social Services (CDSS), Adult Programs Division
- County Welfare Directors Association of California (CWDA), Protective Services Operations Committee (PSOC)
- California's Curriculum Advisory Committee (CAC) Partner Organizations

## Partner Organizations

**Dawn Gibbons-McWayne, Program Director, APSWI**

Academy for Professional Excellence

<https://theacademy.sdsu.edu/programs/apswi/>

**Kat Preston-Wager, Workforce Development Supervisor, APSWI**

Academy for Professional Excellence

<https://theacademy.sdsu.edu/programs/apswi/>

**Jennifer Spoeri, Executive Director, National Adult Protective Services Association (NAPSA)**

<https://www.napsa-now.org/>

**Paul Needham, Chair, NAPSA Education Committee**

<https://www.napsa-now.org/>

**James Treggiari, Adult Protective Services Liaison, Adult Protective Services Division**

California Department of Public Social Services

<https://www.cdss.ca.gov/adult-protective-services>

**Jason Kemp Van Ee and Emily Nicholl, Co-Chairs, Protective Services Operations Committee of the County Welfare Director's Association (PSOC)**

<https://www.cwda.org/about-cwda>

## Acknowledgements

This training is the result of a collaborative effort between Adult Protective Services administrators, supervisors, staff development officers and workers across the state and the nation; professional educators; and the Academy for Professional Excellence staff members. APSWI would like to thank the following individuals and agencies:

### **Agencies**

California Department of Social Services, Adult Programs Division  
National Adult Protective Services Association

### **Committees:**

California's Curriculum Advisory Committee  
Southern California's Training Planning Committee  
National Adult Protective Services Association (NAPSA) Education & Development Committee

### **Curriculum Developer (2025 Revisions)**

Amy Waszak, LMFT  
Additional expertise provided by:  
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## Executive Summary

**Course Title:** APS Case Documentation and Report Writing Skill-Building (blended with eLearning)

**Course Description:** Effective documentation is pivotal to APS work and ensuring clients are served with program and agency protocols in mind. In this engaging introductory training, participants will build upon crucial documentation elements gained from the pre-requisite eLearning. This course expands on the concepts of accurate and completion documentation that is objective, purposeful and person-centered. Participants will be provided opportunities to practice writing narratives, challenge subjective documentation and identify case record requirements.

### Instructor Led Training

This course is a blended Instructor Led Training, designed to be facilitated virtually or in-person, after participants have completed the foundational eLearning.

### Course Requirements

Participants will need to complete APSWI's [APS Case Documentation and Report Writing eLearning](#) before attending this workshop. This course can also be completed after completing the [National Adult Protective Services Training Center's](#) (NATC) Case Documentation eLearning.

### Intended Audience

This training is intended for new and experienced line staff who interview clients and collaterals, provide risk assessments and develop service plans. Staff from other disciplines (IHSS, Ombudsman, etc.) may also find it helpful.

### Learning Objectives:

Upon completion of this training, participants will be able to:

- Summarize documentation standards of practice
- Determine the differences between subjective and objective documentation
- Construct narratives that are clear, concise and purposeful
- Identify case record requirements

## Course Outline

CONTENT	MATERIALS	TIME
<b>WELCOME, INTRODUCTIONS, COURSE OVERVIEW</b>	<b>PPT slides 1-7</b>	<b>Total: 20 minutes</b>
Land Acknowledgment and Housekeeping		
Trainer/s introduction		
Activity: The Three F's ( <i>Large group</i> )		10 minutes
Learning Objectives and Course Overview		
<b>CASE DOCUMENTATION: WHAT WE KNOW</b>	<b>PPT slides 8-9</b>	<b>Total: 20 minutes</b>
Review of eLearning Content		
Activity: Key Concepts Self-Assessment ( <i>Individual</i> )	Polling ability	10 minutes
<b>ACCURATE &amp; COMPLETE DOCUMENTATION</b>	<b>PPT slides 10-14</b>	<b>Total: 40 minutes</b>
Key Elements for Accurate Documentation: <ul style="list-style-type: none"> <li>• Indicators of Abuse,</li> <li>• Screening Decision-Making Ability,</li> <li>• Risk Assessment</li> </ul>		



CONTENT	MATERIALS	TIME
Activity: Identifying All Actions Taken ( <i>Individual, Large Group</i> )	Handout: Noah Jackson & Answer Key	15-20 minutes
<b>OBJECTIVE, CLEAR, CONCISE, &amp; PURPOSEFUL</b>	<b>PPT slides 15-19</b>	<b>Total: 60 minutes</b>
Activity: Rat Feces ( <i>Individual and Large Groups</i> )	Handout: Rat Feces & Answer Key	15 minutes
Activity: Is it Subjective or Objective? ( <i>Individual</i> )	Video Clip, Polling Ability & Answer Key	10-15 minutes
Clear, Concise, & Purposeful Guidelines		
Activity: Writing Case Narratives ( <i>Small groups</i> )	Case Narrative Sample	20-25 minutes
<b>PERSON-CENTERED</b>	<b>PPT slides 20-23</b>	<b>25 minutes</b>
Activity: Benefits of Person-Centered Practices ( <i>Individual/Large Group</i> )		5-7 minutes
Person-centered specifics <ul style="list-style-type: none"> <li>Documenting During Client Interactions</li> </ul>		
<b>CASE RECORDS</b>	<b>PPT slides 24-26</b>	<b>25 minutes</b>
Documentation Requirements	Case records program specific requirements	
Timely Documentation		2- 3 minutes

<b>CONTENT</b>	<b>MATERIALS</b>	<b>TIME</b>
Activity: Ways to Document ( <i>Individual</i> )		
Activity: Case Record Scavenger Hunt ( <i>Small groups</i> )	Handout: Case Record Case Scenarios & Answer Key	15-20 minutes
<b>WRAP UP</b>	<b>PPT slides 27-29</b>	<b>20 minutes</b>
Key Concepts		
Activity: PIE ( <i>Individual</i> )		
Evaluations		
<b>TOTAL TIME (excluding breaks)</b>		<b>3.5 hours</b>





**APSWI**  
Adult Protective Services  
Workforce Innovations

## APS Case Documentation & Report Writing

Instructor Led Skill-Building Training (blended with eLearning)


We create experiences that transform the heart, mind, and practice.



### About the Academy & APSWI







The Academy is a project of San Diego State's School of Social Work. Serving over 20,000 health and human services professionals annually, the Academy's mission is to provide exceptional workforce development and learning experiences for the transformation of individuals, organizations and communities.

APSWI, or Adult Protective Services Workforce Innovations, is a training program of the Academy that provides innovative workforce development to APS professionals and their partners.





San Diego State University

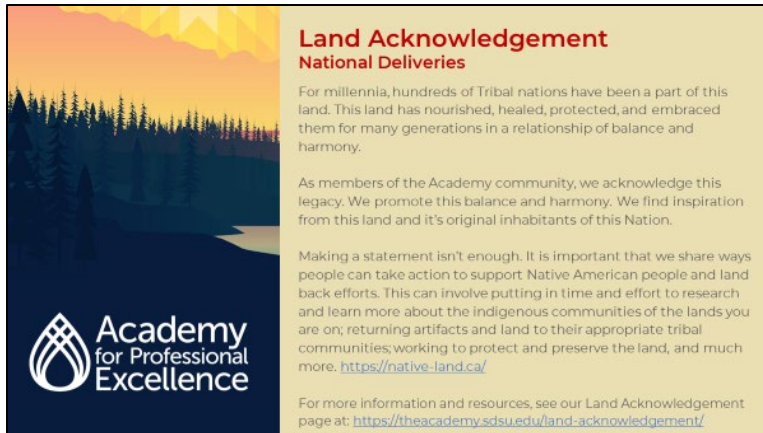
#### ACADEMY PROGRAMS



### Purpose of Land Acknowledgement



The purpose of a land acknowledgement is to recognize the relationship of Indigenous peoples to the land. It is multi-faceted in its meaning. It shows respect to the people of the land, to the land itself and to their relationship to one another. They are statements that recognize the dispossession from the land, the harm brought by colonial practices, beliefs and policies. They validate and recognize the continued presence of Indigenous peoples everywhere. Lastly, when offered in earnest and with sincerity, they are the first steps in reconciliation and healing.



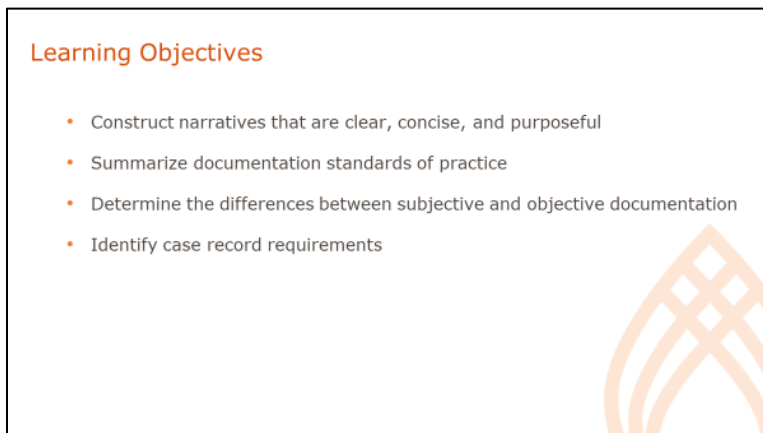

**Land Acknowledgement  
National Deliveries**

For millennia, hundreds of Tribal nations have been a part of this land. This land has nourished, healed, protected, and embraced them for many generations in a relationship of balance and harmony.

As members of the Academy community, we acknowledge this legacy. We promote this balance and harmony. We find inspiration from this land and its original inhabitants of this Nation.


Making a statement isn't enough. It is important that we share ways people can take action to support Native American people and land back efforts. This can involve putting in time and effort to research and learn more about the indigenous communities of the lands you are on; returning artifacts and land to their appropriate tribal communities; working to protect and preserve the land, and much more. <https://native-land.ca/>





For more information and resources, see our Land Acknowledgement page at: <https://theacademy.sdsu.edu/land-acknowledgement/>



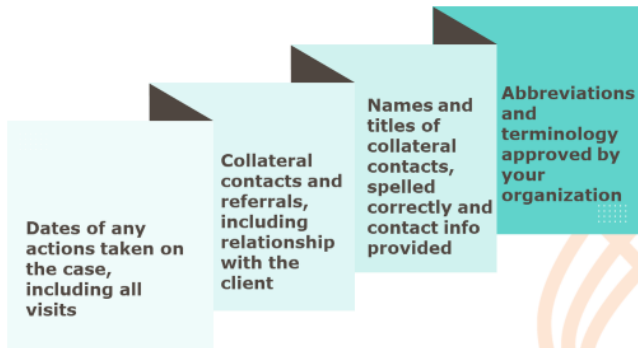
**Learning Objectives**

- Construct narratives that are clear, concise, and purposeful
- Summarize documentation standards of practice
- Determine the differences between subjective and objective documentation
- Identify case record requirements



<p><b>Introductions and Connection</b></p> <div> <div> <p><b>SHARE</b></p>  <p>Your name, county/unit, and how long you've worked in APS</p> </div> <div> <p><b>SHARE ONE OF THE FOLLOWING:</b></p> <div>  <p><b>Favorite</b> part about documentation</p> </div> <div>  <p><b>Frustration</b> with documentation</p> </div> <div>  <p><b>Fear</b> with documentation</p> </div> </div> </div>	
<p><b>eLearning Review</b></p> <p>The Purpose of Documentation:</p> <ul style="list-style-type: none"> <li>Case history, Legal involvement, Accountability, Professionalism, Consistency, &amp; Staffing/Funding</li> </ul> <p>Objective vs Subjective:</p> <ul style="list-style-type: none"> <li>Facts vs. Perceptions</li> </ul> <p>Person-Centered:</p> <ul style="list-style-type: none"> <li>Strengths, self-determination, experiences</li> </ul> <p>Confidentiality:</p> <ul style="list-style-type: none"> <li>Guidelines, sharing and receiving</li> </ul>	
<div> <div> <p><b>Self-Assessment</b></p> </div> <div> <p><b>Key Concepts Questions</b></p> <ul style="list-style-type: none"> <li>Which of these concepts is a purpose of documentation?</li> <li>Which of these statements is objective?</li> <li>What APS value is emphasized in this piece of person-centered documentation?</li> <li>Per APS confidentiality regulations, which entities are typically given access to APS records?</li> </ul> </div> </div>	

### Key Elements for Accurate Documentation



### Documenting Indicators of Abuse, and Connecting to Findings

What are some significant indicators of abuse?

- Physical Indicators
- Behavioral Indicators
- Environmental Indicators
- Financial Indicators

### Screening for Decision-Making Ability

- Foundational to APS work
  - Important for safety, self-advocacy, resisting fraud, and self-determination
  - Document decision-making ability in relation to choices and paths
- Decision-Making screening elements to document:
  - Alertness, Orientation, Appreciation, Explanation
  - Approved assessment tool or template
  - Client's expressed goals, wishes, concerns
  - Collateral information

### Documenting Risk Assessment

### Let's Practice!

**Review the case scenario in Handout: Noah J. Case Scenario**

**Identify what needs to be documented in terms of indicators of abuse, screening for decision-making ability, risk assessment**

**Report out key areas identified**

## **Handout: NOAH J. CASE SCENARIO**

You are an APS professional who visits the home of Noah J., an 84-year-old man who lives alone. When asked, Noah identifies his gender as male and he describes himself as heterosexual and widowed. He describes his race/ethnicity as African American and Native American.

Your visit occurred on (fill in the date) and the length of the visit was 1 hour, 15 minutes.

The case was referred to APS due to allegations of neglect and difficulty in caring for self, commonly referred to as self-neglect. The client's caregiver is the alleged perpetrator for neglect.

Noah's 34-year-old nephew, Jordan, is his caregiver and comes over four times per week to help with household chores, food prep, and to help Noah bathe. Jordan is paid for caregiving services through In-Home Supportive Services (IHSS). Noah also gives Jordan his debit card so that Jordan can purchase groceries for Noah. As you're interviewing him, Jordan arrives, and Noah immediately stops talking and appears fearful.

As Jordan begins putting away groceries, Noah changes the subject and begins discussing his medical conditions, as though you are medical professional. As you're talking with Noah, you notice his hygiene is very poor, as evidenced by dirt and grime caked on the skin of his neck and underneath his fingernails. You also notice his clothing appears unwashed, with what appears to be several days' worth of food stains and layers of grime, as though he's been wearing the same clothes for days.

Noah asks Jordan to go pick up his medications at the pharmacy. While Jordan is gone, Noah explains he has been out of his medications for several weeks, stating "he won't get them for me." He also stated in a loud whisper "he's using my debit card to pay for video games!"

You notice that Noah's ankles appear swollen. When you ask to see his list of medications, he provides it, and you see that one of the prescribed medications is Furosemide (Lasix), which is a diuretic that helps remove excess fluid from the body.

While Jordan is gone, Noah gives you permission to look around the house. You notice piles of unwashed clothes on the floor of Noah's bedroom, as well as a foul odor in the bedroom emanating from the dirty laundry on the floor.

During your interview, you screen for potential cognitive issues and decision-making ability. You use your organization's approved assessment tool, the Clock Draw Test (CDT). The client scores a six (out of 10 points) on the CDT, indicating mild cognitive impairment. You ask a series of questions designed to assess



Noah's decision-making ability in addition to investigating the allegations. You ask the following questions and receive the following responses from him.

**APS professional:** Can you tell me about the decision to have Jordan be your caregiver?

**Noah:** Well..... I don't know....my sister noticed I needed some help and she said her son Jordan could help me. And get paid for it.

**APS professional:** What, if any, concerns do you have about Jordan being your caregiver?

**Noah:** Well....he doesn't always show up. I'm kind of a mess around here....can't do it myself. I told him to pick up my medications and he didn't do it!

**APS professional:** Can you tell me more about Jordan's use of your debit card?

**Noah:** I thought it would be easier if I just gave him my card so he can get my groceries and stuff. But then I saw on my bank statement these weird charges....I didn't know what they were for. I asked my neighbor about it, and he looked it up on his computer and told me it was for video games.

**APS professional:** How do you monitor your finances/bank account?

**Noah:** I don't use on-line banking, don't trust it, but I receive my statements in the mail. I usually look at them. If I have any questions I usually go to my bank in person, if I can get there, and ask one of the people that works at the bank. They're usually able to help me figure it out.

**APS professional:** What are the risks of giving Jordan access to your debit card/bank account?

**Noah:** He's charging up those video games without asking me. I didn't say anything yet, because I don't want him to get mad. Even though he doesn't do that much for me, I rely on him for certain things. I'm on a tight budget, if he charges too much it might overdraw my account. And I don't want that.

**APS Professional:** Can you tell me about what medications you are supposed to take and what conditions they treat?

**Noah:** I take a water pill, for my edema (points to swollen ankles), a medication for my high-blood pressure, and a heart medication.

At the end of the interview, you discuss the following with Noah:

- You tell him about alternative options for caregiver services, including a local program that he might be eligible for that provides on-site primary care, case management, medications, meals, and other services, including caregiver services in the home.

- You encourage him to contact his IHSS SW to get a list of providers should he decide to choose another caregiver instead of Jordan.
- You offer to connect him to home-delivered meals

**Complete the following documentation areas:**

1. Name, gender, pronouns, marital status, sexual orientation, race/ethnicity, age:
2. Date/time/length of visit:
3. Protective issues:
4. Indicators of abuse:
  - a. **Physical:**
  - b. **Behavioral:**
  - c. **Environmental:**
  - d. **Financial:**
5. Screening for decision-making ability:
6. Risk assessment:
7. Interventions, resources, referrals (offered), immediate concerns:
8. What allegations would you add to the referral allegations?:
9. What statements made during the interview would be connected to evidence for findings?:

## HANDOUT: RAT FECES

*Read the following narrative information carefully:*

**The APS professional walked into the kitchen and observed rats scurrying under the cabinets when the light was turned on. Feces were all over the floor. The client's daughter said her mother liked rats but she didn't like people. Mrs. Jones said she was surprised that the rats stayed around with so little food in the house, then she walked out of the room.**

*Now read the following statements about the narrative. Circle "T" if the statement is true, "F" if the statement is false, and "U" if you are unsure.*

1. Rat feces covered the kitchen floor.	<b>T</b>	<b>F</b>	<b>U</b>
2. The client's daughter didn't provide her mother with enough food.	<b>T</b>	<b>F</b>	<b>U</b>
3. It was reported that the client liked people.	<b>T</b>	<b>F</b>	<b>U</b>
4. The APS professional turned on the kitchen light.	<b>T</b>	<b>F</b>	<b>U</b>
5. Mrs. Jones likes rats.	<b>T</b>	<b>F</b>	<b>U</b>
6. Someone turned on a light.	<b>T</b>	<b>F</b>	<b>U</b>
7. Mrs. Jones doesn't like people.	<b>T</b>	<b>F</b>	<b>U</b>
8. There was not very much food in the kitchen.	<b>T</b>	<b>F</b>	<b>U</b>
9. The client is ambulatory.	<b>T</b>	<b>F</b>	<b>U</b>
10. Mrs. Jones went to another room after she talked to the APS professional.	<b>T</b>	<b>F</b>	<b>U</b>
11. Rats went under the cabinets when the light was turned on.	<b>T</b>	<b>F</b>	<b>U</b>
12. The APS professional interviewed the client and her daughter.	<b>T</b>	<b>F</b>	<b>U</b>
13. The client's house was not very clean.	<b>T</b>	<b>F</b>	<b>U</b>
14. The APS professional walked into the kitchen.	<b>T</b>	<b>F</b>	<b>U</b>
15. Mrs. Jones was hungry.	<b>T</b>	<b>F</b>	<b>U</b>

### Rat Feces Activity

What seems clear and concise?

What seems objective or subjective?

Review Handout and mark:

- True
- False
- Unknown

1. Rat feces covered the kitchen floor.	T	F	U
2. The client's daughter didn't provide her mother with enough food.	T	F	U
3. It was reported that the client liked people.	T	F	U
4. The APS professional turned on the kitchen light.	T	F	U
5. Mrs. Jones likes rats.	T	F	U
6. Someone turned on a light.	T	F	U
7. Mrs. Jones doesn't like people.	T	F	U
8. There was not very much food in the kitchen.	T	F	U
9. The client is ambulatory.	T	F	U
10. Mrs. Jones went to another room after she talked to the APS professional.	T	F	U
11. Rats went under the cabinets when the light was turned on.	T	F	U
12. The APS professional interviewed the client and her daughter.	T	F	U
13. The client's house was not very clean.	T	F	U
14. The APS professional walked into the kitchen.	T	F	U
15. Mrs. Jones was hungry.	T	F	U

### Subjective vs Objective

Objective:

- Explaining facts or conditions without distortion from personal feelings, prejudice, or interpretations based upon personal opinions and experiences.

[Assessing for Physical Abuse APSWI Training Video](#)

\*Content Warning:  
Physical and Emotional Abuse



### Subjective vs Objective

- The client became tearful when discussing the situation with her daughter.
- Lisa is likely homophobic.
- Lisa has some challenges with anger management.
- I observed 4 bruises on the client's right upper arm, approximately 2 inches x ¾ inches in size, brownish-yellow in color.
- Goldie is too passive with Lisa.
- The client said she asked Lisa to clear her stuff out of her old bedroom.

Re-write one of the above subjective sentences to be objective.

### Clear and Concise



#### Clothing:

- Focus on condition, cleanliness, appropriate for weather

#### Description of home:

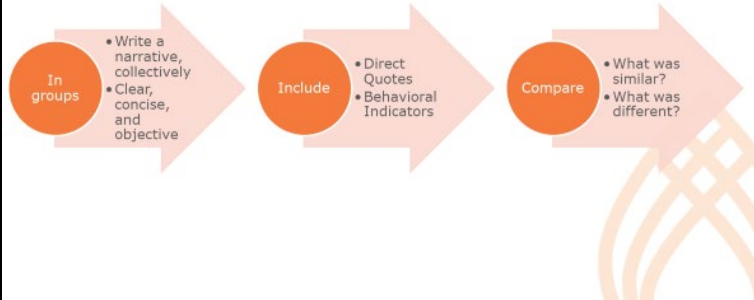
- Focus safety and indicators of risk

#### Conversation & Statements:

- Focus on supporting factual information

### Narratives

Using the video clip:



### Person-Centered

Person-centered thinking:

- "focuses language, values, and actions towards respecting the views of the person and their loved ones. It emphasizes quality of life, well-being, and informed choice." –National Center on Advancing Person-Centered Practices and Systems (NCAPPS)

How is this beneficial to:

- Clients
- Support systems/families
- APS programs

### Person-Centered Specifics

- Language Needs
- Pronouns, Gender Identity, Sexual Orientation, Marital Status
- Person-first or Identity-first
- Goals
- Strengths
- Choices, Decisions, & Plans
- Other important physical, emotional, social and cultural aspects
- Additional information



### Documenting During Client interaction

#### Benefits

- Transparency & Trust
- Accuracy
- Efficiency
- Collaboration
- Demonstrates Professional practices

#### Challenges

- Perceived Disconnection
- Power differential
- Impact on Conversation Progression
- Confidentiality Concerns
- Technical Problems

### Considerations When Documenting Live

#### Etiquette & Best Practices

- Ask Permission
- Share the Why
- Positioning support transparency
- Pause to be present
- Invite corrections

### Documentation Requirements



#### Case records should include:

- Required forms
- Written assessments
- Person-centered service plan
- Narrative of contacts
- Acceptance or refusal of services
- Case related documents
- Case closure summary
- Supervisory approvals

Anything else?

### Timely Documentation

- Supports legal accuracy
- Captures details with fresh
- Ensures facts are captured accurately
- Reduces errors
- Mitigates risk
- Supports meeting mandates



### Is this Complete?

#### Case Record Scavenger Hunt:

- In groups:
  - Review case scenario
  - Check off what applicable requirements should be included in case file
  - Add anything else that should be included
- Report out





## HANDOUT: CASE RECORDS CASE SCENARIOS

### Scenario 1:

On 3/9, you receive a referral for a 79-year-old widowed female who lives alone. She recently hired a caregiver, who is the alleged perpetrator (AP), through a recommendation by someone in her senior community. The caregiver is supposed to help the client with chores, shopping, meal prep, and transportation to medical appointments. The referral states that since the client hired the caregiver, there have been multiple unusual and suspicious transactions via debit card on her bank account, such as for bail bonds, a car payment (the client has a paid-for vehicle), and credit card payments.

On 3/10, you call the Reporting Party (RP), a local banker that is familiar with the client's spending habits and noticed the unusual transactions which were flagged by their data system. The bank's automated fraud detection system attempted to contact client regarding the transactions, but she did not respond. Now the debit card has been shut down until further notice. The banker emails you a copy of the suspicious transactions via encrypted email.

On 3/10, you visit the client unannounced. The AP is not present. The client said that she gave the AP her debit card and PIN to do shopping for her, and when asked about the suspicious transactions, the client confirmed they were not made by her. She has not contacted bail bonds, she does not have a car payment, and she does not possess a credit card account that is specified in the transactions. The client believes that the AP is probably the one who conducted the fraudulent transactions as she was insistent on using the debit card instead of cash to do the shopping for the client.

### Check off the required documentation items for this scenario on the list below:

1. ☐ Report of Suspected Dependent Adult/Elder Abuse (SOC 341)
2. ☐ Cross-report to Law Enforcement (SOC 343)
3. ☐ Written assessments
4. ☐ Service plan
5. ☐ A chronological narrative of contacts made with, or on behalf of, the client
6. ☐ Documentation of any refusal of services
7. ☐ Copies of all case related documents received or sent by APS
8. ☐ Case closure summary
9. ☐ Documentation of specific supervisory approvals

## Scenario 2

On 4/4, you receive a referral for a 68-year-old male client who is living in a subsidized housing apartment. The allegation is for self-neglect. The Reporting Party (RP) is a neighbor who would like to remain anonymous and did not leave a call back #. The RP explains that the client has become increasingly isolated, has not left the apartment in weeks, possibly months. The RP does not know how the client is obtaining food, and when the client's apartment door was open, the RP observed a very cluttered environment. The RP did momentarily see the client, and he appeared to have lost a significant amount of weight in a short time. The RP does not know if the client has any support system or family. When the RP has spoken with the client on a few occasions, the client seemed "lost."

On 4/6 you arrive at the apartment for an unannounced visit. You knock on the door, and the client yells from within "who is it"? You explain you are a social worker who is there to check on him and see if he needs anything, and he yells back "I didn't request a social worker, I don't need one, I don't need anything.....now go away." You attempt again to engage the client in an interaction, but he refuses to open the door. You call out that you will leave your business card in the door and if he changes his mind he can call you or the 800#. You place your card in between the door and door jam and leave the premises.

When you return to the office, you document the refusal of services and initiate the process for your supervisor to change the status of the case to refusal of services in your case management system.

### **Check off the required documentation items for this scenario on the list below:**

1. ☐ Report of Suspected Dependent Adult/Elder Abuse (SOC 341)
2. ☐ Cross-report to Law Enforcement (SOC 343)
3. ☐ Written assessments
4. ☐ Service plan
5. ☐ A chronological narrative of contacts made with, or on behalf of, the client
6. ☐ Documentation of any refusal of services
7. ☐ Copies of all case related documents received or sent by APS
8. ☐ Case closure summary
9. ☐ Documentation of specific supervisory approvals

**Scenario 3 (Content warning: sexual assault)**

On 5/6, you receive a referral for a 38-year-old male who lives with a developmental disability. The allegation is sexual abuse. The client lives alone in an apartment and has independent living support services (ILS) which helps him live independently. The Reporting Party (RP) is his ILS specialist who works with the client one-on-one to build skills in the areas of shopping, meal-prep, cleaning, money management, and using public transportation. When visiting client's apartment, the RP has noticed an adult male/alleged perpetrator (AP) "hanging out" in client's apartment and lingering around when the RP is trying to work with the client on skills. The client seems uncomfortable around the AP. During a time when the AP is not present, the RP asks the client about his relationship with the AP. The client reluctantly admits that the AP has forced him to engage in sexual activity, and the client is uncertain whether or not it was consensual.

You conduct a full investigation, including offering to initiate a sexual assault forensic examination with the local Sexual Assault Nurse Examiner and they accept. You conclude that allegations of sexual abuse are confirmed.

**Check off the required documentation items for this scenario on the list below:**

1. \_\_\_\_ Report of Suspected Dependent Adult/Elder Abuse (SOC 341)
2. \_\_\_\_ Cross-report to Law Enforcement (SOC 343)
3. \_\_\_\_ Written assessments
4. \_\_\_\_ Service plan
5. \_\_\_\_ A chronological narrative of contacts made with, or on behalf of, the client
6. \_\_\_\_ Documentation of any refusal of services
7. \_\_\_\_ Copies of all case related documents received or sent by APS
8. \_\_\_\_ Case closure summary
9. \_\_\_\_ Documentation of specific supervisory approvals

### Workshop Summary & Questions

We covered:

- Documentation Standards of Practice
- Objective vs Subjective documentation
- Clear, concise, purposeful narratives
- Person-centered documentation
- Case record requirements

What questions do you have?

### P-I-E



Reflect and note:

- Priceless piece of information
  - What has been the most important piece of information to you today?
- Item to implement
  - What is something you intend to implement from our time together today?
- Encouragement you received
  - What is something that you already are doing and were encouraged to keep doing?

1. P- Priceless piece of information. What has been the most important piece of information to you today?

2. I- Item to implement. What is something you intend to implement from our time today?

3. E- Encouragement I received. What is something that I am already doing that I was encouraged to keep on doing?

### Evaluations

Your feedback is valuable!

- Please complete evaluations.

Thank you for taking time out to spend on your own professional development.

Thank you for what you do for our communities!



Empty box for participant feedback or notes.

## Thank You!

We envision a world where  
the quality of life for individuals, organizations, and communities  
is transformed into a healthier place.



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## APPENDIX: NARRATIVE SAMPLE

\*Note: some people may write in first person “this writer” or “I,” or third person “the APS professional.” Either is acceptable and different organizations may have different preferences for this.

\*Behavioral indicators are in *italics*.

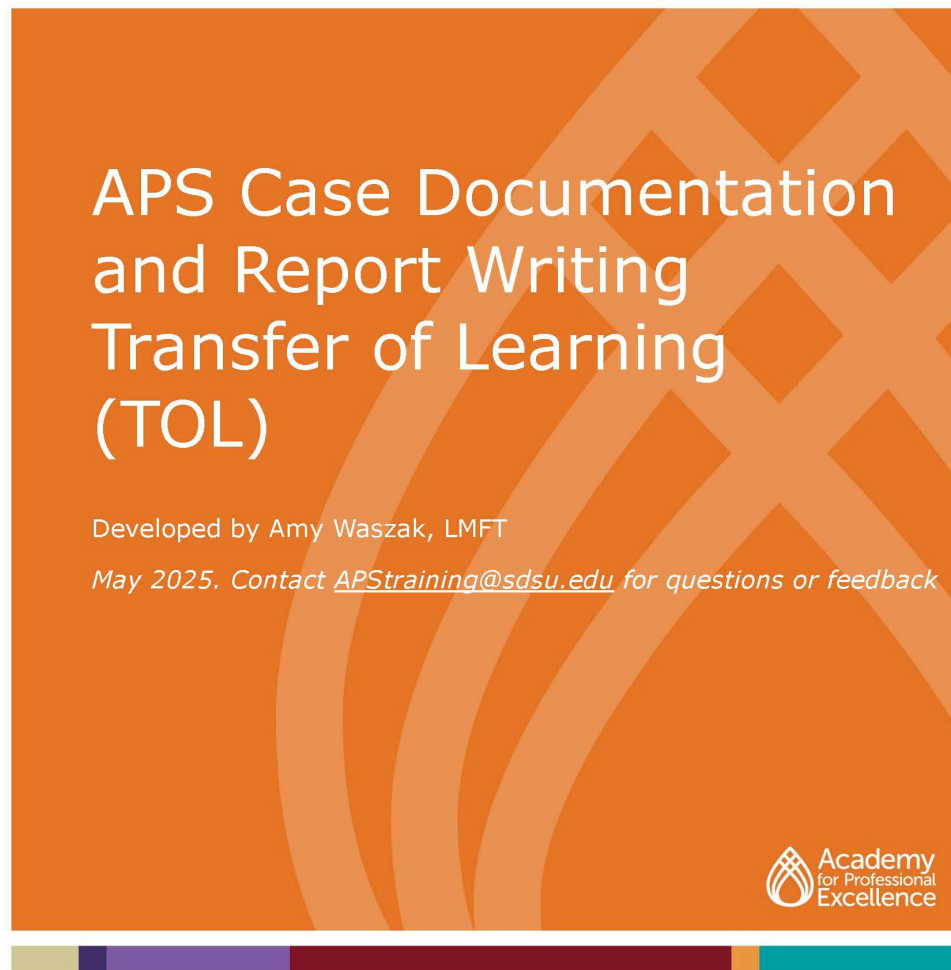
The APS professional (Alejandra Ruiz) asked the client (Goldie Rosenberg) about the incident of physical abuse perpetrated by Lisa, Goldie’s daughter. The client explained that Lisa has lost her temper with her a few times and that recently, when Lisa was here cleaning out her old bedroom, “she just lost it” and “she kind of grabbed my arm and left little bruises.”

The client described a bit more about the dynamics between herself and Lisa. She said that she divorced Lisa’s father a few years ago after she met a woman, Jackie, in an art class and fell in love with her. *The client smiled and looked happy when describing meeting Jackie.* The client explained that Lisa has been angry with her since she was a teenager, but even more angry since client ended her marriage and began a relationship with Jackie. The client explained that Jackie sold her house and is moving in with her so they can start a life together.

When asked to describe more about what was happening before the incident, the client reported the following: she asked Lisa to clear the stuff out of her old bedroom, so that Jackie could move her stuff in, and Lisa became angry. The client explained that Lisa was mad, huffing around, slamming stuff, practically throwing boxes around. The two argued briefly, “and then she walked past me, she grabbed my arm really hard, dug her fingers into me, it really hurt!” *The client was upset and tearful and her tone seemed very sad when describing the abuse as evidenced by looking down and tightening her lips when tearful.*

## Appendix: Transfer of Learning

Below is a Transfer of Learning packet. It can be accessed on [APSWI's website](#) under the [Transfer of Learning tab](#).



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## APS Case Documentation and Report Writing Transfer of Learning (TOL)

### Objective:

This Transfer of Learning (TOL) provides various tipsheets to reinforce key takeaways from the [APS Case Documentation and Report Writing eLearning](#). The following tipsheets are included:

- [What to include and omit in case documentation](#)
- [How to make documentation purposeful](#)
- [Documenting screening for decision-making ability and staff's conclusions](#)

### How to Use:

- Staff who have completed the eLearning can reference the tipsheets as reminders of what to include in their case documentation to ensure their efforts to support someone's safety and well-being and working within program and state requirements are being captured.
- Supervisors can utilize the tipsheets to support areas of growth in their staff's documentation skills as well as highlight where staff excel in certain areas.
- Staff and supervisors can take the opportunity to review the tipsheets and discuss any additional program expectations or requirements.



### Content Warning:

We recognize that APS work is both challenging and rewarding and APS professionals are whole human beings who have their own experiences before and during APS work. Content and examples that are provided may activate feelings based on personal or professional experiences, including vicarious and/or secondary trauma and we encourage everyone to do what they need to do in order to safely engage in this transfer of learning.



### TIPS: What to Include and What to Omit

What to Include	Examples
A clear picture of the situation, including your assessment of the person's functioning, strengths and abilities, and protective concerns	<ul style="list-style-type: none"> <li>✓ Ability to perform ADL's and IADL's</li> <li>✓ Ability to self-advocate and make informed decisions</li> <li>✓ Their concerns about their safety (person-centered perspective)</li> <li>✓ Your concerns about their safety</li> <li>✓ A factual record of information and statements that support the allegations and case findings.</li> </ul>

Ensure to omit information or details that are:

- Extraneous or not relevant.
  - It can distract from the core message and can make it harder to focus on what's important.
- Superfluous, unnecessary, or excessive.
  - It can clutter the documentation, making it less concise and harder to decipher.

**TIPS: Making Documentation Purposeful**

Purpose	Process	Examples
Case History and Baseline	Review case history for knowledge base about the case and review for changes in client's level of functioning	<ul style="list-style-type: none"> <li>✓ What were the protective concerns in the previous cases?</li> <li>✓ Same alleged perpetrator?</li> <li>✓ Repeat allegations or a new concern?</li> <li>✓ How was the client functioning physically and cognitively in the previous cases?</li> <li>✓ What might be different now?</li> </ul>
Legal Involvement	Keep in mind that any and all documentation may be used in criminal or court proceedings.	<ul style="list-style-type: none"> <li>✓ Are there concerns about criminal allegations?</li> <li>✓ What evidence is needed/collected?</li> <li>✓ If the client is in need of a conservator, what kinds of cognitive assessments and/or information will the court need to accomplish this?</li> </ul>
Accountability	Strong documentation portrays your handling of the case and the justification for steps that were taken.	<ul style="list-style-type: none"> <li>✓ If APS facilitates the client obtaining a restraining order from the court, the documentation clearly describes the risk to the client and validates the need for the court order.</li> <li>✓ All voluntary and involuntary services are documented and justified.</li> </ul>
Professionalism	Documentation of quality work reflects professionalism in APS practice	<ul style="list-style-type: none"> <li>✓ Thorough assessment</li> <li>✓ Appropriate referrals and cross-reports</li> <li>✓ Reflects program's documentation standards</li> </ul>

		around terminology, language and use of acronyms
Consistency	Knowing your program and state guidelines around timeline requirements and data collection contributes to program metrics that can help ensure program consistency.	<ul style="list-style-type: none"> <li>✓ Ensure client is seen within required timeframe and document to support consistency in meeting program mandates.</li> <li>✓ Enter case documentation within the timeframe of program guidelines</li> </ul>
Staffing and Funding	Documentation can help provide the justification for funding to maintain needed APS staffing and resources.	<ul style="list-style-type: none"> <li>✓ Caseload numbers can help justify hiring campaigns and elicit state and federal funding for APS programs to hire with.</li> <li>✓ Case data can help drive the need for certain case management programs, such as housing navigation services and specialized case management</li> </ul>

### TIPS: Documenting Screening for Decision-Making Ability

Documenting that the below areas were assessed and how they were assessed is crucial.

Area to Assess	Questions
Orientation	<ul style="list-style-type: none"> <li>✓ What is your name?</li> <li>✓ Where are you right now? What is the name of this place? What is your address?</li> <li>✓ What's today's date? What day of the week is it?</li> <li>✓ Why are you here? What happened? Do you understand why I'm here visiting you?</li> </ul>
Understanding of the situation	<ul style="list-style-type: none"> <li>✓ Can you tell me in your own words what this [situation/decision] is about?</li> <li>✓ What are your concerns about this situation?</li> <li>✓ What is your understanding of your choices in this situation?</li> <li>✓ What is your understanding of the role of APS in regards to this situation?</li> </ul>
Appreciation of outcomes	<ul style="list-style-type: none"> <li>✓ Can you tell me what might happen if you choose [option A]?</li> <li>✓ And what might happen if you choose [option B]?</li> <li>✓ What are some of the [pros/cons] of this decision?</li> <li>✓ How might this decision affect your life?</li> </ul>
Reasoning & evaluation	<ul style="list-style-type: none"> <li>✓ How did you arrive at this decision?</li> <li>✓ What factors are most important to you when you were thinking about this?</li> <li>✓ Does this decision fit with your values and what's important to you?</li> <li>✓ Can you tell me about any other options you considered?</li> </ul>
Communicating choice	<ul style="list-style-type: none"> <li>✓ What is your decision? (document clearly what they stated, in their words.)</li> <li>✓ Has anyone pressured you to make this decision?</li> <li>✓ Do you feel free to make/state this decision?</li> <li>✓ What are your thoughts/feelings about this decision?               <ul style="list-style-type: none"> <li>○ *If a client has communication challenges document what accommodations were used.</li> </ul> </li> </ul>

Your conclusion about someone's decision-making ability is important to include. Keep in mind the following:

- ✓ If a tool was used, document the score and what the score means, according to the tool's guidance.
- ✓ Document the person's abilities in responding to questions about their orientation, understanding, appreciation of consequences, reasoning, and ability to communicate their choices and self-advocate.
- ✓ This does not mean diagnosing a client with a neurocognitive disorder, rather documenting the client's responses and documenting your professional opinion about their ability to make informed decisions, based upon the interview.
- ✓ Always seek an evaluation by a doctor, psychologist, or other licensed clinician when seeking a formal diagnosis and/or capacity evaluation.



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