



# The Adult Services NEWSLETTER



David Paterson, Governor  
Gladys Carrión, Esq., Commissioner

New York State Office of Children & Family Services, Bureau of Adult Services

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### From The Commissioner

I am pleased to welcome you to the first issue of our Adult Services Newsletter. This is one of several steps OCFS is taking to work with local districts and elevate the practice of Adult Services workers. I hope you find this issue interesting and informative. Please share your comments with us so that future issues reflect your needs.

*In appreciation of the fine work you do for  
New York's adults in need,  
Gladys Carrión, Esq.*

### From The Director

Alan Lawitz



We know that the work done by local DSS Adult Services workers on behalf of vulnerable adults is critically important. And as the population ages, as social policy and legal requirements move in the direction of less institutionalized and more community-based care, as the economy worsens, and as some other services providers reduce the level of services they offer, all of these factors will only increase the numbers of adults requiring assistance, and create additional challenges for those of us working in this field.



But we need to know that we are not out there all alone. There are over 900 Adult Services caseworkers, intake workers, supervisors and related support staff across New York State. That is a lot of knowledge, energy and experience! We need to talk to one another, share our experiences in providing care, and discuss what works and what doesn't. We need to celebrate our successes, and keep each other informed about what's new in the field.

It is our intention to have this newsletter serve as a means (one of several) by which Adult Services units in social services districts, OCFS, and our many public and private partners can share useful (and hopefully interesting) news and information that is important to our work . This will include articles and features about:

cont. pg. 2

## Director's Column con't from page 1

- new programs and resources pertinent to Protective Services for Adults, Family-Type Homes for Adults, and Preventive Services for Adults;
- news about successful strategies or best practices for serving clients;
- upcoming training opportunities;
- providing a forum for districts to express their views or state their experience in providing some aspect of Adult Services;
- answering your questions about the Adult Services Automation Project (ASAP); and
- profiles of state and local Adult Services staff.

When I served (eons ago!) as an attorney for the State Department of Social Services working on PSA issues, I remember speaking with Kathy Crowe and others about how great it would be if we were able to have a newsletter to enhance our communications. It did not happen then. Soon after I was appointed as Director of the Bureau of Adult Services in November, 2007, Deb Schwencke again suggested the newsletter idea. OCFS management has been very receptive, and it got the green light. Kudos to Deb for spearheading our bureau's efforts to bring this about.

It is vitally important that the newsletter contain fresh ideas and information from our Adult Services units. I am delighted that this issue includes articles from our colleagues in Oswego, Schoharie, Nassau and Orange Counties; features a high honor bestowed upon Lin Saberski of New York City's Human Resources Administration; and contains a summary of district responses across the state to an email question about access to mental health services. Please use this newsletter as a way to share your news, your views, and your experiences.

Finally, I want to mention that this past April I sent a letter to each local commissioner, inviting nominations for Certificates of Recognition to be issued by OCFS to acknowledge and celebrate excellence in providing Protective Services for Adults to clients. The first round of nominations closed on June 6, 2008. We asked the commissioners to submit detailed explanations of why the nominated individual or team merits such recognition, and to include examples of innovative programs, collaboration with other providers, and successes in dealing with difficult situations. With these Certificates of Recognition we want to honor superlative case-work and increase public recognition of the importance of Adult Services. We also want to obtain information about innovative ideas and best practices that we can share widely to benefit us all. We have received nominations from thirteen districts (some of these containing multiple nominations of various workers or teams). We are in the process of reviewing these and you will hear more about this soon.

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## Find Home Health Care and Hospice in Your County Online at NYSDOH Website

[www.homecare.nyhealth.gov](http://www.homecare.nyhealth.gov)

A new Home Health and Hospice Profile website now allows the public to:

- Learn about the types of home care and hospice services that are available to best meet their needs or their family's needs;
- Easily search for home care agencies or hospice programs of interest by name, region or county;
- Obtain important contact information on providers and programs;
- Compare certified home health agencies on the basis of up to 12 quality measures and
- Obtain important and up-to-date information regarding certified home care and hospice program inspection reports and complaint investigation history, as well as recent DOH enforcement actions.

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## Help Us Name the Newsletter

We'd like your thoughts: what should we call the newsletter in future issues? We have started out calling it "The Adult Services Newsletter," which is accurate and descriptive, if not exactly imaginative. We've thought of some other possibilities, among them: Adult Services News and Views, The Adult Services Advocate, or The Advocate: News and Views Relating to Adult Services

What do you think? Please send any ideas to Deb Schwencke at: [Deborah.Schwencke@ocfs.state.ny.us](mailto:Deborah.Schwencke@ocfs.state.ny.us)

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## ABOVE AND BEYOND

### A Note of Thanks to A PSA Caseworker

Irene Kurlander, Senior Case Supervisor, Human Services, for Orange County DSS, sent us the following, in praise of PSA Caseworker David Masella:

“One of David’s PSA consumers passed away this past weekend after a short illness. He resided with several other PSA consumers.

Dave took three of them to the Wake the evening of April 1. He also bought them a quick dinner and provided them with his own dress shirts so that they could look respectable when meeting our deceased consumer’s family members and paying their respects. This is typical of David’s efforts on behalf of his consumers.”

Irene also shared with us the following “Note of Thanks” sent to David:

*“Dave:*

*I wanted to take a brief moment to express my appreciation of the efforts you made on behalf of Mr. B this past week.*

*More specifically, your dedication to Mr. B, his family and several other Adult Protective consumers with whom Mr. B had a relationship and for whom you facilitated the means by which to afford them an opportunity to pay their respects at Mr. B’s Wake this past Tuesday evening, truly went above and beyond the scope of your job related responsibilities as a PSA Caseworker.*

*In times when one could easily take the tact of doing only what*

*is required, you do not waver from doing whatever is needed to ensure the safety, well-being and dignity of your consumers. Your dedication and extraordinary generosity of time and self speak highly of your actualizing the principles of what we as a Human Services organization should strive to achieve each and every day. Thank you for all that you do on behalf of your consumers and our community.*

*Irene”*

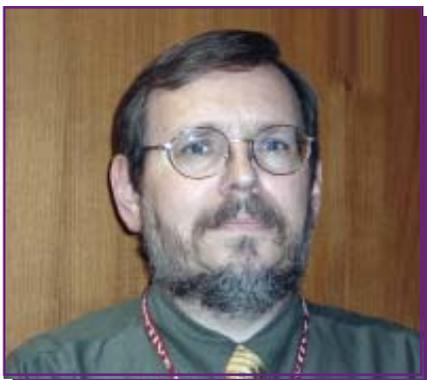
Thanks to Irene for sharing this with us. This is a great example of a PSA caseworker’s dedication and commitment to his clients.

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## Sometimes You Just Get Lucky

*William Reed, Supervisor, Adult Services, Oswego County DSS*



Oswego County works hard at community education regarding the issues of elder abuse and neglect. We do numerous presentations and panel discussions with virtually anybody who will give us the opportunity. One group that proved impossible for us to train was front-line bank staff. Although we could meet with the banks’ security officers and talk with them, the tellers seemed to be unreachable. Multiple branches, limited group meetings and an uncertainty that there was really a major problem with financial exploitation all made the tellers a tough audience to meet.

After months of trying we’d moved the tellers far down on our list of presentations, still important but unlikely to happen in the next year. Instead we concentrated on local service organizations, food pantry managers, and home health agencies. One Thursday morning we did a breakfast presentation for the local Rotary. Over

bacon and eggs, we talked about elder abuse and neglect with local business leaders and had a good discussion about financial issues sparked by questions from a local investment counselor.

Following the presentation, a lady who had sat back quietly in the back of the room came forward. She identified herself as the Vice President of one of the larger local banks and asked if we could do a half hour presentation on the bank’s role in preventing financial abuse at her next head teller meeting. We jumped at the chance.

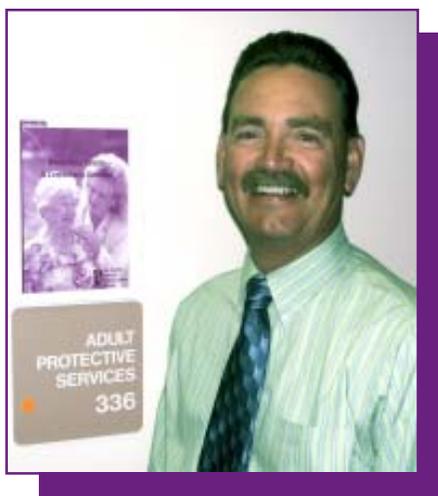
Using clips from the video *Banks: The Front Line of Defense Against Exploitation* to spark discussion, we trained twenty head tellers from a half dozen local branch banks. Cooperation from these banks and calls regarding suspected abuse increased almost immediately and has continued for more than a year.

The chance presence of a bank officer at one of our routine presentations opened up a critical audience we had been trying to reach for months. Sometimes you just get lucky.

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## Interview of Rich Piche OCFS Bureau of Adult Services

Rich Piche is a Children and Family Services Specialist II within the Bureau of Adult Services. He is Coordinator of the Family-Type Home for Adults Program, as well as State representative for Adult Services for the following counties: Albany, Broome, Chemung, Clinton, Franklin and Tioga. Alan Lawitz and Deb Greenfield sat down recently with Rich for the following discussion.



Q. Rich, where did you grow up?

A. In Wynantskill, a small suburb outside the City of Troy, in Rensselaer County.

Q. Where did you go to school?

A. I went to Catholic Central High School. I attended two years of college at Hudson Valley Community College, and then transferred to the College of Saint Rose, where I majored in sociology and minored in psychology.

Q. Both of those disciplines have probably stood you in good stead through the years that followed, I would think.

Deb Greenfield: That's how you get along with the rest of us!

Q. Can you tell us a little about your family.

A. I've been married longer than I was single, I should rephrase that response, happily married for 33 years, we're great friends. We have two sons, age 28 and 25 and are looking forward to that next stage of life called retirement.

Q. What are some of your favorite outside interests?

A. I love playing golf. I've been a member of a golf league for the past several years. It's a great sport, a chance to enjoy the outdoors and good friends. I also try to walk 10-15 miles a week to stay in shape. I enjoy reading. Some of my favorite authors are Vincent Flynn, David Baldacci, Lee Childs, any of those political thrillers. My wife and I also enjoy taking care of our 12 perennial flower beds and watching the activity at our eight birdfeeders. But nothing beats sitting outside at night, enjoying a fire in our fire pit and listening to a ballgame on the radio.

Q. Do you go to the movies?

A. I think the last movie I saw was Atonement, I'm looking forward to seeing the new Batman movie and also WALL-E, because of the PIXAR animation.

Alan: I've seen WALL-E; it's really good!

Q. I know that your voice has been described as a "bar-room baritone." Clearly your voice has a very resonant timbre, as many of our readers may have heard through

the years in one meeting, phone call or conference or another. Now is it true that you sing, or used to sing, fairly regularly in the community?

A. I was a member of a theatre group that used to appear across the Capital District, to raise money for different charities. We performed various Broadway Plays including Godspell, Pippin and The Wiz. The highlight was several performances at the Troy Music Hall and at Tanglewood.

Q. Rich, for how long have you been gainfully employed by the Empire State?

A. I started my employment in Rensselaer County in April of 1978. I worked there as a caseworker in the Child Protective Unit, transferred to the Intake unit. then moved back to Child Protective as a supervisor. I went to the State Central Register (SCR) in 1981. I supervised various "shifts" and was promoted to administrative supervisor of the daytime shift. I came to the Bureau of Adult Services at OCFS in Fall of 1999.

Q. You have worked with some interesting characters in Adult Services.

A. Too numerous to mention!

Q. Has your experience in Child Protective Services at the local district level and at the SCR been a plus to you in working in Adult Services?

A. Definitely. Although the age of the clientele is different, the common links are the number of and extent of problems of the vulnerable population that the agency serves, whether it would be children or adults who are abused and neglected; the investigatory techniques and the services available to help are somewhat linked together.

Q. Are you struck by any differences between children's services and adult services ?

A. I think we had a greater ability to assist children who are victims of abuse and maltreatment because there was greater legal authority with regard to services which can be mandated. Adults have more rights to refuse services and to make their own decisions and to demand the least restrictive environment.

Q. Have there been any significant changes in Adult Services you have observed in the time you have been working in this area?

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A. Yes; the sheer volume in regard to the number of adults referred for services, the problems the clients are facing and the complexity of the reports and cases that PSA workers are facing now, as compared to 1999.

Q. What have you liked most about the job?

Deb G: The co-workers!

A. I think the best thing about the job is working with the people in the bureau, and also the relationships that we have developed with the PSA workers in the local districts has been very rewarding through the years. You meet a lot of interesting and very caring people who are out there doing a very difficult job every day, and we try to assist in any way we can.

Q. Notice we have not asked you what you have liked the least! You serve as the Coordinator of the Family Type Home for Adults program. What are your goals as Coordinator of that program? What would you like folks to know about that program that they might not know?

A. The most important thing we are concentrating on right now is increasing public awareness of the program, and increasing the number of certified homes we have across the State. It is a valuable program that allows a vulnerable adult who can no longer live by themselves and who needs some supervision and assistance with daily living skills to remain in the community and to be protected and enjoy their life as opposed to being institutionalized or the victim of mistreatment.

Something that we would like people to know about is that an operator can request a waiver to allow the operator to provide valuable services such as respite care or day care to non-residents, as well as caring for residents of the home.

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## Lin Saberski Recipient of Prestigious Public Service Award



Lin Saberski, Deputy Commissioner for Adult Protective Services for the New York City Human Resources Administration (HRA), is a 2008 recipient of the Sloan Public Service Award, issued by the Fund of the City of New York. This award honors "outstanding civil servants whose work performance and commitment to the public transcend not merely the ordinary, but the extraordinary."

Lin, who has been in her position for nine years, oversees more than 450 case workers, supervisors, field support staff,

central intake workers and administrative staff. She was honored for moving her division away from a "crisis" reaction mode towards greater professionalism, for being astute in her analysis and use of city resources, for being an effective advocate for her staff and the clients they serve, and for working collaboratively with other agencies to serve clients.

At ceremonies honoring Lin on March 12, 2008, Mary Harper, Executive Deputy Commissioner of HRA, said of Lin: "She deals with the most challenging population in the City, one that has often suffered from outright neglect. She is creative, pragmatic, and absolutely trustworthy. She is an extremely effective advocate for Adult Protective Services: a champion for exceptionally needy clients and for the tireless staff who serve them."

Alan Lawitz, Director of the OCFS Bureau of Adult Services, speaking at the HRA ceremonies, said: "It takes a very special person to be able to deal with all the administrative and operational challenges of her job, and yet not lose her focus on the most important thing, the primary goal, which is to protect the vulnerable adult with an impairment who is in danger and who has no one else available and willing to help. Lin has shown that to get the job done well she will go the extra mile, the extra ten and one hundred miles if need be."

In acceptance of the award, Lin said that "helping APS clients is its own award", but that this honor was especially gratifying because the award is a public, City-wide recognition that "we at Adult Protective Services have made a difference." Lin praised her staff, including caseworkers who "face serious risks daily," and who "race the clock in preventing almost 1,550 evictions annually." She also lauded the work of the financial management, family type homes for adults, institutional services units, and others within HRA, as well as HRA's partners in other City agencies and OCFS, as well as its non-profit contractors. She also credited the leadership of Commissioner Robert Doar and Executive Deputy Commissioner Harper. Lin stated: "Quietly, out of the limelight, step by compassionate step, facing danger and managing crises, APS and our partners keep New York City's most vulnerable adults safe in our communities, and truly we do work miracles." Congratulations, Lin, on an honor that is very much deserved!

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## PSA Schoharie and Our SPOA Process

*Submitted by David L. Hunt*



A common issue heard around the State is dealing with the mentally challenged or ill young populations that come to PSA attention. In small, rural counties this can be a challenge especially if the consumer is known to agencies from past involvement and those known for non-compliant issues. In Schoharie County as the Central Assessment Coordinator for Adult Services I have participated in our Single Point of Access (SPOA) committee that meets every other week, for five to six years. The SPOA process is a State Office of Mental Health recommended program and the representative from State Office of Mental Health has participated annually. The local agencies that participate at this meeting include our local Mental Health Clinic coordinator and Community Services Analyst, who handles the court and legal process for the Enhanced service plans coordinator, and Assisted Out-patient Treatment Plan; the Mental Health Clinic Case Management (Adult: Intensive Case manager-Supportive Case Manager); our local Rehabilitative Support Services (RSS-Housing program for MHC); DDSO, our local ARC agency; our Chemical Dependency agency; Schoharie County Community Action program (SCCAP); Office of the Aging; and Catholic Charities.

This meeting allows (with proper consents signed) opportunity to give update information on existing consumers on case loads of any of the programs above along with review of new referrals for services that cross the spectrum. Issues include the Assisted Out-patient Treatment plan participants-Enhance service plan consumers to the homeless population. Discussion around appropriate service provision agencies, or may be a change in treatment provider are reviewed.

Part of the Mental Health model that is utilized across agencies is the Circle of Support meeting. The meeting participants include all service providers and the consumer to review how the consumer feels services are going and address any issues or concern. The process focus is on the consumer's strengths and goals they set.

During one of our SPOA meetings a consumer (female, mentally challenged with IQ 53) that all agencies were working with had become homeless again that day. After the SPOA meeting the consumer arrived and a Circle of Support meeting occurred to problem solve and develop a plan to pursue. The consumer agreed to steps she could take that then allowed for RSS to provide a respite bed for two weeks while PSA and ICM works could assist client in finding an apartment.

Through the years, I have seen success of our consumers and of course repeated consumers come through the committee. I do feel a few important benefits of such meeting include maintaining lines of communications between participating agencies; reinforcing that we are not alone dealing with these difficult to serve consumers; and yes accessing appropriate services for these individuals.

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## REMINDER: Release of Confidential PSA Records

Please remember that, when your office releases confidential PSA records to persons entitled to such records, you should provide a standard transmittal letter along with the records that cautions that the recipient of the records must maintain the confidential character of the information in accordance with applicable law, and that the records are to be used only for the purposes for which it was made available. See Social Services Law section 473-e (4) and regulations at 18 NYCRR 457.16(d). Contact your attorney if you have any question about this.

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## Did You Know?

Home health aides are required to have 12 hours a year of inservice training. Personal care aides are required to have 6 hours a year of such training.

Keep this in mind when you contact home care agencies to provide them with training on how PSA works. By meeting with PSA, these aides may be able to fulfill part of their annual inservice training requirements.

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# Summary of Barriers and Successes Relative to Access to Mental Health Services For Vulnerable Adults, As Reported By Adult Services/PSA Units of Local Departments of Social Services

## I. Reported Barriers

- A. Mental Health workers are seen as often too quick to label a fearful and/or resistant client as “noncompliant” and as a result close out the MH case, and simply refer the client to Protective Services for Adults (PSA). We hear that even Intensive Case Management staff will drop a client for “noncompliance.” They see PSA as a ready backup in such cases. This leaves these clients in a terrible circumstance without needed MH services, and can result in danger to the client, decompensation and precipitate a crisis resulting in turn in (re)admission to acute MH hospitalization. MH workers need to do what is necessary to engage and stay with such clients. The fact that a client may resist a particular treatment or intervention does not mean the client does not need MH services/support.
- B. Inconsistencies among MHL 9.39 Hospitals regarding involuntary admissions. In addition, there seems to be a real gap between what PSA considers to be danger to self or others and what the MH system considers sufficient to meet the threshold for involuntary care . It would be helpful if OMH could provide regulatory and operational criteria for involuntary admissions in laypersons’ terms to enhance PSA staff understanding.
- C. Waiting lists for mental health clinic services are too long, especially for emotionally fragile individuals exiting acute care facilities who need additional support and services from experienced MH staff to ensure successful reentry into the community.
- D. Difficulty in accessing Mental Health screenings for clients referred by PSA. This involves:
  - 1. the difficulty in accessing MH screenings that can be conducted at clients’ homes or elsewhere in the community, as opposed to the MH office \*;
  - 2. the concern that consumers referred by PSA for such screenings may not be seen by the appropriate MH medical and clinical staff; and  
(\*Is there a reason why a mobile MH team could not conduct assessments at a client’s home? One of our districts reported that local MH said it was a billing issue; is this correct? )
  - 3. MH often does not assist PSA when requested to do MH capacity assessments for such interventions as Guardianships. Is there a reason why MH cannot work with PSA to provide such assessments to support Guardianship petitions in appropriate cases?
- E. Need to better serve clients dually diagnosed with both Mental Illness and MR/DD. Often neither the MH nor the DDSO staff seem to want to take ownership or provide case management for clients who clearly need such services and support.
- F. Staff who administer the ACT program do not work cooperatively with PSA in serving mutual clients. They do not return calls.
- G. Need access to more mobile crisis teams. Some counties have none. Where there is a mobile crisis team, there is no psychiatrist, and therefore no one who can provide a diagnosis. Without a diagnosis, there is no MH services eligibility.
- H. Intensive case management, Supportive case management and other MH case management programs are discontinuing or refusing to provide financial management services for clients or to serve as a representative payee for clients who cannot responsibly handle their own funds. Where MH is otherwise involved in providing MH services to clients doesn’t it make more sense for MH to also provide the financial management and where necessary serve as the rep payee for its clients? Some local ICMs have cited financial reasons for dropping financial management services. Can you explain this?
- I. What are the rules and procedures related to SPOA (or is it SPOE?) Most PSA units refer to the acronym as SPOA. However there is a form on the OMH website called “Adult Single Point of Entry (SPOE) for Housing and Case Management.” Which agencies are involved in this program? In some counties ( but not all, such as Monroe Co.) it involves PSA. ,
- J. Transportation of often homeless, mentally ill and /or chemically addicted adults is not available through MH. These adults need to go to a shelter, to psychiatric and medical appointments as well as to the DSS. They often need someone to pick them up and take them to appointments as they cannot navigate public transportation .

## II. Reported Successes

- A. In some counties, the mobile mental health crisis team works well with PSA staff. They are responsive to PSA calls on behalf of clients deemed at a high risk of harming themselves or others.
- B. One out of the three hospital mental health units in the area of one of our districts has been receptive to PSA efforts to work as a team earlier in the admissions process and well in advance of discharge. (Here we are looking at this as the glass being one-third full, rather than two-thirds empty...!)
- C. A district reports that the majority of its area mental health Supportive Case Management and Intensive Case Management programs work collaboratively with PSA staff on behalf of mutual clients.
- D. Some districts report that PSA and Mental Health do joint visits and work well together.
- E. Some districts report that they have a multiagency county workgroup that includes, among others, PSA and Mental Health, which meets regularly to discuss and problem- solve on difficult cases, whether as part of the SPOE process, or otherwise.

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## OCFS Protective Services for Adults County Listings

**Mike Cahill**  
518.486.3430

Michael.Cahill@ocfs.state.ny.us

Delaware	Putnam
Greene	Rockland
Herkimer	St. Lawrence
Jefferson	Schenectady
Monroe	Suffolk
Nassau	Westchester
Otsego	St. Regis

**Debbie Schwencke**  
518.474.3167

Deborah.Schwencke@ocfs.state.ny.us

Chenango	Oswego
Cortland	Schoharie
Fulton	Schuyler
Lewis	Steuben
Montgomery	Tompkins
Oneida	Yates

**Debbie Greenfield**  
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Cayuga	Ontario
Dutchess	Orange
Livingston	Madison
Madison	Seneca
NYC	Sullivan
Onondaga	Wayne

**Paula Vielkind**  
518.474.9590

Paula.Vielkind@ocfs.state.ny.us

Allegany	Orleans
Cattaraugus	Niagara
Chautauqua	Rensselaer
Columbia	Saratoga
Erie	Ulster
Essex	Warren
Genesee	Washington
Hamilton	Wyoming

**Rich Piche**  
518.474.9445

Rich.Piche@ocfs.state.ny.us

Albany	Clinton
Broome	Franklin
Chemung	Tioga

## NYS Kinship Caregiver Program: Helping Families Care For Their Own

*Robert Resnick, NYS OCFS Bureau of Program & Community Development*

We would like Adult Services workers to know about the New York State Kinship Caregiver program as a potential resource. This project was created to form a statewide network of thirteen community-based supportive programs that promote permanency and household stability through services for kinship caregivers and the children in their care. As part of this initiative the Kinship Navigator Program was also developed as a source of information and referral services to link kinship caregiver families in all parts of the state. Funding has been included in the 2008-2009 State Budget to continue services made available through this program.

In New York, it is estimated that more than 140,000 grandparents are raising their grandchildren and over 400,000 children are living in households headed by a grandparent or other relative. Kinship caregivers and children in their care exhibit a wide variety of strengths but often face a number of challenges as well. Kinship Caregiver sites, typically serving a county or multiple counties, address these needs through counseling, academic and support services for the children as well as legal, financial, parenting and respite services for kinship caregivers. Families in "informal" kinship care as well as those in kinship foster care are eligible for services.

OCFS collaborates with other state agencies, local districts, the legal community and other stakeholders such as AARP to help develop coherent policies and coordinated services for kinship caregivers throughout New York. For additional information on kinship care, as well as related community services, contact the Kinship Navigator Program toll free at 877-4KinInfo or through its website at [www.nysnavigator.org](http://www.nysnavigator.org).

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The New York State Office of Children & Family Services  
Bureau of Training & Bureau of Adult Services  
*is pleased to announce the 15th Annual New York State*



### ADULT ABUSE TRAINING INSTITUTE *Collaboration: A Response to Protect Vulnerable Adults*

**SEPTEMBER 24 & 25, 2008**  
THE DESMOND HOTEL & CONFERENCE CENTER  
Albany, New York

**STARS registration will begin in mid-July 2008.**  
Non-STARS registration forms will be available online at  
[www.brookdale.org](http://www.brookdale.org)

# Ask Asha



Asha Ramrakhiani is our specialist dedicated to the operation of the Adult Services Automation Project AKA: ASAP. She responds to questions from both the users of the system in the local districts as well as at home office Asha works together with Sandra Carrk to keep ASAP functioning and progressing according to the users' needs.

Each newsletter we will "Ask Asha" for some direction on the Frequently Asked Questions that she receives from you, the users! Here is guidance for our first issue:

## Question

**"How to link two or more cases belonging to the same client?" OR "You want to view case details of a case belonging to another county, that you think belongs to a client currently in your county."**

Protective Services for Adults (PSA) Help - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address [M:\Program Files\PSA Help Files\infskin\\_homepage.htm](M:\Program Files\PSA Help Files\infskin_homepage.htm)

Contents Search Glossary About PDP

### LINK CASES VIA SEARCH

You can link cases via the **Search** window in two instances:

1. When you do an **Intake Client Search** and find multiple closed cases (unlinked) that match the current intake.
  - ① *When you receive a new referral, you are required to search ASAP, via the **Intake Client Search** tab, to determine whether the individual is already known to the system. If your search retrieves one matching closed case (or one matching closed case already linked to other cases), use the **Intake Client Search** tab to **link the new referral** with the closed case to create a history for the individual.*
2. When you determine, after Intake status, that two or more cases should be linked. For example, you may not realize, until after a case is in Open-Assessment status, that the client's name was misspelled. Search for the client via the **PSA Search** tab in the **Search** window to determine if the individual is already known to the system under the correct spelling. If a matching closed case is retrieved, link the cases via the **PSA Search** tab. Multiple cases can also be linked.

#### STEPS

(If you are linking multiple closed cases to a new Intake, you will have done an **Intake Client Search** and determined there is more than one case to link.)

1. Click the **Search** button on the toolbar.  
*The Search window opens with the **PSA Search** tab displayed.*

cont. next page

