

### Why We Conducted This Audit

We conducted this audit to evaluate the Governor's Office of Elderly Affairs' (GOEA) oversight of cases of elder abuse and neglect in its Elderly Protective Services (EPS) program from fiscal years 2018 to 2022. According to state law, EPS is responsible for protecting elders aged 60 and above who cannot physically or mentally protect themselves and who are harmed or threatened with harm through action or inaction by themselves or by the individuals responsible for their care. EPS investigates reports of alleged abuse, neglect, exploitation, and extortion.

### What We Found

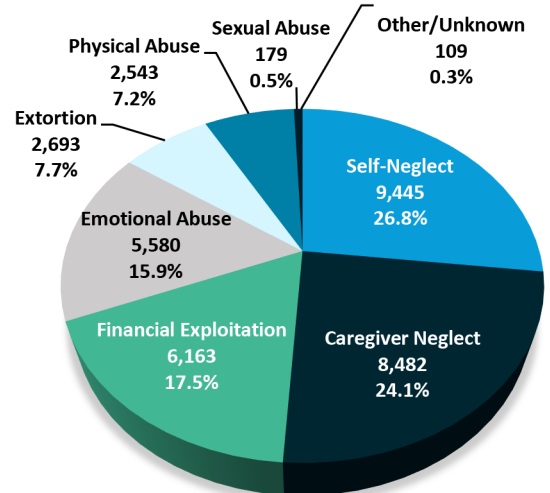
- **EPS may not be receiving all reports of elder abuse and neglect because of limitations in its process for receiving allegations. EPS does not answer calls outside of regular business hours, allow for online reporting, or provide information on reporting options for callers with hearing or speech impairments or language barriers.** According to best practices, adult protective service systems should establish multiple methods for receiving reports of alleged maltreatment 24 hours a day, seven days a week, and should have the capacity to respond to emergencies with trained personnel.

EPS is committed to preserving and protecting the rights of vulnerable elders in need of assistance due to abuse, neglect, self-neglect, and/or exploitation.

Source: EPS Mission Statement

- **EPS has not developed sufficient criteria to help ensure that intake staff make consistent and appropriate eligibility decisions for cases involving financial scams, homeless clients, or cases where locations are provided but client names are unknown. In addition, EPS policy does not require that supervisory review of rejected cases be documented, and not all rejected cases were referred to appropriate entities as required.** During fiscal years 2018 through 2022, EPS rejected 1,948 (7.5%) of the 25,940 total reports received. However, since EPS did not require supervisory reviews of rejected cases to be documented, we could not determine whether EPS conducted the required reviews. In addition, we found that intake staff did not refer 21 (29.6%) of 71 rejected cases to the appropriate entities as required by policy. The exhibit at right summarizes the number and percent of allegation types for the cases accepted by EPS during fiscal years 2018 through 2022.

**Reported Allegation Types  
Fiscal Years 2018 through 2022**

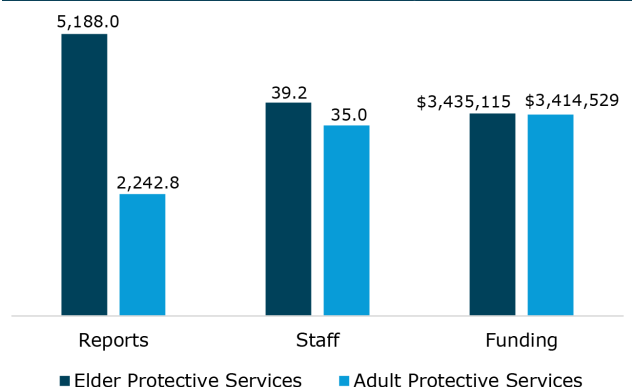


**Note:** EPS cases often involve multiple allegations.  
**Source:** Prepared by legislative auditor's staff using data from the EPSM database

### What We Found (Cont.)

- **While EPS policy provides some guidance on how intake staff should assign response priorities, it should develop clear, detailed guidance on what circumstances may warrant an escalated response priority. In addition, including examples of what constitutes an emergency would help intake staff comply with policy regarding referring clients who need medical attention.** We identified two cases with allegations that suggested that the client needed emergency medical attention but found no evidence that EMS contact was made or even advised by EPS.
- **EPS did not always meet required timeframes when assigning reports of abuse and neglect or investigating and closing cases. For example, due in part to temporary policy changes in response to the COVID-19 pandemic and insufficient staffing, EPS did not assign reports for investigation within the required timeframes in 18 (19.6%) of 92 cases we reviewed during fiscal years 2018 through 2022. In addition, EPS did not contact clients within required timeframes in 39 (42.4%) of 92 cases.** Timely investigations are important to ensure clients receive prompt services to protect against abuse and neglect.
- **EPS policy does not detail investigation procedures for physical abuse and neglect cases that involve client death. As a result, EPS did not always notify coroners when clients died during investigations or follow up on causes of death to determine whether the cases should have been forwarded to law enforcement for further investigation. In addition, unlike other states, Louisiana does not have a specialized team to review suspicious elder fatalities.** During fiscal years 2018 through 2022, at least 1,949 (8.8%) of 22,172 cases closed by EPS involved client death. We reviewed 21 abuse and neglect cases involving client deaths and found that the caseworkers did not notify coroners in any of these cases.
- **EPS did not always develop service plans that addressed each problem identified during case investigations as required by policy. In addition, EPS did not always follow up on service plans to ensure that clients received the services they need.** We found that EPS did not develop service plans that addressed each identified problem in 11 (19.0%) of 58 cases we reviewed during fiscal years 2018 through 2022 as required by policy, and did not develop service plans at all in three (5.2%) cases. Without developing service plans to address each client problem, EPS cannot ensure that clients receive necessary services to protect them from abuse and neglect.
- **EPS faces significant challenges in performing its required duties, including low staffing and funding levels, high caseloads, and an ineffective data system.** As a result of insufficient staffing, EPS caseworkers had an average monthly caseload of 85.6 cases during fiscal years 2018 through 2022, which is higher than those of at least 36 other states. In addition, EPS' current data system does not allow GOEA to effectively monitor for program compliance and performance. While GOEA has been working with OTS to develop a new system, implementation is delayed and it is unclear whether the new system will meet all of EPS' needs. The exhibit compares average report volumes, staffing levels, and budgeted funding amounts for EPS and its counterpart, Adult Protective Services (APS) within the Louisiana Department of Health (LDH).

Comparison of Average Annual Report Volume, Staffing\*, and Funding\* for EPS and APS Fiscal Years 2018 through 2022



\* Budgeted funding amounts do not include temporary funding associated with federal COVID-19 relief.  
Source: Prepared by legislative auditor's staff using information provided by LDH and GOEA