This research summary is part of a series sponsored by the National Adult Protective Services Association (NAPSA) and the National Committee for the Prevention of Elder Abuse (NCPEA) joint Research Committee. The purpose of this research summary is to provide direct access to findings in order to enhance practice and clarify policy choices.

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NATIONAL ADULT PROTECTIVE SERVICES ASSOCIATION
NATIONAL COMMITTEE FOR THE PREVENTION OF ELDER ABUSE
RESEARCH TO PRACTICE BRIEF

TITLE - Assessment of Capacity for Everyday Decision-Making (ACED)

AUTHOR(S) - James M. Lai, Thomas M. Gill, Leo M. Cooney, Elizabeth H. Bradley, Keith A. Hawkins, Jason H. Karlawish

SOURCE - The American Journal of Geriatric Psychiatry, Volume 16, Issue 8, Pages 693-696

SUMMARY OF RESEARCH
The ACED is the first tool available with data supporting its reliability and validity to effectively address a common clinical issue: is a patient who refuses an intervention to help manage an instrumental activity of daily living (IADL) disability capable of making this decision? The ACED is useful for assessing the capacity to solve functional problems of older persons with mild to moderate cognitive impairment from disorders such as Alzheimer’s disease. Common clinical scenarios are the person who has problems performing an IADL, such as cooking, but refuses help to manage that IADL. Is the person capable of refusing this help? The ACED provides patient specific assessments of decisional abilities needed to make that informed refusal. The ACED works well for persons with short term memory impairments since the provided summary sheet can be referred to throughout the interview. The ACED can also help in real-world assessment of a person’s cognitive abilities. It can also inform the assessment of complex cases of the “self-neglect syndrome.” The ACED interview takes 15-20 minutes to administer. At the close of an ACED interview, the interviewer has a set of data that describe the person’s performance on the decision making abilities. A Short Portable version is also available, called the SPACED. Practitioners should be aware that the instrument is designed to guide what is ultimately a clinical interview; hence, practice and judgment are essential. In addition, issues of the client’s literacy and trust in the interviewer can affect how they perform on the interview.

PRACTICE & POLICY IMPLICATIONS
APS staff face a common dilemma: whether to respect an older adult’s choice to continue a potentially harmful activity or to decline an intervention that might reduce that harm, or, instead, to take action. To help to address this dilemma, staff ought to include an assessment of their client’s decisionmaking capacity. The more skilled they are in doing this, they better they can help a client make a decision that respects the client’s autonomy. In addition, they will likely improve the quality of communication with their clients.

FURTHER READING

More Research to Practice Briefs at www.napsa-now.org/r2p