

TITLE - Neuropsychological correlates of performance based functional status in elder Adult Protective Services (APS) referrals for capacity assessments

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SUMMARY OF RESEARCH

Executive function is one's ability to think abstractly and to plan, organize, sequence, monitor and inhibit complex goal-directed tasks. Previous studies have reported that executive function is the cognition that best predicts self-care and decision-making abilities. However, our impression is that few capacity assessments incorporate items presumed to measure executive function. The purpose of this study was to determine, in elderly persons referred by APS for capacity assessments, the relationship between performance-based functional tasks and neuropsychological screening instruments, particularly those thought to measure executive function.

Measures sensitive to memory, visuospatial function, executive function, and general cognition correlated with APS clients' abilities to demonstrate how to manage money and use a telephone. However, in a multivariable model, only executive function as measured by the Executive Interview (EXIT25) independently predicted clients' ability to perform on money management and telephone use tasks.

These findings must be taken in the context of important limitations. First, this sample does not represent all APS clients. Rather it is a subset of cases specifically referred to geriatric psychiatry for capacity assessments. Second, the neuropsychiatric battery consisted only of screening instruments and the functional status battery was limited to two tasks. The nature of these "in the field" capacity assessments mandates that they be limited to ~90 minutes, including interview, neuropsychological testing, and functional status assessment. More extensive assessment may have uncovered more impairment.

PRACTICE & POLICY IMPLICATIONS

Executive function seems to be particularly relevant to APS clients' abilities to perform self-care tasks. Based on the data presented in this article, we can offer some suggestions when considering decisional capacity in APS clients. Our first recommendation is that APS, medical, and legal specialists use executive measures to inform their capacity assessments, particularly in states that emphasize functional impairment in the legal definition for incapacity. Our second recommendation is that specialists not overvalue the relative importance of orientation and memory screens when evaluating capacity. Thirty-nine percent of APS clients passed the general cognitive screen assessing for orientation and 48% passed the memory screen. Practitioners considering only these cognitive domains would have been "blind" to nearly half of the APS clients identified as cognitively impaired by executive function measures.

FURTHER READING

Royall DR, Cordes J, Polk M (1997). Executive control and the comprehension of medical information by elderly retirees. *Experimental Aging Research*, 23:301-313

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