APS Workers Often Walk A Tightrope Between Protecting Client Safety and Client Self-determination

On the one hand...
APS is trained to take action to protect vulnerable adults from danger.

On the other hand...
APS is trained to respect the rights of adults who have capacity to make their own decisions.
Add to the mix: the expectations of others about how APS should handle the case

- Referral source
- Family of client
- Friends of client
- Neighbors
- Community groups
- Public opinion
- Your own agency or other agencies
Even Where a Client is Assessed to Lack Capacity...

There are Still Important Issues to Address as to the Actions APS Should Take to Serve the Client such as:

- least restrictive measures to address safety concerns
- addressing client’s values and preferences)
NAPSA (or APS) Code of Ethics

Guiding Value
• Every action taken by Adult Protective Services must balance the duty to protect the safety of the vulnerable adult with the adult’s right to self-determination.

Secondary Value
• Older persons and persons with disabilities who are victims of mistreatment should be treated with honesty, caring, and respect.
NAPSA (or APS) Code of Ethics

Principles

- Adults have the right to be safe.
- Adults retain all their civil and constitutional rights, i.e., the right to live their lives as they wish, manage their own finances, enter into contracts, marry, etc. unless a court adjudicates otherwise.
- Adults have the right to make decisions that do not conform with societal norms as long as these decisions do not harm others.
- Adults have the right to accept or refuse services.
APS worker practice responsibilities include:

• Recognize that the interests of the adult are the first concern of any intervention.
• Avoid imposing personal values on others.
• Seek informed consent from the adult before providing services.
• Respect the adult’s right to keep personal information confidential.
APS worker practice responsibilities include:

• Recognize individual differences such as cultural, historical and personal values.

• Honor the right of adults to receive information about their choices and options in a form or manner that they can understand.

• To the best of one’s ability, involve the adult as much as possible in developing the service plan.
APS worker practice responsibilities include:

- Focus on case planning that maximizes the vulnerable adult’s independence and choice to the extent possible based on the adult’s capacity.
- Use the least restrictive services first whenever possible—community-based services rather than institutionally-based services.
- Use family and informal support systems first as long as this is in the best interest of the adult.
• Maintain clear and appropriate professional boundaries.
• In the absence of an adult’s expressed wishes, support casework actions that are in the adult’s best interest.
• Use substituted judgment in case planning when historical knowledge of the adult’s values is available.
• Do no harm. Inadequate or inappropriate intervention may be worse than no intervention.
Your Experiences

When have you had to deal with ethical issues?
Applying Ethical Considerations to APS Cases

Vignette 1*
Your Adult Protective Services client wants to remain in her own home, but her daughter wants the client to move in with her. The client is only marginally safe in her home due to a mild cognitive impairment (post-stroke) and balance problems. Should you support your client’s decision or help her daughter convince her to move?

* All vignettes adapted from materials prepared by the National Committee for the Prevention of Elder Abuse
Applying Ethical Considerations to APS Cases

Vignette 2

Neighbors are upset about the condition of your APS client’s home due to hoarding behavior. The home really is a health hazard for the client and the neighborhood, but the client doesn’t want to change. Should you call Code Enforcement knowing that they might condemn the home, leaving your client homeless, depressed and angry with you?
Applying Ethical Considerations to APS Cases

Vignette 3

Your client is an 84 year old man who moved into a trailer in a remote part of a mountainous area when he was 65 years old to get away from the city and become a “rock hound.” He spends his days looking for gem stones and once a week he goes into town to grocery shop, fill his water barrels and propane tank, and catch-up with the news. He has no phone. Recently, he fell and had to drag himself to his truck and drive himself into town to be treated for a fractured hip. Doctors were amazed that he made it to the hospital without losing consciousness. In this situation, you tried to convince your client that his living situation is no longer safe, but he was adamant that he wants to remain in the remote area despite the risks. He does have decision-making capacity per his doctor. What would you do?
Vignette 4
Your client is a 68 years old retired nurse who suffers from COPD and uses oxygen. APS has been called in because she lives in a large apartment complex and she is a cigarette smoker. Neighbors are terrified that she is going to blow-up the building. The building manager is afraid of a fire and your agency management is afraid of liability if she dies in a fire and it becomes known that your agency was involved in the case. The client states that she “isn’t stupid” and she removes her oxygen when smoking. She also says that she already has COPD, so it’s “a little late to give up smoking now.” Despite her decision to keep smoking, she appears to have decision-making capacity. What should you do?
Vignette 5

Your client is a 76 years old woman being threatened with eviction by her landlord because she has eight cats in her apartment, violating her lease agreement. APS found that she is probably clinically depressed. She becomes agitated and overwhelmed every time the idea of finding new homes for the cats is brought up. However, she will be homeless in three weeks if she doesn’t re-home all of the cats. As an APS worker, you need to determine which course of action will do the least harm to the client; being homeless or losing her will to live because her cats are gone. Are there any interventions that would mitigate the harm from either of these actions? What would you do?
Thank you for participating!

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