

## HANDOUT #2

### FACTORS THAT AFFECT DECISION-MAKING

Factors Affecting  
Decision-Making in APS Clients

Screening for  
Decision-Making Ability

An individual’s decision-making ability can be influenced by a number of factors, some of which can change day to day or hour to hour. When screening for decision-making ability, be mindful to identify any of the following factors which could influence a client’s ability to make decisions.

#### Situational Factors

Malnutrition	Protein-energy malnutrition and low levels of vitamin D lead to weakness and diminished ability to provide self-care and ultimately to decreased cognition.
Depression or Anxiety	Anxiety and depression can impact older adults in many ways and can make managing day-to-day issues more difficult. Depression can mimic cognitive impairment.
Grief	Intense grief reaction may result in temporary confusion, dependency, exhaustion and inability to make decisions. Grief can also leave a person susceptible to undue influence, which can impact a client’s ability to make decisions.
Low IQ or Low Health Literacy	May affect patient’s understanding of choices, risks and benefits. Health literacy is the ability to obtain, process, and understand basic health information and services needed to make appropriate health decisions and follow instructions for treatment.
Substance Use	As we age, we metabolize alcohol at faster rates, so consuming even small amounts of alcohol can impact older adults more quickly, and can ultimately lead to malnutrition and neurocognitive impairment due to substance use.



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Medical Factors

Urinary Tract Infection	Most common infection in older adults. They can present as acute change in cognitive status and may result in confusion or delirium.
Chronic Pain	May inhibit the ability to receive and evaluate information due to lack of concentration or attention. Research suggests a relationship between untreated pain and increased depression among the older adults.
Dehydration	Can cause altered mental status, agitation or lethargy, lightheadedness and confusion. Speech difficulty, sunken eyes, weakness and lethargy are often attributed to other conditions. Chronic and acute-medical conditions, malnutrition and severe hot and humid weather can all cause dehydration.
Disease	Thyroid, diabetes, cancer, Parkinson's, heart disease and AIDS may cause diminished capacity as the diseases progress.
Low Blood Pressure	Can be due to medication error, causing dizziness, weakness and falling, which could result in head injury.
Physical Illness	May result in electrolyte imbalances that cause confusion and prevent rational decision-making.
Traumatic Brain Injury	May be the result of physical abuse or a fall. Falls are the most common injury in older adults due to difficulties with ambulation, environmental hazards, dizziness, alcohol, medications, or stroke. A patient with sudden changes in mental status after a fall may have subdural hematoma.
Sensory Deficits (e.g., hearing or vision loss)	Can mimic or exacerbate cognitive impairment. Communication difficulties due to sensory or physical impairments are often mistaken for confusion.
Substance Abuse	Illegal and prescription substance abuse in the APS population can be as much a factor as in the rest of the population.
Medication Mismanagement	Drug interactions and adverse reactions are common and can be serious. May be due to client's visual or cognitive impairment, inability to afford prescriptions, or functional illiteracy. Medication misuse frequently causes mental impairment. Antibiotics and cardiovascular drugs are the most frequent causes of adverse effects.

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Medication-Related Problems

<b>Adverse Reactions</b>	Adverse prescription drug reactions and noncompliance are responsible for 28% of hospitalizations of older adults and 36% of all reported adverse drug reactions involve an older adult.
<b>Medication Interactions</b>	Medications work through absorption (getting into the body), distribution (where it goes in the body), metabolism (how it is handled in the body) and excretion (how it is eliminated from the body). If your client is taking four medications or more, it is likely that there could be serious interactions.
<b>Medication Side-Effects</b>	All medications have side effects—some are minor but some can be very serious.

Conditions Impacting Decision-Making

<b>Neurocognitive Disorders (NCDs)</b>	An umbrella term used to describe a group of conditions that involve a significant, persistent decline in functioning over a period of time. NCDs aren't a specific disease. There are reversible conditions which can mimic neurocognitive disorders, but many NCDs are associated with diseases or medical conditions which involve irreversible damage to the brain. It is important to note that a diagnosis of an NCD does not automatically equate to a loss of decision-making capacity or ability. The symptoms of neurocognitive disorders present on a continuum in terms of deficits and impact.
<b>Delirium</b>	An acute disorder that occurs suddenly and usually fluctuates during the day. Symptoms include changes in the way the patient uses information and makes decisions, inability to focus, and uncharacteristic behavior. The patient reports feeling "mixed up." Delirium is often reversible with treatment. It may be caused by existing cognitive impairment, severe physical illness, stroke, Parkinson's disease, or dehydration, and can be aggravated by acute pain.
<b>Depression</b>	A biological mood disorder that persists for two weeks or more and can be marked by sadness, detachment, loss of interest, sleep disturbances, weight loss, fatigue, difficulty thinking or concentrating, feeling agitated or irritable, suicidal thoughts, and/or trouble doing normal day-to-day activities. Depression is highly treatable.