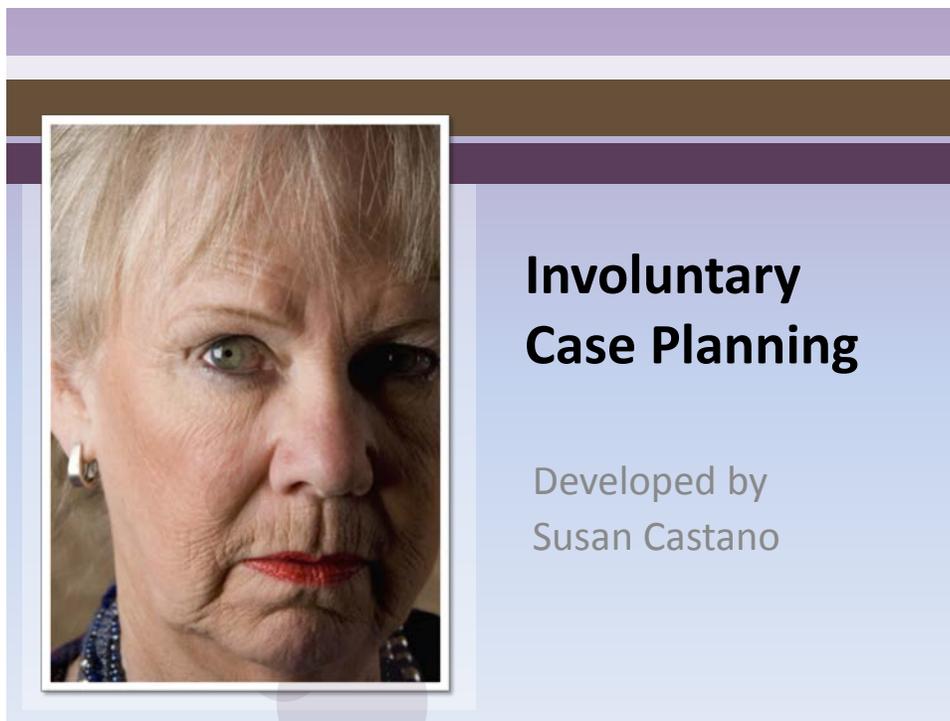


# INVOLUNTARY CASE PLANNING IN ADULT PROTECTIVE SERVICES

## PARTICIPANT MANUAL



### MODULE 20

**PARTICIPANT MANUAL  
INVOLUNTARY CASE PLANNING**



**This training was developed by the Academy for Professional Excellence, which is funded by a generous grant from the Archstone Foundation.**

**Curriculum Developer**

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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## INTRODUCTION

### THE ACADEMY FOR PROFESSIONAL EXCELLENCE

We are pleased to welcome you to the APS Intake Process: Screening and the First Visit Training developed by Project MASTER, a program of the Academy for Professional Excellence and the product of the National APS Training Partnership.

The Academy for Professional Excellence was established in 1996 and provides training, technical assistance, organizational development, research, and evaluation to public and private health and human service agencies and professionals.

The Academy is a project of San Diego State University School of Social Work (founded in 1963), which offers both a bachelor's and master's degree in Social Work. The School of Social Work at San Diego State University was founded in 1963 and has been continuously accredited by the Council of Social Work Education since 1966.

The Academy has extensive experience in providing specialized services, including:

- multi-disciplinary competency-based trainings
- curriculum development
- needs assessment
- research
- evaluation
- meeting facilitation
- organizational development consultation services

MASTER is an Archstone Foundation funded program of the Academy for Professional Excellence which has the overarching goal is to develop standardized core curricula for new APS social workers and to share these trainings on a national scale. Professional training opportunities are a critical step toward ensuring APS social workers have the appropriate tools to serve their victims. MASTER has worked extensively with state and national partner agencies in the development of this curriculum.

Our partners include:

- National Adult Protective Services Association Education Committee (NAPSA)
- The Statewide APS Training Project of the Bay Area Training Academy
- California Department of Social Services, Adult Services Branch
- California State University Sacramento IHSS Training Project
- Protective Services Operations Committee of the California Welfare Director's Association (PSOC)
- California Social Work Education Center Aging Initiative (CalSWEC)

# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## ACKNOWLEDGMENTS

This training is the product of the National APS Training Partnership and is the result of a collaborative effort between Adult Protective Services administrators, supervisors, staff development officers and workers across the state and the nation; professional educators; and the Academy for Professional Excellence staff members. Project MASTER would like to thank the following individuals and agencies:

### Agencies

Bay Area Academy, Statewide APS Training Project  
California Department of Social Services, Adult Services Branch  
California Social Work Education Center Aging Initiative  
Imperial County Department of Social Services  
Orange County Social Services Agency  
Riverside County Department of Public Social Services  
San Bernardino County Department of Aging and Adult Services  
San Diego County Aging and Independence Services

### Regional Curriculum Advisory Committee

Carol Mitchel, APS Manager and PSOC Representative, Orange County  
Beverly Johnson, LCSW, Staff Development Officer, Riverside County  
Carol Castillon, APS Supervisor, San Bernardino County  
Carol Kubota, LCSW, Staff Development Officer, Orange County  
LaTanya Baylis, Staff Development Officer, San Bernardino County  
Ralph Pascaul, Staff Development Officer, Los Angeles County

### Committees

Project MASTER Steering Committee  
APS Core Curriculum Committee  
National Adult Protective Services Association Education Committee  
Protective Services Operations Committee of the California Welfare Directors' Association

### Curriculum Developer/ Consultant

Susan Castaño, Consultant

### Evaluation Consultant

James Coloma, Evaluation Consultant

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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## COURSE OUTLINE

<b>Content</b>	<b>Total Time</b>
<b>Welcome &amp; Introductions: Objectives, Overview of project, housekeeping, Learning Objectives</b>	15 minutes
<b>It's a Free Country, or is it?</b>	15 minutes
<b>Reviewing the Case to determine need for involuntary intervention</b>	55 minutes
<b>BREAK</b>	15 minutes
<b>How Does it Feel?</b>	30 minutes
<b>Ethical Issues in Making the Decision</b>	30 minutes
<b>When Does Safety Trump Self-Determination</b>	15 minutes
<b>LUNCH</b>	1 hour
<b>Who are your Allies?</b>	15 minutes
<b>Using Involuntary Interventions Step by Step</b>	30 minutes
<b>BREAK</b>	15 minutes
<b>Tell it to the Judge</b>	45 minutes
<b>The Case for Creativity</b>	10 minutes
<b>Guest presenter</b>	35 minutes
<b>What we learned and self evaluation</b>	15 minutes

## TRAINING GOALS AND OBJECTIVES



**Involuntary  
Case Planning**

Developed by  
Susan Castano

By the end of this training, participants will be able to:

- Define involuntary services and discuss the case review format for determining when involuntary intervention may be indicated
- Identify those situations where the client's immediate safety takes precedence over the client's right to self determination
- Explore the ethical issues in the worker's decision to use involuntary intervention
- Document information needed to justify the use of involuntary intervention
- Identify the appropriate resources needed to be able to implement an involuntary case plan
- Develop and defend an involuntary intervention plan.

# PRESENTATION



## **Involuntary Case Planning**

Developed by  
Susan Castano

# WELCOME AND INTRODUCTIONS



TIME ALLOTTED: 15 minutes

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## Slide 3

**Evaluation Process**

- All APS Training has 3 evaluation components:

```
graph TD; TLA[Transfer of Learning Activity] <--> SS[Satisfaction Survey]; TLA <--> EE[Embedded Evaluation]; SS <--> EE;
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## Slide 4

**Developing an ID Code**

- What are the first three letters of your mother's *maiden* name? *Alice **Smith***
- What are the first three letters of your mother's *First* name? *Alice **Smith***
- What are the numerals for the DAY you were born? Nov **29**<sup>th</sup>

Trainee ID Code 

S	M	I	A	L	I	2	9
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## INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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January 12, 2012

Dear Training Participant,

As a training program for the Academy for Professional Excellence at San Diego State University School of Social Work, MASTER (*Multi-disciplinary Adult Services Training & Evaluation for Results*) has begun a process of evaluating training delivered to Adult Protective Service workers. As part of this evaluation, we need your help.

At certain points during this training series, in addition to the usual workshop evaluation forms, you will be asked to complete an embedded skills evaluation within the training day. This embedded skills evaluation will take about 15 minutes. You will be asked to determine what types of questions are being asked in a written interview.

This evaluation has two main purposes:

1. To improve trainings' effectiveness and relevance to your needs, and help you better serve adults and their families; and
2. To see if the training has been effective in getting its points across.

**Our goal is to evaluate training, NOT the individuals participating in the training.**

In order to evaluate how well the training is working, we need to link each person's assessment data using a code. You will generate the code number using the first three letters of your mother's maiden name, the first three letters of your mother's first name, and the numerals for the day you were born. **Please put this 8-digit ID code on each of your assessment forms, exactly the same way each time.** ID code information will only be used to link demographic data to test data to ensure that the training is working equally well for all participants. Once this linking is done, we will only be looking at class aggregate scores, rather than individual scores.

Only you will know your ID code refers to you. All individual responses to evaluation exercises are confidential and will only be seen by the Academy's training program and

## INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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evaluation staff. Only group averages and percentages will be reported. Individual results will not be reported to your employer. Aggregate data may be used for future research to improve training for Adult Protective Service workers.

If you agree to participate, you will fill out a questionnaire administered before and after the training. The questionnaire will be coded with a unique identifier system and all responses will be confidential.

There are no foreseeable risks to you from participating. There is also no direct benefit to you. Your responses will contribute to the development of a series of evaluation tools that will be able to accurately assess the effectiveness of adult protective service training. It is hoped that these tools will assist the Academy for Professional Excellence in improving training for adult protective service workers and therefore improve services to adults and families in California.

Your participation is voluntary and you may withdraw your consent and participation at any time. Participation or non-participation will have no effect on your completion of this training series.

By completing and submitting the questionnaire, you agree to participate. You further agree to permit us to use your anonymous responses in written reports about the questionnaires.

Your help with this evaluation process is greatly appreciated. Your feedback will be instrumental in helping to improve adult protective service training for future participants. If you have any questions about the evaluation or how the data you provide will be used, please contact:

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San Diego, CA 92120  
(619) 594-3219  
[jcoloma@projects.sdsu.edu](mailto:jcoloma@projects.sdsu.edu)

# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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Trainee ID Code

Date  /  /   
M M D D Y Y

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## ***MASTER IDENTIFICATION CODE ASSIGNMENT***

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### **YOUR IDENTIFICATION CODE:**

In order for us to track your evaluation responses while maintaining your anonymity, we need to assign you an *identification code*. We would like you to create your own *identification code* by answering the following questions:

1. What are the first three letters of your mother's *maiden* name?  
Example: If your mother's maiden name was Alice Smith, the first three letters would be: **S M I**. If the name has less than three letters, fill in the letters from the left and add 0 (zero) in the remaining space(s) on the right.  
  
\_\_\_\_ \_

2. What are the first three letters of your mother's *First* name?  
Example: If your mother's maiden name was Alice Smith, the first three letters would be: **A L I**. If the name has less than three letters, fill in the letters from the left and add 0 (zero) in the remaining space(s) on the right.  
  
\_\_\_\_ \_

3. What are the numerals for the DAY you were born?  
Example: If you were born on November 29, 1970, the numerals would be **29**. If your birth date is the 1<sup>st</sup> through the 9<sup>th</sup>, please put 0 (zero) in front of the numeral (example **09**).  
  
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Combine these parts to create your own identification code (example: **S M I A L I 29**). Please write your identification code in the space at the top right corner of all evaluation materials you receive.

***Remember your identification code and write it at the top of every evaluation form provided to you throughout this training.***

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MASTER

DEMOGRAPHIC SURVEY

V1.5

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## Slide #5

**Learning Objectives**

- When should you use involuntary interventions?
- When is safety more importance than self determination?
- What are the ethical issues?
- What are involuntary interventions?



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## Slide #6

**It's a Free Country... Or Is It?**



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## Slide #7

**Involuntary Services: A Definition**

- Interventions initiated by APS workers, without consent of affected adult, for the purpose of safeguarding the vulnerable adult at risk of abuse, neglect, or exploitation



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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

## Slide #8

Services are Considered Involuntary

Because:

- Recipient lacks decision making capacity
- There is no authorized representative
- The intervention is court ordered



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## Slide #9

Balancing Capacity with Risk

When risk is high and capacity is low, the APS worker should intervene, even if this means involuntary interventions.



The diagram consists of three circles in a row. The first circle is purple and labeled 'High Risk'. To its right is a plus sign. The second circle is olive green and labeled 'Low Capacity'. To its right is an equals sign. The third circle is light pink and labeled 'Involuntary Intervention'.

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## Slide #10

Examples?



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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

## Slide #11

“When confronted with an adult who lacks the ability to make an informed choice, whose need for help is urgent, and whose suffering will continue unless there is intervention, the role of the APS social worker is to decide whether the provision of protective services is justified in the absence of the adult’s expressed consent to received the essential services.”

*Duke, J. (1997) A National Study of Involuntary Protective Services to Adult Protective Services Clients. JEAN, Vol 9. #1*

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*Duke, J. (1997) A National Study of Involuntary Protective Services to Adult Protective Services Clients. JEAN, Vol 9. #1*

## Slide #12

### Please Remember

- Making the decision to intervene against a person’s will is an AWESOME responsibility
- It requires much deliberation, care, and consideration



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## Slide #13

### Deciding the Need for Involuntary Services

- Known facts
- Social history
- Medical history/conditions
- Mental status
- Perpetrator information
- Previous interventions/actions
- Immediate safety concerns



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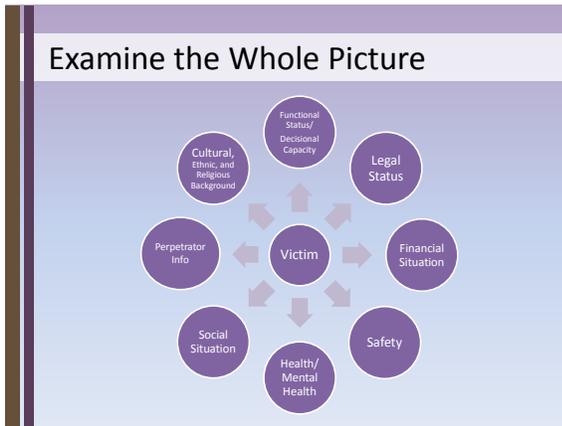
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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

## Slide #14



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## Slide #15

Purpose of Case Review

- Clarify questions
- Fact finding
- Take a step back
- Listen to different perspectives
- Develop potential intervention steps
- Discuss potential consequences of each step



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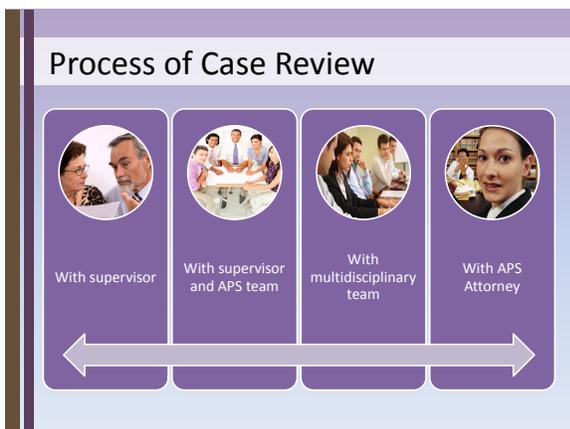
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## Slide #16



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## Slide #17

# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## Step by Step Decision making

- Assess risk
- Assess ability to consent
- Determine urgency
- Do it ethically
- Use least restrictive alternative



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### Slide #18

## Assess Risk

- What is the risk?
- How great is the risk?
- What supports are available?



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### Slide #19

## Assess Risk: Lethality Assessment

- Access to/ownership of guns
- Use of weapon in prior incidents
- Threats with weapons
- Serious injury in prior abusive incidents
- Threats of suicide
- Drug or alcohol abuse
- Forced sex
- Obsessiveness/extreme jealousy or dominance



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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

## Slide #20

**Assess Ability to Consent**

- Capacity
- Undue influence
- Medical condition
- Mental illness: danger to self or others
- Depression/ Learned Helplessness
- Substance Abuse



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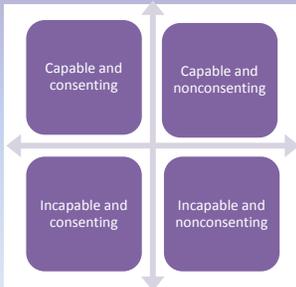
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## Slide #21

**Levels of Consent**

- Levels of consent
- Capacity can fluctuate over time
- Varied reasons for lack of consent



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## Slide #22

**Determine Urgency**

Name situations that may indicate the need for involuntary services



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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## Slide #23

Situations Needing Involuntary Intervention

How would you assess:

- the risk?
- the victim's capacity?
- the urgency?



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## Slide #24

Move Your Butt



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## Slide #25

Addressing Ethical Questions

- Use case review format
- Examine your professional code of ethics
- Look at the ethical principles which may lead to ethical dilemmas



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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## National Adult Protective Services Association (NAPSA)

### Code of Ethics

Adult Protective Services are those services provided to elderly and disabled adults who are in danger of mistreatment or neglect, are unable to protect themselves, and have no one else to assist them.

Interventions provided by Adult Protective Services include, but are not limited to, receiving reports of adult abuse, exploitation or neglect, investigating these reports, case planning, monitoring and evaluation. In addition to casework services, Adult Protection may provide or arrange for the provision of medical, social, economic, legal, housing, law enforcement or other protective, emergency supportive services.

***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 people and people with disabilities who are victims of abuse, exploitation or neglect should be treated with honesty, caring and respect.***

### Principles

- Adults have the right to life.
- Adults retain all their civil and constitutional rights unless some of those rights have been restricted by court action.
- Adults have the right to make decisions that do not conform with societal norms as long as these decisions do not harm others.
- Adults are presumed to have decision making capacity unless a court adjudicates otherwise.
- Adults have the right to accept or refuse services.

### Practice Guidelines

- 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.
- Recognize individual differences such as cultural, historical and personal values.
- Adults have the right to receive information about their choices and options in a form or manner that they can understand.
- To the best of your ability, involve the adult as much as possible in developing the service plan.
- Focus on case planning that maximizes the vulnerable adult's independence and choice to the extent possible based on the adult's capacity.

# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## National Adult Protective Services Association (NAPSA)

### Code of Ethics

(continued)

#### Practice Guidelines

- Use the least restrictive services first—community based services rather than institutionally based services whenever possible.
- 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, casework actions should support that which is 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.

# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

## Slide #26

### Weighing the Options

“Failure to intervene may results in injury, decline, financial loss, or even death. Workers and agencies may be accused of negligence or incompetence.

On the other hand, when workers initiate involuntary protective interventions, they may be accused of paternalism or authoritarianism.”

*Nerenberg, L (2008)*

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## Slide #27

### What influences our decision-making?



Client wishes

Professional Obligations

Personal Values

Community Pressure

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## Slide #28

### Competing and Conflicting Principles



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**Slide #29**

**Beware**

- Dogmatism
- Rationalizations
- Passivity
- Passion
- Arrogance



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**Slide #30**

**Ethical Decisions**

- Honor preferences victim has expressed before incapacity
- Use substituted judgment
- Use "best interest"
- Allow for exchange of views
- Use ethics committees if available



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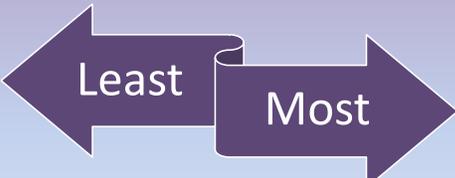
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**Slide #31**

**Use Least Restrictive Alternatives**



- Home care to nursing home continuum
- Informal money management to guardianship of estate continuum
- Limited and specified guardianships

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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## Slide #32

**Final Considerations**

- + To what extent are clients able to exercise autonomy? How can this ability be maximized?
- + Have those with diminished capacity expressed their wishes in the past? Are their wishes known?
- + Are there less restrictive alternatives? What are the benefits and risks of each?
- + Are there ethical conflicts?

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= **THE BOTTOM LINE**

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## Slide #33

**Too Far or Not Far Enough?**



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### Too Far or Not Far Enough?

1. Client lives in an apartment which is full of clutter and collectables. There is a path from the bedroom to the kitchen. Client is frail and has fallen a few times. Client says all the items in the apartment have sentimental value and he does not want to throw anything out. You call the Mental Health Screeners and ask to have him evaluated.
2. Client is bedbound and dependent on her daughter for care. Her daughter has substance abuse problem and has not been providing supervision and meals. Client is losing weight and seems a little fearful of her daughter but doesn't want you to do anything about the situation. You do a mini mental and client scores 27 points. You leave and close the case, since client has capacity.
3. Client is an 89 year old man who has been a widower for 25 years. He recently met a 32 year old woman and has fallen in love. He informs his adult children that he will marry this woman. He has changed his will, leaving all his substantial assets to her. The children inform APS and the worker puts a freeze on client's bank account.

**LUNCH**

# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

## Slide #34

**Involuntary Interventions Include**

- Mental health hold
- Emergency hospitalization
- Home cleanup
- Gaining access to victim
- Freeze bank accounts
- Conservatorship



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## Slide #35

**We Can't Do It Alone**



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## Slide #36

**Who do you need? Who do you call?**

- What do you want to happen?
- Which agency/entity can make that happen?
- Who is the best contact person?
- What can that agency do: legal mandate or responsibility
- What is the agency NOT able to do: limitations
- What is the inside scoop?



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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## Slide #37

**Proving the Need for Intervention**

- Understand the legal process
- Determine who else should be involved
- Evaluate the social consequences
- Gather the evidence
- Document clearly



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## Slide #38

**Understand the Legal Process**

- What are the statutes governing this action?
- Has a crime been committed?
- What are the legal consequences to the victim?
- What are the legal consequences to the perpetrator?
- Does the action meet legal standards?



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## Slide #39

**Who Else Should be Involved?**

- Who are your partners/Who can help you reach your goal?
- Respond to the challenges
- Learn their language



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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## Learning the Language

### Helpful Hints to Access the Help of other Agencies/Disciplines

#### Mental Health

- Educate yourself on the legal mandates, responsibilities and limitations of the agency
- Approach with an open mind rather than being set on a particular outcome
- Provide a baseline by describing:
  - Client's typical behavior and how current behavior differs from it
  - Changes in sleep pattern, appetite, activity level, mood, or behavior
- Review factors leading up to the problem and inform them of any factors that might be relevant
- Inform them of any medical problems and all medications, including dose and frequency
- Find out if there is a family history of mental illness or previous diagnosis of mental illness

#### Law Enforcement

- Understand the laws, what the officer is mandated to do, what the officer cannot do
- Focus on the facts, avoid gray areas
- Gather documentation which would support the case
- Discuss crimes and penal code violations, not social problems

#### EMT

- Provide all medical and medication history that is available to you
- If client is resistant or fearful of hospitalization, use your social work skills to find out what the source of the fear is. Was it a previous negative experience or perhaps a feeling of shame due to her present hygiene? Validating client's feelings and understanding the resistance may help you eliminate the barriers.

#### Financial Institution

- Understand your state statutes regarding fraud and financial exploitation
- Provide the institution with your suspicions and reason for investigation.
- Provide documentation if available.

# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

## Slide #40

**Evaluate the Social Consequences**

- What will happen to client/victim?
- What will happen to perpetrator?
- What will be the effect on family members?
- How will you respond to the larger community?



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## Slide #41

**Gather the Evidence**

- Focus on observable facts
  - Who
  - What
  - Where
  - When
  - How
- Obtain supporting information from reliable sources



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## Slide #42

**Document Clearly**

- Facts
  - Medical records
  - Hospital records
  - Bank records
- Observations
  - Affidavits
  - Utility shut-off
  - Eviction/foreclosure
- Dates
- Collateral information: quotes
- Collateral documentation



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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## Slide #43

**Remember**

- Make sure your interventions are ethical
- Make sure you use the least restrictive alternative
- Case planning must be flexible, changing when circumstances change



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## Slide #44

**Tell It to the Judge**

- Mental health hold
- Emergency hospitalization
- Home cleanup
- Gaining access to victim
- Freeze bank accounts
- Conservatorship



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## Slide #45

- Groups: prepare your cases
- Judges: prepare your questions

- Groups: present your cases
- Judges: ask your questions and make a decision



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# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## TELL IT TO THE JUDGE ACTIVITY

Case #1: Mary Jones, age 90 – Guardianship/conservatorship

The Basics: Client wandering, inappropriately dressed, no interested family, no supervision, leaving stove on, refusing to accept help, losing weight, house in disrepair, bills not paid, bruises from falling.

Case #2: Liliana Rodriguez, age 74 – Domestic Violence

The Basics: Victim diabetic, right leg amputee, dependent on spouse, fearful of intervention, refusing to leave her home or to file a restraining order. Long history of domestic violence. Spouse recently drinking more heavily, expecting victim to provide for his needs, pushed victim off wheelchair.

Case #3: Mathew Borosky, age 80 – Freeze bank account

The basics: Victim owns home and has assets, limited mobility, legally blind, dependent on live in aide. Live-in refuses to allow calls or visits, recently purchased a new BMW, uses victim's ATM card for groceries. 4 recent withdrawals of \$200 each.

Case #4: Soon Lee Park, age 64- Mental Health hold

The basics: Client has M.S. and slurs speech, believes neighbors want to kill him, taped windows shut in summer, says there are evil spirits in the air conditioner, mental health history

Case #5: Gertrude Rosenberg, age 76 – Emergency Medical

The basics: Lives alone, losing weight, taking antibiotics, suddenly incoherent with disorganized thinking, in and out of consciousness.

Case #6: Barbara Smithers, age 82 – Access to client for evaluation

The basics: Victim reportedly bedbound and neglected, lives with mentally unstable daughter/caregiver, refuses to allow APS worker into the home to interview client.

# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## TELL IT TO THE JUDGE WORKSHEET

Read the case vignette and discuss the basic information you are given. Build a case for the involuntary intervention **adding** your own actions, evidence and documentation to support it.

Involuntary Intervention Needed:

Reason:

Case:

- *The actions you have already tried and the results of those actions*
- *Any documentation to support your case*
- *Evidence that the intervention you are requesting is the least restrictive alternative and is both ethical and legal*
- *Your assessment of the consequences of action or inaction*
- *Your follow up plan*

# INVOLUNTARY CASE PLANNING- PARTICIPANT MANUAL

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## Slide #46

**Be Creative**

- Negotiate consent
- Be flexible
- Offer choices
- Use salesmanship
- Use your "self"
- Think outside the box



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## Slide #47



Understanding all the factors that may impede rational choice is complex and requires highly sophisticated and critical thinking. Professionals working with the elderly and APS workers must procure on-going training, consultation and supervision, and participate in collaborative activities regarding the principle of self-determination and the duty-to-protect abused elders. In answering the question: "Do we know enough?" ....we do not. The next question is "Are we willing to learn?"

*L. Rene Bergeron (2006)*

Understanding all the factors that may impede rational choice is complex and requires highly sophisticated and critical thinking. Professionals working with the elderly and APS workers must procure on-going training, consultation and supervision, and participate in collaborative activities regarding the principle of self-determination and the duty-to-protect abused elders. In answering the question: "Do we know enough?" ....we do not. The next question is "Are we willing to learn?"

*L. Rene Bergeron (2006)*

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