

An aerial photograph of a historic city, likely Lisbon, Portugal. The foreground and middle ground are filled with dense, multi-story buildings featuring terracotta-tiled roofs. In the background, a large, white, multi-story building with many windows sits atop a hill. A prominent dome is visible in the distance. The sky is a deep blue with some light clouds. The overall scene is a high-angle, wide shot of a historic urban landscape.

Home Visit Primer

Alison Bort, JD, PhD
PSRB Executive Director
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Disclaimer



- Today's presentation does not provide guidance or directive with respect to safety measures that may be required to conduct a home visit.
- Home visit protocols and safety measures should be established by your organization leadership.
- Recommendations provided today that conflict with your organizations policies and procedures should not be followed unless and until discussed with your supervisor/leadership team.

PSRB Mission

The Psychiatric Security Review Board's mission is to **protect the public** by working with partnering agencies to ensure persons under its jurisdiction receive the necessary services and support to reduce the risk of future dangerous behavior using recognized principles of risk assessment, victims' interest and person-centered care.

We define public safety in terms of the PSRB's ability to enhance the health, well-being, and re-connection of the individuals under our jurisdiction with their natural supports and communities.

GOALS of our Problem- Solving Court

Mitigate Future Risk of

Recidivism

Relapse

Re-hospitalization

Revocation

Risk-Needs-Responsivity Model

A theoretical framework used to strengthen forensic case formulations, target treatment needs, enhance continuity of care and improve decision-making.



Public Safety Through Monitoring, Supervision, and Treatment

Treatment & Supports

- Medication management
- Individual/group therapy
- Specialty tx (MAT, DBT, SO)
- SUD tx and self-help
- Peer support
- Skills training
- Community connection
- Housing
- Public Benefits
- Cultural service connections
- Supported Employment/Edu.
- Money Management

Monitoring & Supervision

- No contact with victim(s)
- Level system
- Medication oversight/supervision
- Driving/Travel limitations
- Payee Assigned
- Random, observed UA's
- See our "Special Conditions" Handbook
- [Home Visits](#)

PSRB Oversight

- Immediate consultation with case managers during crises;
- Access to LEDS terminal;
- Monthly Progress Reports/ Incident Reports;
- Review and approve all modifications to conditional release plans;
- Revocation Authority—to local and state hospital

Home Visit Goals

Activities of Daily Living

Instrumental Activities of Daily Living

Medication compliance (an iADL)

Other Conditions

Activities of Daily Living

Walking, or otherwise getting around the home or outside. The technical term for this is “ambulating.”

Feeding, as in being able to get food from a plate into one’s mouth.

Dressing and grooming, as in selecting clothes, putting them on, and adequately managing one’s personal appearance.

Toileting, which means getting to and from the toilet, using it appropriately, and cleaning oneself.

Bathing, which means washing one’s face and body in the bath or shower.

Transferring, which means being able to move from one body position to another. This includes being able to move from a bed to a chair, or into a wheelchair. This can also include the ability to stand up from a bed or chair in order to grasp a walker or other assistive device.

Instrumental Activities of Daily Living



Manage finances: paying bills and managing financial assets.



Manage transportation: either via driving or by organizing other means of transport.



Shopping and meal preparation: This covers everything required to get a meal on the table. It also covers shopping for clothing and other items required for daily life.



Housecleaning and home maintenance: This means cleaning kitchens after eating, keeping one's living space reasonably clean and tidy, and keeping up with home maintenance.



Manage communication: telephone, mail, email, text.



Manage medications: which covers obtaining medications and taking them as directed.

Medication Self- Administration

- Medication issues that can lead to step-ups/revocations
 - Significant change in medications
 - Disorganization/mental health interfering with taking medication consistently
 - Purposeful changes in medications
 - Experimenting (Fear, Mistrust, Dependence, Weight)
 - Financial
 - Anosognosia
- Review your exhibit file—is medication compliance of any type a historical risk factor?

How are you
tracking
medication
compliance
for those who
self-
administer
medication?

Medication administration record

Calendar

Use of bubble packs

Automatic pill dispenser

Counting medication in bottles (not recommended)

Blood draws

Observation

Other Conditions

Alcohol or other drugs/ paraphernalia

Presence of others living in the home

Caretaking of pets

Computer use

Incendiary devices

Environmental safety

Lease violations (smoking in home)

Other Problems & Recommendations

Inconsistency among case monitors providing home visits.

- Develop a home visit policy/checklist

Clients not sure what to expect during a home visit.

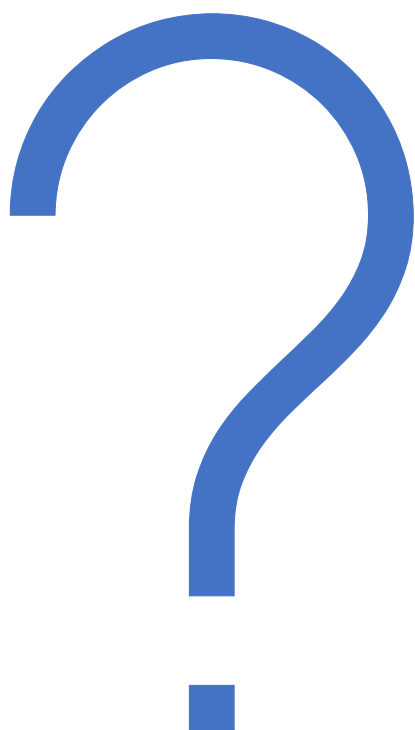
- Develop a fact sheet, review the home visit protocol prior to a client transitioning to an independent level of care

Access to home visits

- Ensure case monitor will have access to the building (FOBs)

Technology barriers to home visits

- Consider using video conferencing
- Have client email MAR



Questions?