

Psychiatric Security Review Board

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Psychiatric Security Review Board Modification Request Resources

Roommate Checklist

This checklist was developed to assist <u>community case monitors</u> working with individuals under the jurisdiction of the Psychiatric Security Review Board (PSRB) in developing a modification request to allow the person to reside with one or more other individuals at an independent level of care.

As clients progress to independent levels of care, they may request to reside with family, friends, an intimate partner or some other roommate living situation. In such cases, modification requests should not only assess the risks and clinical benefits associated with changing to a lower level of care, but also the risks and benefits associated with the proposed shared living arrangement and roommate(s). The below list provides an array of considerations to address and integrate into the modification request. This analysis serves as the basis of your proposed conditional release plan, which would include any special conditions deemed necessary to mitigate the risks you identified in your analysis and help the client thrive.

- ✓ Provide an objective history of the client's positive and negative experiences with shared living at various levels of care.
- ✓ Identify any risk factors associated with past interpersonal violence, conflict, trauma, or other challenges with interpersonal relationships.
- ✓ Describe client's strengths with respect to interpersonal effectiveness, conflict resolution, and other relevant social skills.
- ✓ Discuss the history and nature of the relationship between the client and the prospective roommate(s).
- ✓ To the greatest extent possible, assess for strengths and concerns associated with the proposed roommate that could support or destabilize the client (e.g., roommate is in recovery, has shared interests, on probation).
- ✓ Meet with the prospective roommate to confirm that the roommate is aware of the client's PSRB legal status, including the instant offense and terms of the client's conditions of release. This includes their acknowledgment and agreement to conditions including that the client cannot possess cannabis, alcohol, illegal, or non-prescribed substances; that the client cannot have guns or other weapons in the household; that the client has must

- receive permission from the treatment team when the roommate has an overnight guest; and that the client may be subject to random home visits by the treatment team.
- ✓ Meet with the prospective roommate to share early warning signs that indicate that the roommate might be in danger and/or that the client may need support. Clarify what the roommate would be expected to do if the client was in crisis or seriously violated their conditional release plan.
- ✓ Address the terms of the lease/rental agreement, including whether the client's name will be on the lease and the client's responsibility to pay rent.
- ✓ Propose a contingency plan should the roommate arrangement be unsuccessful, specifically to avoid a revocation. For example, address whether the client would have to move out and where would they go or whether the roommate would have to move, could the client afford the full rent.
- ✓ Within 90 days of the date of Modification Request, administer a START and integrate relevant results into the modification request. Submit copy of START with Modification Request.
- ✓ If minors are involved in the proposed living situation, additional details will be required.

Remember, this is a guide to assist you in developing your modification request. Please do not submit this document as your request, but rather integrate your responses into the modification request form. In addition, don't limit your analysis to these recommendations. Case monitors are encouraged to critically consider additional information or individualized factors that will further support this modification request.

If you have questions or need assistance with this analysis, please contact your PSRB case monitor, email <u>psrb@psrb.oregon.gov</u>, or call 503-229-5596.