Empathy, Empowerment, & Engagement
Clearing Paths for Collaborative Resolutions

I'm
-depressed, sad, hurt, confused,
tolonged, unloved, judged,
-misunderstood, insignificant,
-broken, dying, insi

Fine.

Marnie McDonald, MSW, LCSW
Ned Kittredge - Professional Profiles, Inc.
What is Empathy?

em·pa·thy (noun)

the ability to understand
and share the feelings of another

The Healing Power of Empathy – ‘the care effect’

Harvard Medical School’s Program in Placebo Studies and the Therapeutic Encounter
Why is Empathy Important?

“I've learned that
people will forget what you said,
people will forget what you did,
but people will NEVER forget
how you made them feel.”

- Maya Angelou
Results of Empathic Approach

REVEAL

LISTEN

Understanding
What is Empowerment?

...empowerment is the flip side of helplessness.

- Joss Whedon

Characterized by its positive and optimistic view of people confronted by life's challenges.

Focusing on client strengths provides the fuel and energy for that empowerment.

Miley et al, (2004:91)

(http://www.bemidjistate.edu/academics/publications/social_work_journal/issue14/articles/rankin.htm)
Why is Empowerment Important?

The result of empowerment is that the person believes they have new choices they didn’t have before or a new freedom they haven’t experienced before. Of course, formally, they always had these choices, but they didn’t see that they had them. *Empowerment is the seeing.*

([http://www.mediate.com/articles/oReardonD3.cfm](http://www.mediate.com/articles/oReardonD3.cfm))

increases self-confidence, courage, & motivation giving individual opportunity to become a stakeholder in their own treatment
Result of Empowerment

• Skills
• Resources
• Opportunity
• Motivation
• Accountability
Engagement

ENGAGEMENT OF THE INDIVIDUAL

• Empathy and empowerment work together to engage the individual as an integral part of the team approach.
ENGAGEMENT OF THE COMMUNITY

• An effective community approach brings together clients and professionals with differing perspectives and expertise, a team that understands their individual roles and how the roles of others can be utilized to complement the process.

• Professional Profiles, Inc. developed a client-centered approach to handling hoarding cases that is an integral part of our collaborative planning and case resolutions. Their highly effective system involves development of reasonable and attainable goals and effective communication to team members.
Collaborative Planning for Resolutions

• A simple set of universal tools able to be used in a multitude of settings by a wide range of users

• They allow for specific, objective, and coordinated assessment and planning while providing reasonable and measurable outcomes, ensuring all involved parties, including the client, have clear and consistent expectations and guidelines.
Benefit of Uniform Assessment Tools

• Eliminates guesswork
• Creates a common language based on objectivity
• Standardizes and simplifies process
• Helps develop the road map
Assessment Tools

• Clutter Image Rating
  – Assessing ‘volume’
  http://www.ocfoundation.org/hoarding/cir.pdf

• H.O.M.E.S. – Multi-disciplinary Hoarding Risk Assessment
  – Assessing risk
  http://www.masshousing.com/hoarding

• Uniform Inspection Checklist – Hoarding / Excessive Clutter
  – Minimum safety and sanitation standards
  http://www.masshousing.com/hoarding
Clutter Image Rating: Bedroom

Please select the photo that most accurately reflects the amount of clutter in your room.

1  2  3
4  5  6
7  8  9
**RESIDENT:**
The purpose of inspection is to ensure housing is decent, safe, sanitary, and in good repair. Inspector must be able to view, reach, and test all items on inspection checklist.

**INSPECTOR:**
Please be mindful of the distinction between hazardous vs. housekeeping. Please record comments and/or deficiencies in specifics. Please rate each room using both the Priority Scale and the Clutter Image Rating Scale.

**START HERE**

### STEP 1: HARM REDUCTION TARGETS
The following items must be **UNOBSTRUCTED**: 
~completely clear of any items~

- * Egresses - means of exit
- * Minimum of 36" pathways throughout residence
- * Smoke detectors, CO detectors, & sprinkler heads (all that apply)
- * All doors: including closet, cabinet, pantry, etc. (inspector must be able to open & close all doors freely, & be able to latch if applicable)
- * Minimum of one unobstructed window in living room & each bedroom for emergency exit
- * Toilets, stoves, ovens, refrigerator, washing machine/dryer, open flame heat sources, fireplaces, water unit, a/c, heat thermostats, trash containers
- * Emergency pull cords - end of cord must be no more than 18" from the floor (if applicable)

### STEP 2: GENERAL SAFETY & INSPECTION TARGETS
The following items must be **ACCESSIBLE**: 
~easily able to be reached by inspector~

- * Electrical panel/outlets
- * Windows (any not included on unobstructed list)
- * All plumbing fixtures & pipes, including plumbing under all sinks
- * All heat sources
- * Sinks, bathtubs, & showers

### 1. Living Room

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Pass (X)</th>
<th>Fail (X)</th>
<th>Inconclusive (X)</th>
<th>Priority Scale (mark with X, date, or status)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Electrical outlets accessible</td>
<td></td>
<td></td>
<td></td>
<td>Immediate</td>
</tr>
<tr>
<td>1.2</td>
<td>Free of electrical hazards</td>
<td></td>
<td></td>
<td></td>
<td>30 day +</td>
</tr>
<tr>
<td>1.3</td>
<td>Windows must be accessible with a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>minimum of 1 unobstructed window for</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Importance of Planning

• Role preparation
• Collaborative goal formation
• Set reasonable expectations
• Provides structure
• Provides guidelines / map to resolution
• Establish objective, reasonable, and measurable goals
• Accountability for all team members
Planning Tools

• **Uniform Inspection Checklist** – Hoarding / Excessive Clutter (UIC)
  - minimum safety and sanitation standards
  Quick Reference – residents/team members

• **Informed Consent**
  - determine who is on the team

• **Collaborative Agreement**
  - define and specify roles and responsibilities
## Uniform Inspection Checklist - Quick Reference

**RESIDENT:** The purpose of inspection is to ensure housing is decent, safe, sanitary, & in good repair. Inspector must be able to view, reach, and test all items on inspection checklist.

### The following items must be **UNOBUSTRUCED**
~ completely clear of any items ~

<table>
<thead>
<tr>
<th>Egresses - means of exit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum of 36&quot; wide clear pathways throughout residence</td>
</tr>
</tbody>
</table>

Smoke detectors, CO detectors, & sprinkler heads  (*all that apply*)

All doors: including entry & exit, closet, cabinet, pantry, etc. (inspector must be able to open & close doors fully & freely, & be able to latch if applicable)

Minimum of 1 unobstructed window in living room & each bedroom for emergency exit

Toilets, stoves, ovens, refrigerator, washing machine/dryer, open flame heat sources, fireplaces, water heater, a/c, heat thermostats, trash containers

Emergency pull cords - end of cord must be no more than 18" from the floor (*if applicable*)

### The following items must be **ACCESSIBLE**
~ easily able to be reached by inspector ~

<table>
<thead>
<tr>
<th>Windows</th>
</tr>
</thead>
<tbody>
<tr>
<td>Electrical panel(s) &amp; electrical outlets</td>
</tr>
<tr>
<td>All heat sources</td>
</tr>
<tr>
<td>All plumbing fixtures &amp; pipes, including plumbing under all sinks</td>
</tr>
<tr>
<td>Sinks, bathtubs, &amp; showers</td>
</tr>
</tbody>
</table>

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**THE FOLLOWING CHECKLIST PROVIDES A GUIDE FOR ADDRESSING GENERAL HEALTH AND SAFETY.**

| Sinks must function and show routine use & care |
| Kitchen area must have a clear & clean space sufficient for food preparation |
INFORMED CONSENT TO RELEASE OF INFORMATION

I understand that in signing this form I am agreeing to accept the support and intervention of the ________________________________ (agency name) to address my particular needs.

______________________________ (agency name) has my permission to discuss my situation with the following agencies and individuals and to gather relevant information from them about me.

I understand that the agency will take care to protect my dignity and privacy when reviewing information with the agencies and individuals listed.

This authorization shall remain valid up to six months from the date of signature. This signed authorization can be withdrawn at any time, unless the agency has already received information that has been requested.

<table>
<thead>
<tr>
<th>Agency/Individual</th>
<th>Relationship</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
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<tr>
<td>3</td>
<td></td>
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<tr>
<td>4</td>
<td></td>
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<tr>
<td>5</td>
<td></td>
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</tbody>
</table>
# COLLABORATIVE AGREEMENT

The intent of this contract is to collaboratively establish and agree upon clear goals and objectives for the purpose of resolving safety and/or sanitation concerns that may be jeopardizing housing. All goals put forth on this contract must be **Specific, Measurable, Attainable, Relevant**, and **Time-bound**. By signing this agreement, all team members are stating that they understand their role and agree to participate fully in accordance to that role throughout the process. Additionally, there is an understanding that based on assessments and inspections that take place throughout the process, goals and objectives may be adjusted with the involvement of all team members.

**Team Members** *(it is recommended that the number of team members be kept to a minimum, only including those that have an absolute role in the process and outcome of the case.)*

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
<th>Phone Number</th>
<th>email address</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>RESIDENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>RESIDENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>PSW</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Prof. Organizer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>CM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Heavy Chore</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Clinician/Team Leader</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>BOH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Plan Narrative

In order to best support the achievement of the above listed goals in a reasonable and timely manner the following services will be put in place as of Wednesday, 09/03/2014: Professional Organizer, KK, will visit on a bi-weekly basis for 3 hrs./visit. Her primary role is to address sorting, organization, and maintenance of target areas. Professional Profiles will visit on a bi-weekly basis, alternating weeks with KK, for 2 hrs./visit. Their primary role is to address harm reduction targets listed, assist in removal of items from home, clean cleared areas as necessary, and other heavy chore tasks that emerge. BOH, will perform scheduled monthly inspections with a team member to track and assess progress towards goals. BOH will provide information and feedback to team when necessary regarding specific BOH code deficiencies that the team is working to rectify. MM, LCSW, will visit on a bi-weekly basis for 1 hr. for therapeutic support, counseling, and skills and strategies training. MM will also serve as team leader, facilitating team communication and monitoring team progress. All service providers will complete the Client Visit Report after each visit and send it to MM via fax or email. XXXX Elder Services will schedule care for parents during visits to assure residents are given the best opportunity to focus, participate fully, and succeed. They will also continue a service plan once the case with BOH is closed, through a case manager, that will support the maintenance of attained goals and decrease the chances of recidivism. All service providers understand that failure to fulfill their roles as agreed upon, for reasons other than resident non-compliance, may jeopardize the residents ability to meet the stated goals. XXXX and XXXX, residents, will be present and permit other team members to enter home for all scheduled visits. Their role is to participate fully, working together with other team members in all activities during visits in a mutual effort to reach stated goals. Additionally, they will work to maintain progress between visits. XXXX and XXXX understand that the failure to fulfill their roles as agreed upon may result in continued BOH involvement that may further jeopardize their housing. Team meetings will be called on an as needed basis to assess progress and goals and address any issues that may emerge. Current dates on Priority Scale reflect a 4 month initial goal of completion with a contingency of 2 months to accommodate for re-assessments, goal adjustments, and new issues that may emerge. Dates subject to change based on each inspection result including initial inspection. All team members will be notified of any proposed date changes and will meet if necessary to discuss such changes. All concerns and scheduling issues will be addressed to MM.

Assessment / Inspection Tools

Document Name

Purpose for Use
Level of Insight

**Good or fair insight:** Recognizes that hoarding-related beliefs and behaviors (pertaining to difficulty discarding items, clutter, or excessive acquisition) are problematic.

**Poor insight:** Mostly convinced that hoarding-related beliefs and behaviors (pertaining to difficulty discarding items, clutter, or excessive acquisition) are not problematic despite evidence to the contrary.

**Delusional:** Completely convinced that hoarding-related beliefs and behaviors (pertaining to difficulty discarding items, clutter, or excessive acquisition) are not problematic despite evidence to the contrary.
Harm Reduction
The primary goal is for safety and functionality of the living conditions and living space to be achieved in accordance with the team’s standards and goals.

• Have a conversation about safety hazards such as access for emergency services.
• Discuss the consequences of not meeting safety standards (ex: BOH involvement, eviction, court proceedings.)
• Offer assistance in creating a safe environment (this may not include discarding items) The primary goal is for safety and comfort of the living conditions and living space to be achieved in accordance with the individuals standards and goals.
Goal Assessment and Review

• Evaluate progress
• Demonstrate success
• Re-adjust goals
• Assess roles
Tools for Resolution

• UIC
• Collaborative Agreement
• Client Visit Report
• Weekly Goals
• Addendum to Collaborative Contract
Client's ability to participate in activities: *(if ability to participate changed during visit, mark all that apply)*

<table>
<thead>
<tr>
<th></th>
<th>Unable to participate</th>
<th>Struggled to participate</th>
<th>Able to participate</th>
</tr>
</thead>
</table>

Comments:

Client's ability to emotionally tolerate activities: *(if ability to tolerate changed during visit, mark all that apply)*

<table>
<thead>
<tr>
<th></th>
<th>Unable to tolerate</th>
<th>Struggled to tolerate</th>
<th>Able to tolerate</th>
</tr>
</thead>
</table>

Comments:

List agreed upon goals for next visit. *(Must be brief, specific, reasonable, and attainable.)*

1. 
2. 
3. 

Supervisor/Team Leader Signature: 

Date:
TIME: ____________________

SERVICE PROVIDER AT NEXT APPOINTMENT: ____________________

AGREED UPON GOALS FOR NEXT VISIT.
(MUST BE BRIEF, SPECIFIC, REASONABLE, AND ATTAINABLE)

1. __________________________________

2. __________________________________

3. __________________________________

_________________________________  __________________________
CLIENT SIGNATURE                SERVICE PROVIDER SIGNATURE

Peer Support Team Member: _________  Phone # or email: ____________________
Result of Collaborative Work

Individual

Community