

## **Escorted community day leaves of forensic patients and its contribution to successful community reentry**

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### Introduction

Successful reentry of patients residing in secure forensic settings is reliant on staff escorted community day leaves that are part of the overall rehabilitation program. However, little is known about how they can and do contribute to successful community re-entry, nor why this is so.

### Objectives

The aim of this study was to investigate the structure and function of community day leaves for forensic patients, from staff and patient perspectives, to understand its contribution to successful community re-entry and recovery from mental illness.

### Methods

The participants in this qualitative study included patients with a severe mental illness with a forensic patient legal status, residing in a secure hospital, as well as the staff member accompanying the patient on a community day leave. Observation of ten day leaves using the Model of Human Occupation Screening Tool (Parkinson, 2006) provided information on the types of skills utilised by the patients as well as the level of support received by the staff members and others in the community. Semi-structured interviews of up to one hour separately, with both the patient and the staff member, were completed following the leave. Patients were asked about their experience of community day leaves. Staff members were asked about their contribution to achieving the rehabilitation aims and their clinical reasoning used on the leave.

### Results

The findings indicate that although community day leaves can contribute significantly to the rehabilitation process, this is not always achieved in part due to the lack planning and understanding of the staff member's role in facilitating the development of community skills and social participation of the patient on the leave.

### Conclusion

The paper will conclude by discussing how these findings contribute to guidelines for undertaking community day leaves in mental health services. The findings from this study add to the evidence supporting occupational therapy practices in secure settings as well as having broad implications for mental health community-based rehabilitation.

Parkinson, S., Forsyth, K., & Kielhofner, G. (2006). Model of Human Occupational Screening Tool (MOHOST) (2.0 ed.). Chicago, Ill: Authors: University of Illinois.