HOARDING DISORDER INTERVENTIONS

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SALT LAKE CITY, UTAH

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KEY OBJECTIVES

- Identify common types of hoarding interventions
- Develop knowledge on hoarding intervention strategies
- Learn strategies to identify resources for individuals with hoarding disorders
- Learn strategies to support hoarding resource development in your community
BACKGROUND: HOARDING DISORDER
The **Diagnostic and Statistical Manual of Mental Disorders – 5th Edition (DSM5,** American Psychiatric Association, 2013) defines Hoarding Disorder (HD) as follows:

1. Persistent difficulty discarding or parting with possessions, regardless of their actual value, due to a perceived need to save the items and the distress associated with discarding them.
2. The difficulty in discarding possessions results in the accumulation of these items that congest and clutter active living areas and substantially compromises their intended use. If living areas are uncluttered, it is only because of the interventions of third parties (e.g., family members, cleaners, authorities).
3. The hoarding causes clinically significant distress or impairment in social, occupational, or other important areas of functioning (including maintaining a safe environment for self and others).
4. The hoarding is not attributed to other medical conditions (e.g., brain injury, cerebrovascular disease, Prader-Willi syndrome).
5. The hoarding is not better explained by the symptoms of another mental disorder (e.g., obsessions in obsessive-compulsive disorder, decreased energy in major depressive disorder, delusions in schizophrenia or another psychotic disorder, cognitive deficits in major neurocognitive disorder, restricted interests in autism spectrum disorder).
10 WARNING SIGNS OF HOARDING

1. Parts of the home are kept off-limits & hidden
2. Ongoing discussion & concern by significant others
3. De-cluttering (even small areas) is a major job taking hours or days
4. Failure to pay bills
5. In debt from compulsive shopping

Adapted from: Michael A. Tompkins, Ph.D. (2013). 10 Early Signs that Your Loved One May Have a Hoarding Problem. Available at http://208.88.128.33/hoarding/family.aspx.
6. Trouble finding things & resistant to storing things out of sight
7. Puts off home repairs
8. Reluctant to allow others in the home
9. Overflowing garage and/or rents storage units
10. Not allowing others to touch or borrow possessions

Adapted from: Michael A. Tompkins, Ph.D. (2013). 10 Early Signs that Your Loved One May Have a Hoarding Problem. Available at http://208.88.128.33/hoarding/family.aspx.
COMMON ISSUES BEHIND HOARDING, ACQUIRING AND DISCARDING ITEMS

- Challenges with focusing attention
- Problems processing information and categorizing items
- Decision making challenges impacted by over creativity or over thinking
- Perfectionism impacts making progress; sometimes getting stuck in a strong desire to collect items and fulfill the items usefulness
- Challenges to identify and let go of sentimental attachments
- Safety and security issues
- Past experiences & avoidance impedes progress
- Impact from other conditions: Depression, OCD, ADHD, Anxiety/PTSD and other conditions
GENERAL SCREENING CONSIDERATIONS

- Identify problems
  - Consider history & resources
  - Look for acute change in status
  - Pattern of repeat or re-occuring situation
  - Look for related conditions
- Support individual’s understanding of problem, individual’s preferences, understanding item’s value (i.e. obsessions, fears, memory of loss) and individual’s choices.
- Consider routine functioning/problem solving strategies; attention; cognitive flexibility; issues with categorizing/organizing space; identify understanding, appreciation & reasoning for clutter; decision making & other cognitive issues

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PUBLIC HEALTH INTERVENTIONS
# Hoarding Disorder Intervention Strategies

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HOW DO WE INTERVENE?

PUBLIC HEALTH INTERVENTION MODELS

- Enforcement Interventions
- Support Interventions

Collaborative Community Approach
ENFORCEMENT INTERVENTIONS

“Non consenting” or “mandated” interventions

- Provided by: health inspector, housing inspector, fire & safety inspection, judge, social services, etc.

- Common issues: housing violations, risk of eviction, home being condemned, child custody risks & penalty
  - Sets clear boundaries & limits
  - Negotiates modification/adaptation plans
  - Non-judgmental whenever possible
WHY “ENFORCEMENT” INTERVENTIONS ALONE FAIL

- Often leads to episodes of extreme distress
- May increase attachment to possessions
- May hinder future acceptance of help
- When not integrated with treatment, “clean out” interventions often fail
- Pushiness to convince throwing away items leads to defensive reactions & resistance dialogue
- Agreement to appease helper does not change long term behavior
- Person-centered treatment does not focus on telling people how to live. Motivation can not be forced
SUPPORT INTERVENTIONS SHOULD PRECEDE ENFORCEMENT INTERVENTION

- Goal is to align support & enforcement interventions
- Essential to work together
- Value various roles
- Network & cross training
SUPPORT INTERVENTIONS

Provided by: family, peers, enforcement agencies, RSC, lawyer, advocates & treatment providers (such as occupational therapist, counselor, case/care management)

- Does not enforce
- Avoid pressure to change
- Motivate discussion of positives & negatives
- Support self-reflection
- Support self-discovery of solution
- Offer ideas
ENGAGING SUPPORTIVE DISCUSSIONS

Sample Topics:

- How did this come about?
- Have you had help with this in the past?
- How did that go? ..... what’s so bad about that?
- Do you see this as a problem for yourself?
- Are you interested in any help?
- Do you want fewer items in your house?
ENGAGING SUPPORTIVE DISCUSSIONS (CONT.)

Sample Topics:

- Do you have plans to de-clutter any areas of your house?
- Is this something you want help with?
- Are there one or two things you want help with?
- What do you think about getting rid of items?
- Would you object to assistance with removing items?
A “NON-FORMAL” INTERVENTION APPROACH

- Be supportive
- Use motivational interviewing techniques
- Establish rapport & trust
- Establish respect or common interest
- Consider conversation starters
- Consider “keeping it light”- talk about strengths
- Respect personal space & avoid touching person
- “Sit down & chat” approach
- Simple conversations help

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A “NON-FORMAL” INTERVENTION APPROACH (CONT.)

- Trial & error—consider different communication styles
- Simple educational statements can lead to personal solution
- Provide cues into problem, support, & solutions
- Support development of self-awareness of the situation
- Limit initial expectations
- Avoid expectations of a quick solution
- Offer time to think about solutions
OTHER RELATED SERVICES

- Transition and downsizing services
- Specialized coach or intervention services
- Cleaning specialists
- Professional organizer
- Specialized moving services
- Emergency clean up services
- Housing supports
- Hoarding services combined with social & medical services (e.g. homecare services)
STRATEGIES TO PROMOTE SELF-CARE AND PROVIDE SUPPORT
# Hoarding Disorder Intervention Strategies

## Public Health Interventions
- Enforcement & Service Collaboration
- Non-Formal Approach

## Self Care & Support
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- Engage Support Network
- Peer Support
- Harm Reduction

## Professional Services
- Assessment
- Cognitive Behavioral Therapy
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- Family Interventions
- Clean-Outs

## Development & Resources
- Engage Stakeholders
- Support Resources
- Leverage Opportunities for Program Development
Developed by Tobin, Frost & Steketee (2014)

- Evidenced Based Program
- 16 week group workshop incorporating Cognitive Behavioral Strategies
- Participant Purchase Book: *Buried in Treasures: Help for Compulsive Acquiring, Saving & Hoarding (two editions)*
- Group Sessions Based on Buried in Treasures Facilitator guide
- Two facilitators for a 5-16 member group
- Can also be done remote with less members

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BURIED IN TREASURES- KEY PRINCIPLES

- Develop insight while sharing personal experiences through “Good Guys and Bad Guys”
- Supports outcome focus - visualize your personal reward
- Supports self-evaluation through CBT downward arrow technique
- Modify core beliefs by challenging what you think might happen
- Focus on self talk to think through the sorting and discarding process
- Opportunities to try out new learning strategies
- New skill development such as asking questions about possessions, decision-making skills, 3 box sorting technique ranking value, pre & post-test scoring, visual picture imagery and bring in items for exercises in discarding
- Tracking time technique supports skill development gradually
- Motivation exercises support change through rebalancing pendulum of good & bad guys

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<th>Appreciate hoarding condition &amp; understand interventions</th>
<th>Provide emotional support</th>
<th>Empathize</th>
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<td>Home visits</td>
<td>Encourage developing thinking out loud strategies</td>
<td>Help with decisions rather than make decisions</td>
</tr>
<tr>
<td>Cheerlead</td>
<td>Help with heavy hauling</td>
<td>Accompany the person on non-acquiring outings</td>
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BURIED IN TREASURES HAS TIPS TO AVOID FOR FAMILY AND FRIENDS

- Don’t debate or argue
  - Take a break to remind yourself about the condition and interventions

- Don’t take over decision making
  - Taking over does not teach the person how to self-manage their cluttering problem

- The person is in charge and makes decisions
BURIED IN TREASURES

- Offers many ideas to overcome hoarding
- Provides better understanding of emotions and behaviors
- Supports development of a personal approach
- Encourages the use of self help, group process, peer support, skill building and CBT Strategies
- Sessions include reading portions of the book, homework and discussion questions
- Supports development of follow-up support groups

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Incorporates procedures to develop a follow-up support group
Opportunity to use workshop as peer training curriculum
Potential to expand peer support services to include hoarding peer specialist
HARM REDUCTION INTERVENTION - GENERAL PRINCIPLES

- Set realistic goals focusing on safety
- Work to slow or stop further acquisition
- Consider person-centered solutions seeking common ground
- Negotiate (e.g. balance safety & feelings of comfort)
- Be respectful (e.g. seek permission to touch items)
- Empathize (e.g. understand attachment, importance of items)
- Anticipate & appreciate feelings
HARM REDUCTION (CONT.)

- Build trusting relationship (e.g. team build rather than argue)
- Maintain trust (e.g. don’t throw things away without asking permission)
- Include motivating factors
- Educate (e.g. come up with ideas to make their home safer, i.e. moving clutter from walkways)
- Brainstorm ideas to make home safer (e.g. moving items to safer locations)
- Reflection (e.g. seek recognition that hoarding interferes with their own goals/values)
- Expect failures & set back
HARM REDUCTION SKILL TRAINING

- Step-by-step getting rid of/or recycling clutter
- Understand & address personal meaning
- Exercises in moving items into bags/boxes/safety
- Develop skills for going out without buying/collecting new items
- Assisted sorting sessions
- Assisted practice removal sessions

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HARM REDUCTION SKILL TRAINING (CONT.)

- Support independent item removal
- Support with a coach to sort and reduce clutter
- Self-help/group intervention – challenges own attachments to items
- Pre-crisis plan and support to prevent relapse
- Educate that relapses can occur
STRATEGIES TO UTILIZE PROFESSIONAL SERVICES
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PROFESSIONAL INTERVENTIONS

- Mental health screening, risk assessment & crisis management
- Early intervention, case management & education interventions
- Short-term and long-term outpatient services (CBT)
- Sessions with therapist within the home
- In-home professional coach services
- Family intervention approach
- Intervention with clergy & friends
- Day programs & inpatient treatment

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The Clutter Image Rating (CIR) tool was developed as an objective rating scale to assess hoarding and clutter. In 2007, the paper-based measure was first introduced in Dean Gail Steketee and Professor Randy Frost’s *Compulsive Hoarding and Acquiring: A Therapist Guide*. Professor Jordana Muroff and a team of students led by Ann Ming Samborski and Sophie Lehar developed a downloadable CIR application for iPhones and iPads.

CIR is a pictorial tool to determine the amount of clutter in a person’s home. The pictures are numbered from 1 = “no clutter,” to 9 = “severe clutter” for the three main rooms (kitchen, living room, and bedroom) in a typical home. Please select the number of the picture that most closely matches the level of clutter in each room that you are rating. Human service professionals and clients can use this instrument to assess each room in a home and gauge progress in reducing clutter.

Available at: https://itunes.apple.com/us/app/clutter-image-rating/id981642952?mt=8
ASSESSMENT: CLUTTER IMAGE RATING (CONT.)

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The Massachusetts Hoarding Resources Directory available at: https://www.masshousing.com/portal/server.pt/community/property_managers/239/hoarding resources
FAMILY GROUP TREATMENT

Example: Family accommodation & motivator model

- Family-as-motivators (FAM) training
- 10-session modules (i.e. psycho-education, motivational interviewing, harm reduction, and family accommodation prevention)
- Empowers family members & increases their wellbeing
- Goals to increase treatment readiness & treatment-seeking behavior

Note: Everything needed to set up and run the groups (except for Buried in Treasure book) is found in the downloaded version of the Facilitator's Manual available through www.pasrr.org
INDIVIDUAL GROUP TREATMENT

Example: Using Buried in Treasure by Shuer, Lee & Frost

- 14-sessions- promoting everyone as their own expert
- Sessions include, introduction, recognizing problems, good & bad guys, how it happened, motivation, help to reduce acquiring, sorting, discarding step-by-step exercises, brain exercises, maintaining success, follow-up.

MEDICINE INTERVENTIONS

- Medication may help reduce related symptoms
- Medication can treat conditions that make hoarding worse (e.g. anxiety or depression)
- Not a stand-alone treatment to reduce hoarding behavior
STRATEGIES TO SUPPORT HOARDING SERVICE DEVELOPMENT
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HOARDING SERVICE DEVELOPMENT: IDENTIFY INITIATIVES

- System-level planning
- Workforce Training
- Public Education

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Identify your key stakeholders to support advancing the profession of individuals and organizations working with hoarding

Identify educational and training opportunities to support hoarding training initiatives

Work in partnership with state agencies, housing/insurance programs, care management, prevention & protective services, health care providers & other organizations to promote expansion and improve quality services for individuals hoarding disorders

Provide a forum for free and open discussion of issues related to hoarding such as a hoarding taskforce

Educate the public about available hoarding resources
REACH OUT TO ORGANIZATIONS WORKING WITH PEOPLE WHO HOARD

Who might support hoarding initiatives?
- state departments
- state protective services (child, adult, older adult, animals)
- elder services
- courts

Who might be in a local taskforce workgroup?
- legal services and housing lawyers
- fire, police and emergency medical professionals
- housing providers
- advocacy organizations
WHERE CAN YOU FIND LOCAL HOARDING RESOURCES?

- Psychology Today: https://www.psychologytoday.com/us/therapists/hoarding/utah

- International OCD Foundation: https://hoarding.iocdf.org/ and https://iocdf.org/find-help/

- Children of Hoarders: http://childrenofhoarders.com/wordpress/

- The Humane Society: www.HumaneSociety.org
WHERE CAN YOU FIND LOCAL HOARDING TREATMENT & SELF HELP GROUPS?

- Anxiety and Stress Disorders Institute of Maryland, LLP. Available at: https://www.anxietyandstress.com/hoarding
- Anxiety Disorders Association of America. Available at: https://adaa.org/
- Clutterers Anonymous. Available at: https://clutterersanonymous.org/
- Institute for Challenging Disorganization. Available at: https://www.challengingdisorganization.org/
- IOCF Hoarding Center. Available at: https://hoarding.iocdf.org/
- National Alliance on Mental Illness. Available at: https://www.nami.org/Find-Support
- Treatments That Work, Oxford University Press. Available at: http://www.oxfordclinicalpsych.com/page/307/%20Treatments%20That%20Work
NEXT STEPS IN COLLABORATIVE INTERVENTIONS

- Developing common language
  - Ex. common categories of hoarding (e.g. animal, craft, clothing, shopping collections, fix-it supplies, bargain shopping, food saver, big item shopper, collections)

- Describe situation severity using intervention considerations:
  - Normal adjustment situations (e.g. down sizing home inherited)
  - Problem situation (e.g. distressed, limited resources, & justifying (i.e. storage areas full)
  - Inaccessibility situation (e.g. life performance is impacted by hoarding) harm reduction
  - Restricted living space (e.g. restricted fire hazard, structural issues, MI symptoms, major functioning issues)
  - Unsafe health & safety (e.g. severely limited daily living activity & severe isolation)
ESTABLISH PRIORITY AREAS FOR PROGRAM DEVELOPMENT

- Improving interventions - age friendly & best practice
- Develop systems of care with network building & resource directory
- Guidelines in public health models for support & enforcement collaboration
- Protocols with resource material references
- Educational material on hoarding for special groups (e.g. peer support, cleaners & movers, building inspectors, housing supports, care/case managers)
Estabishing Priority Areas for Program Development (Cont.)

- Develop sample intervention protocols, guidelines, checklists & other forms such as:
  - Protocols in problem solving for problematic scenarios
  - Problematic scenario review request form(s)
  - Problematic scenario review finding reports
  - Protocols for maintaining confidentiality in case review
  - Team case review confidentiality consent form
  - Special procedure for substance and mental health issues

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### Tools, Assessments, & Forms

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<td>Hoarding Intervention Essentials</td>
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<td>Hoarding: What to Look For</td>
<td>Readiness to Change Questionnaire &amp; Scoring</td>
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<tr>
<td>HOMES® Multi-Disciplinary Hoarding Risk Assessment</td>
<td>Sample HUD Language for Service Provider Release</td>
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<tr>
<td>How to Talk to Someone with Hoarding: Do’s and Don’ts</td>
<td>Uniform Inspection Checklist - Hoarding/Excessive Clutter</td>
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<td>Protocol for Dealing with The Problem of Hoarding</td>
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### DEVELOPING A HOARDING RESOURCE DIRECTORY (CONT.)

#### Events, Trainings & Group Programs
- Buried in Treasures Workshops
- Clutter Treatment Group
- Decluttering Basics Workshop
- Hoarding Intervention Certificate Program
- Hoarding Conference
- Family Hoarding Support Group
- Professional Education Programs

#### Public Education
- Definition of Hoarding
- Hoarding Task Force Presentation
- Hoarding: Best Practices Guide
- Hoarding: What it is, Consequences and Intervention
- State Hoarding Fact Sheet
- Local City Codes Related to Hoarding
CHALLENGES

- Intervention for treatment resistance is challenging (esp. related to poor insight or when unmotivated to change)
- Consider individual’s right to make choices about their possessions
- Often not willing for treatment
- When refuse to do anything, few options are available
- Wellbeing & safety are addressed differently
- Engage available support options (e.g. Older Adult Service Agencies, Health Plan Care Managers, Mental Health Crisis Intervention Services, Housing Supports, Eviction Prevention Housing Services, Advocates & Hoarding Taskforce)

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SUMMARY

Quick and temporary solutions often fail

- Does not incorporate self-reflection & personal problem solving
- Items re-accumulate
- Strains relationships
- Reduces likelihood for seeking help in future
- Needs special considerations in hoarding interventions
SUMMARY (CONT.)

- Understanding, solutions & recovery takes times
- Avoid triggering trauma & further treatment resistance
- Chronic conditions may require ongoing management
- A team may be needed for intervention to succeed
- Taskforce models are successful to support program development
### SUMMARY: INTERVENTION STRATEGIES

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Hoarding consists of a variety of challenges & limitations

- Calls for a diverse set of interventions
- Progress may take time, expertise, and multiple resources

Support access to professional & community support and training resources

- Individualized (specialized CBT)
- Support & family interventions
- Collaborative community interventions
- Public education

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Incorporating new interventions can be successful!

Teamwork is the ability to work together toward a common vision. The ability to direct individual accomplishments toward organizational objectives. It is the fuel that allows common people to attain uncommon results.

– Andrew Carnegie
RESOURCES

Help for Hoarding: Website available at:  http://www.helpforhoarding.net/information-on-hoarding-statistics/

International OCD Foundation Hoarding Website available at:  https://hoarding.iocdf.org  and  http://208.88.128.33/hoarding/

National Association Of Mental Health Program Directors & SAMHSA Webinar Training Resource  
https://www.nasmhpd.org/sites/default/files/CM316%20Buried%20in%20Treasures.mp4  

MASS Housing Hoarding Resources available at:  

Motivational Interviewing (Resources for clinicians, researchers, trainers) available at:  
http://motivationalinterview.net/clinical/interaction.html

National Association Of Mental Health Program Directors & SAMHSA Webinar Training Resource  
https://www.nasmhpd.org/sites/default/files/CM316%20Buried%20in
http://www.philadelphiahoarding.org/resources/Buried%20in%20Treasures%20Facilitators%20Guide.pdf


Understanding O.C. Hoarding Website available at: http://understanding_ocd.tripod.com/index_hoarding.html

Questions? Comments? Ideas?

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Email Us!
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Thank You!