

## Video Review

*Psychiatric Aspects of Home Health Care  
(Overview and Assessment;  
Interventions and Safety Concerns;  
Families, Care Givers  
and Community Resources)*

Irvine, CA: Concept Media, 1998.  
3 videos ranging from 22 to 26 min.

Reviewed by Madeleine Buck

The video series *Psychiatric Aspects of Home Health Care* is timely and relevant considering the changes that are now taking place in health-care delivery — one could even say that, in light of shifts in the care of people with mental illness in the 1970s and 1980s, it is long overdue!

### Overview

This three-part series addresses important issues related to providing follow-up for people with mental illness in their own environment. The merits of following such clients in their homes is made clear throughout, with nurses offering testimonials on how this approach has enabled them to assess and intervene more accurately and more creatively. There are sequences illustrating the fact that nurses are able to collect more relevant and meaningful data on their clients by seeing them in the home setting, in the context of their family life (or lack thereof) and the demands of their day-to-day existence. Other sequences demonstrate nurses' ability to problem-solve with clients in ways that would not be possible in a hospital setting.

Though not intended as a formal primer on mental illness, the series does outline the types of mental illness that are likely to be encountered in the home environment. Basic theory is used to highlight symptomatology and manifestations of five forms of mental illness: schizophrenia, bipolar disorder, depression, panic disorder, and dementia. The theory is complemented nicely by interactions with clients to illustrate some of the symptoms. Also covered are means of identifying and addressing more subtle mental-health problems and potentially suicidal situations.

The series also deals with — and this is perhaps its most interesting feature — situations that are likely to arise only in a home or community environment, or, at any rate, to be considerably altered outside the hospital setting. These include: developing sufficient trust for a client to readily and openly accept the nurse into their home; dealing with “dual diagnoses”; detecting symptoms of mental illness that have gone unnoticed during inpatient or outpatient follow-up; conducting oneself in the client’s “territory”; locating and dealing with other family members, who may also have mental or physical problems; negotiating a client’s attempts to become a “friend”; and addressing a home environment that is not healthful. A segment on identifying and coping with threats to personal safety provides specific cues and concrete solutions in managing these difficult situations.

Process issues, from developing initial rapport to terminating a relationship with a vulnerable client, are well addressed. Various communications strategies are discussed and excellent examples of collaborative nurse/patient relationships provided. Nurses are shown dealing with situations of anger, severe depression, paranoia, and belligerence. We see them picking up on subtle behavioural cues, pointing out client strengths, engaging the client in setting priorities and problem-solving, openly negotiating goals with the client, and providing feedback to the client on meeting or failing to meet goals. The videos also address what a nurse can realistically hope to achieve in a particular situation, and the importance of consulting a multidisciplinary team — not only for personal support but in order to address client-related challenges as accurately and as comprehensively as possible.

### **Presentation**

The mix of a formal theory component, nurse testimonials, nurse-client interactions, and interviews with family members ensures a comfortable balance of information and entertainment. Nurse-client relationships are followed as they evolve over time, enabling the viewer to see how the relationships develop — after watching the first video, the viewer is eager to follow through with the rest of the “story.” Though the three videos in the series can be viewed separately, seeing them in sequence will allow the viewer to track the various issues in the nurse-client relationship.

### Audience

This series would be a good primer for any nursing student as well as any nurse embarking on a career in the community — it will help allay anxieties by providing realistic strategies for negotiating several situations (including those involving a clientele designated “non-psychiatric”). Nurses already working in a home environment will stand to learn new or different ways of meeting particular challenges. The videos highlight the importance of addressing mental-health issues that might be overlooked because of a focus on physical recovery, such as during the postoperative period. Some excerpts could also be used to justify home care in general, or to illustrate specific components of the nurse/client relationship — particularly to those nursing students who require vivid representation of communications theory and process.

The series was made in the United States and therefore includes references to insurance agencies and Medicaid that are not applicable to Canadian audiences. However, these instances do not detract from the goal of addressing important challenges in home care.

### Summary Assessment

The richness of *Psychiatric Aspects of Home Health Care* lies in its presentation of nurse-client situations as they unfold. This video series provides an uplifting view of the merits of home care for clients who face many challenges, and is realistic in its portrayal of what the disappointments as well as the rewards can be for the nurse. It offers a nice complement of theory and lively illustration, the graphic depictions successfully consolidating the ideas presented. Any nurse viewing this series will leave with something new to test out.

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**CJNR 2000–2004:  
Focus Topics, Deadlines, and Publication Dates**

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**VOLUME 32**

**Primary Health Care**

Submission deadline: October 15, 1999

Publication date: June 2000

**Philosophy / Theory**

Submission deadline: January 15, 2000

Publication date: September 2000

**Chronicity**

Submission deadline: April 15, 2000

Publication date: December 2000

**Abuse and Violence**

Submission deadline: July 15, 2000

Publication date: March 2001

**VOLUME 33**

**Economics of Nursing Care**

Submission deadline: October 15, 2000

Publication date: June 2001

**Home Care**

Submission deadline: January 15, 2001

Publication date: September 2001

**Women's Health**

Submission deadline: April 15, 2001

Publication date: December 2001

**Health Resource Planning**

Submission deadline: July 15, 2001

Publication date: March 2002

**VOLUME 34**

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Publication date: June 2002

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Submission deadline: January 15, 2002

Publication date: September 2002

**Addiction**

Submission deadline: April 15, 2002

Publication date: December 2002

**Culture & Gender**

Submission deadline: July 15, 2002

Publication date: March 2003

**VOLUME 35**

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Publication date: June 2003

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Publication date: September 2003

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Submission deadline: April 15, 2003

Publication date: December 2003

**Continuity & Transitional Care**

Submission deadline: July 15, 2003

Publication date: March 2004