

OCAN 3.0

Domains Definitions and Examples

Ontario Common Assessment of Needs (OCAN)

CCIM Common Assessment

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Domains Information Layout

Each domain is described using the following structure:

Domain Overview

- Intent
- Guiding Questions
- Client/Consumer Issues

Need and Help Rating Examples

- Need Ratings:
 - 0 – No Need = No problem**
 - 1 – Met Need = No or only moderate problem due to help given. Help is required to prevent the situation from becoming serious**
 - 2 – Unmet Need = Serious problem**
- Help Ratings:
 - 0 - No Help**
 - 1 - Low Help**
 - 2 - Moderate Help**
 - 3 - High Help**

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1. Accommodation

1.1 Accommodation: Overview

<p>Trigger Questions</p> <p>Are you happy with the place you live in or has it been a problem (an area of need)? Are you getting the help you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> • To determine if the person has an adequate home. To determine if the person is living in sheltered or subsidized accommodation • To determine if the person is homeless, precariously housed, or if his/her home lacks basic facilities such as water and electricity. 	<p>Guiding Questions</p> <ul style="list-style-type: none"> • Tell me about the place where you live... • What do you like or dislike about it? • Does your present home meet your social and cultural needs? • Do you feel like you are “at home” when there? • Do you feel safe where you live? • Do you feel comfortable and “at home” where you live? • Do you have access to hot water, light, heat, etc.? • Do you have sufficient personal space and privacy? 	<p>Consumer Issues</p> <p>It is important to be aware of and sensitive to issues such as:</p> <ul style="list-style-type: none"> • Shame about being homelessness; especially for “working poor”. • Unsafe housing due to domestic issues. • Unsafe neighbourhood due to street crime. • Culturally significant issues may be more important to an individual than personal safety or other issues. • Abusive landlords exerting overt and subtle threats. • History of homelessness. • Behaviours related to symptoms, substance abuse and other life style issues may cause a housing crisis.
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1.2 Accommodation: Need and Help Rating Examples

Need Rating	Need Examples
0	Person manages their accommodation independently.
1	Person is living in supportive housing Person receives ongoing informal or formal support to sustain accommodation
2	Person is “couch surfing” and has been asked to move tomorrow Person is ready for discharge, but has no accommodation Person is homeless

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with accessing or improving accommodation, for example: <ul style="list-style-type: none"> - Peers linked person to an agency for rent subsidy consideration - Person receives family help to fill out forms for accommodation referral
2	Regular help with accessing or improving accommodation, for example: <ul style="list-style-type: none"> - Family has helped organize unit this month - Best friend visits and helps with home repair and upkeep
3	Substantial help with accessing or improving accommodation, for example: <ul style="list-style-type: none"> - Family pays rent and frequently problem-solves with landlord and neighbours - Person is living with family who oversees all home maintenance.

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with accessing or improving accommodation, for example: <ul style="list-style-type: none"> - Community mental health agency trustee assisting with person direct rent payment service - Person receives start-up funding for accommodation
2	Regular help with accessing or improving accommodation, for example: <ul style="list-style-type: none"> - Person receives assistance in getting furniture regularly - Person regularly attends mental health services learning skills to keep accommodation
3	Substantial help with accessing or improving accommodation, for example: <ul style="list-style-type: none"> - Person receives frequent advocacy support around accommodation issues - Person receives frequent help in finding suitable accommodation - Person is living in supervised accommodation

2. Food

2.1 Food: Overview

Trigger Questions Has getting food that suits your dietary needs been a problem (an area of need)? Are you getting the help you need?	Intent <ul style="list-style-type: none"> • To determine if the person is able to buy and prepare meals. • To determine if the person is unable to prepare meals and has meals/food provided. • To determine if the person is on a very strict diet and is eating inappropriate food. 	Guiding Questions <ul style="list-style-type: none"> • Are you getting enough to eat? • Can you cook and shop? • Do you have any concerns about the food that you're eating? • Does the food available to you meet your health and cultural needs? • Do you have any food allergies? • Do you have any special needs (e.g. health considerations – diabetes, heart conditions, etc) that require a special diet? • If diabetes is present, remember to explore whether present diet complicates management of condition • Be alert as to whether consumer may have delusional beliefs about food –e.g. someone is poisoning him, or certain foods are forbidden 	Consumer Issues It is important to be aware of and sensitive to issues such as: <ul style="list-style-type: none"> • Cultural, religious or personal choices • Health awareness and promotion • Understand magnitude of change for a consumer who needs to make different food choices • Cost of nutritious food
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2.2 Food: Need and Help Rating Examples

Need Rating	Need Examples
0	Person buys food and cooks meals independently.
1	Person is unable to prepare food and has meals provided Person requires ongoing help with cooking and shopping Person requires “meals on wheels” supplemented by family meals
2	Person does not have food for entire month Person sometimes uses food banks, eats at mission services and is often hungry

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with accessing food, for example: <ul style="list-style-type: none"> - Person's family provides transportation to grocery store occasionally - Person's friend showed him how to access food bank
2	Regular help with accessing food, for example: <ul style="list-style-type: none"> - Person belongs to a group that shops and cooks regularly - Person receives regular family help buying groceries & planning meals
3	Substantial help with accessing food, for example: <ul style="list-style-type: none"> - Person lives with family/friends who provides all meals

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with accessing food, for example: <ul style="list-style-type: none"> - Person sometimes accesses food banks
2	Regular help with accessing food, for example: <ul style="list-style-type: none"> - Person belongs to a group that shops and cooks regularly - Person receives regular family help buying groceries & planning meals
3	Substantial help with accessing food, for example: <ul style="list-style-type: none"> - Person is provided all meals by housing facility - Person receives diabetic meals from "meals on wheels" – Mon. through Friday

3. Looking After the Home

3.1 Looking After the Home: Overview

<p>Trigger Questions</p> <p>Has keeping your home tidy been a problem (an area of need)? This could include cleaning and laundry. Are you getting the help you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> • To determine if the person is able to look after the home. • To determine if the person requires and is receiving help looking after his/her home. • To determine if the state of the home is unkempt and is a potential health/social hazard. 	<p>Guiding Questions</p> <ul style="list-style-type: none"> • Is your living environment easy to keep clean and comfortable? • How often does the housing provider remove garbage at your home? • Do you have access to cleaning supplies? • If you have a pet; does that create any extra housework for you? • Do your friends sometimes create extra work for you and being careless when they visit? 	<p>Consumer Issues</p> <ul style="list-style-type: none"> • Remember symptoms of illness often leave individuals with little energy or drive to take care of routine housework. • Often a lack of funds makes it difficult to have all the necessary cleaning supplies at hand.
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3.2 Looking After the Home: Need and Help Rating Examples

Need Rating	Need Examples
0	Person's home may be untidy, but the person keeps it basically clean on their own.
1	Person's family members provide considerable practical help because person unable to care for home Person requires regular help from worker with skills teaching and cleaning.
2	Person struggles to care for home and has been threatened with eviction

Help Rating	Informal Help Examples
0	Person's home may be untidy, but the person keeps it basically clean on their own.
1	Some / occasional help with looking after the home, for example: <ul style="list-style-type: none"> - Person's family have paid for some housecleaning services - Persons' friends provide occasional help when it is requested
2	Regular help with looking after the home, for example: <ul style="list-style-type: none"> - Person has a very supportive friend who regularly helps clean - Person's family visits regularly and helps with household tasks
3	Substantial help with looking after the home, for example: <ul style="list-style-type: none"> - Person lives with family who look after all household chores

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with looking after the home, for example: <ul style="list-style-type: none"> - Worker provides some house-cleaning assistance - Local services assist with child proofing home
2	Regular help with looking after the home, for example: <ul style="list-style-type: none"> - Life skills coach regularly visits
3	Substantial help with looking after the home, for example: <ul style="list-style-type: none"> - Person has 24-7 on-site assistance - Local services provide complete assistance

4. Self-Care

4.1 Self-Care: Overview

Trigger Questions	Intent	Guiding Questions	Consumer Issues
<p>Has maintaining your personal hygiene been a problem (an area of need)? This could include challenges accessing or using products/facilities. Are you getting the help you need?</p>	<ul style="list-style-type: none"> • To determine if the person keeps basically clean. • To determine if the person needs and is getting help with self care. • To determine if the person's hygiene places them at risk medically/specially. 	<ul style="list-style-type: none"> • Tell me about your bathing routine? • Is staying clean important to you? • Do you have any physical problems that prevent you from bathing, showering or brushing your teeth? • Do you like to bathe or shower – do your facilities enable you to carry out these practices? • Do you have anyone assisting you with your hygienic needs? • Do you require assistive devices i.e. bath bars, etc? 	<ul style="list-style-type: none"> • Symptoms of mental illness may pose challenges for individuals to be aware of and to attend to all aspects of their self care. • Physical health or disability issues may impact on a person's ability to maintain self care e.g. foot care. • Consider the person's dignity when asking about issues that may be experienced as demeaning or embarrassing. • Determine whether physical health needs, including dental health needs are being met. • Consider whether the client is pregnant or has the potential to become pregnant when reviewing self care needs • Culture may influence various bathing routines.

4.2 Self-Care: Need and Help Rating Examples

Need Rating	Need Examples
0	Person's appearance may be eccentric or untidy, but keep themselves basically clean.
1	Person needs and gets help from Occupational Therapist re self-care
2	Personal hygiene is a threat to health and social acceptance

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with self-care, for example: <ul style="list-style-type: none"> - Person's friend occasionally helps with laundry; hair washing, etc
2	Regular help with self-care, for example: <ul style="list-style-type: none"> - Person receives regular phone call prompts from family - Person's friend visits regularly to provide practical aid
3	Substantial help with self-care, for example: <ul style="list-style-type: none"> - Person lives with family and receives substantial assistance

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with self-care, for example: <ul style="list-style-type: none"> - Worker sometimes helps with individual access to podiatry services - Occupational Therapist assessment completed to determine needs
2	Regular help with self-care, for example: <ul style="list-style-type: none"> - Worker regularly assists client with personal care schedule through a series of regular home visits and telephone prompts
3	Substantial help with self-care, for example: <ul style="list-style-type: none"> - Person receives substantial contact from home care & visiting nurses - Person lives in a retirement home that attends to all self-care needs

5. Daytime Activities

5.1 Daytime Activities: Overview

<p>Trigger Questions</p> <p>Have daytime activities been a problem (an area of need)? This could include work, education or leisure activities. Are you getting the help you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> • To determine if the person is engaged in personally meaningful daytime activities. • To determine if the person needs and is getting help to find and/or participate in personally meaningful daytime activities. • To determine if the person is not engaged in and is seeking meaningful daytime activities. 	<p>Guiding Questions</p> <ul style="list-style-type: none"> • How do you like to have fun, joy or pleasure? • Do you belong to any groups or organizations? • Do you have any hobbies? • Describe a typical day for you. • How would you like to spend your time? • What type of activities do you enjoy with your friends? • Would you like to be working? • Would you like to attend any type of educational program? 	<p>Consumer Issues</p> <ul style="list-style-type: none"> • Appreciate that individuals have a wide range of preferences in terms of company, solitude and activity • Value all productive activities, whether or not financial compensation is involved • Trying to find meaningful employment may be a source of deep hurt, disappointment and frustration. In some instances, persons cope by giving up on their hopes and protect themselves by “giving up”. • Identify culturally appropriate resources that are also relevant to a variety of age groups; remember to look beyond mainstream institutions
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5.2 Daytime Activities: Need and Help Rating Examples

Need Rating	Need Examples
0	Person is adequately occupied with household/social/employment/educational activities
1	Person unable to occupy self, so attending day program
2	Person is afraid to leave their home and is unhappy about the situation

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with daytime activities, for example: <ul style="list-style-type: none"> - Person's friends provides encouragement to ride the bus together to the fitness class - Person is occasionally included with family activities
2	Regular help with daytime activities, for example: <ul style="list-style-type: none"> - Person involved regularly in church volunteer work - Person enjoys regular social group
3	Substantial help with daytime activities, for example: <ul style="list-style-type: none"> - Person's family provides phone prompt every morning to remind person to attend - work resulting in satisfactory work attendance

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with daytime activities, for example: <ul style="list-style-type: none"> - Person occasionally attends day program
2	Regular help with daytime activities, for example: <ul style="list-style-type: none"> - Person receives regular daycare support for children in order to attend educational upgrading
3	Substantial help with daytime activities, for example: <ul style="list-style-type: none"> - Person receives substantial help from job coach - ACTT team drives client to job daily

6. Physical Health

6.1 Physical Health: Overview

<p>Trigger Questions</p> <p>Has your physical health been a problem (an area of need)? Are you getting the help you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> • To determine if the person is physically well. • To determine if the person is requires and is receiving treatment for physical ailments. • To determine if the person has untreated physical ailments, including side effects 	<p>Guiding Questions</p> <ul style="list-style-type: none"> • Do you take any medications prescribed to treat a physical problem such as diabetes, high blood pressure or breathing problems – sthma? • Does your family doctor have any particular concerns about your health? Has s/he given you any education about a physical health problem? • When was the last time you visited a doctor? • Have you been in a hospital emergency room lately for a physical problem? • Describe any health problems that run in your family, e.g. heart conditions? 	<p>Consumer Issues</p> <ul style="list-style-type: none"> • Be alert to possible somatic delusions involving false beliefs a conswumer may have about a physical problem affecting their body. This distinction is highly relevant but as always it is not productive to argue with the person. • It is equally important to balance this alertness with awareness that persons with a psychiatric diagnosis frequently receive inadequate attention to their expressions of concern about valid physical ailments. • There may be a relationship between a person’s physical and mental health issues, e.g. medication side effects. • Circumstances where the interplay of physical and mental problems compound the person’s problems, including side effects of medication. • Research has demonstrated that clients living with mental illness typically have untreated or poorly treated conditions in greater number and complexity than persons without a diagnosis of mental illness.
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6.2 Physical Health: Need and Help Rating Examples

Need Rating	Need Examples
0	No physical health problems
1	Person has high blood pressure – monitored & treated Person has HIV – sees a specialist regularly
2	Person has Type 2 Diabetes and doesn't follow diet or medication regime Person has cardiovascular issues, obesity, and joint pain causing mobility problems and does not follow medical regime

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help maintaining physical health, for example: <ul style="list-style-type: none"> - Person's family interpret doctor's instructions after appointments - Person's family reminds client to get periodic lithium level tests - Church volunteer provides person occasional rides to appointments
2	- Regular help maintaining physical health, for example: - Person's friend provides regular transport & support to attend diabetic clinic
3	Substantial help maintaining physical health, for example: <ul style="list-style-type: none"> - Person's family administers all medication and provides transportation to all appointments - Person's family provides substantial help to manage chronic illness

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help maintaining physical health, for example: <ul style="list-style-type: none"> - Worker linked individual to clinic for investigation of fainting spells
2	Regular help maintaining physical health, for example: <ul style="list-style-type: none"> - Person visits Nurse Practitioner regularly - Person regularly visits Registered Nurse who monitors hypertension and provides health teaching
3	Substantial help maintaining physical health, for example: <ul style="list-style-type: none"> - Person has been recently diagnosed with Diabetes and is receiving daily home support services

7. Psychotic Symptoms

7.1 Psychotic Symptom: Overview

Trigger Questions	Intent	Guiding Questions	Consumer Issues
<p>Have symptoms of psychosis been a problem (an area of need)? This could include feeling like you're being watched or hearing voices that interfere with your daily life? Are you getting the help you need?</p>	<ul style="list-style-type: none"> • To determine if the person has no positive symptoms, is not at risk for symptoms and is not on medication. • To determine if the person is on medication or receives help for symptoms. • To determine if the person currently has positive symptoms and is at risk. 	<ul style="list-style-type: none"> • Do you ever hear voices that other people couldn't hear? • Do you have thoughts that are disturbing, upsetting, or distracting to you? • Do your thoughts interfere with your concentration? • Do you have any issues with your thoughts? If yes, what are they? How does this affect you? (e.g. difficulty concentrating, fear or anxiety?) • Do your thoughts make it difficult to participate in conversations? • Are there any other issues that are bothering you? What are these issues? • Have you shared your concerns about these experiences with somebody else such as your family, family doctor or specialist? • What are the main ideas these voices or thoughts dwell on? Are they the same all the time? Or are they different? Are these voices recent? Are they more, or are they less recently? • What medications are you prescribed, and do you take these medications regularly? • Do you take your medication on your own, or does someone help you with this? • Does this medication help control the "voices"? 	<ul style="list-style-type: none"> • Recognize the consumer's comfort level and readiness to discuss these issues. • Take cultural & spiritual factors into consideration. • Understand that the consumer perception of these "voices" may be different from that of the service provider. Service provider will need to probe with appropriate jargon-free language and adopt an empathic attitude. • Remember that the consumer might not know the names of the medication or treatment they are receiving. This might be a good opening to ask consumer the name of treatment provider and consent for communication.

7.2 Psychotic Symptoms: Need and Help Rating Examples

Need Rating	Need Examples
0	Person has psychotic symptoms, but is not at risk
1	Person's symptoms are well controlled by medications Person's symptoms are distressing, but manageable due to support from family
2	Person experiences intense positive symptoms and requires help Person requires frequent re-admissions to service due to unmanageable psychotic symptoms Client highly disorganized, forgets medications and is quite confused

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help managing psychotic symptoms, for example: <ul style="list-style-type: none"> - Occasional phone calls from friends who promote adherence to medication - Person's family provides some transportation to attend appointments
2	Regular help managing psychotic symptoms, for example: <ul style="list-style-type: none"> - Person's family regularly visits to monitor symptoms
3	Substantial help managing psychotic symptoms, for example: <ul style="list-style-type: none"> - Person's friends drop in daily to offer support

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help managing psychotic symptoms, for example: <ul style="list-style-type: none"> - - Person has occasional contact with psychiatrist to monitor psychotic symptoms - - Worker provides some coaching and support regarding coping strategies
2	Regular help managing psychotic symptoms, for example: <ul style="list-style-type: none"> - - Person receives regular support from staff monitoring condition - - Person attends day program regularly to help increase ability to manage psychotic symptoms
3	Substantial help managing psychotic symptoms, for example: <ul style="list-style-type: none"> - - Person is experiencing first episode psychosis and is admitted to acute care - - ACT team provides substantial in-home medication support to person

8. Information on Condition and Treatment

8.1 Information on Condition and Treatment: Overview

<p>Trigger Questions</p> <p>Has understanding your mental health condition and recommended services/treatments (an area of need)? Are you getting the information you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> • To determine if the person has received and understood information about their physical and mental health. • To determine if the person needs and has received or understood all information needed to make informed choices about treatment. • To determine if the person has not received information about condition and treatment. 	<p>Guiding Questions</p> <ul style="list-style-type: none"> • What is your understanding of why the doctor or service provider prescribed or suggested this medication/treatment? • What do you know about your medication and overall treatment? • What information have you received about your medication and overall treatment? • Were you able to understand the information that was given to you? • Was the information helpful to you? • Would you like to receive information through other methods, e.g. video, pamphlets or discussion group? 	<p>Consumer Issues</p> <ul style="list-style-type: none"> • Some symptoms make it extremely difficult for individuals to process, retain and accept information about their illness and its treatment • Cognitive assessment is sometimes necessary to determine whether cognitive limitations are a barrier to understanding the information provided. • Remember that various cultures may have a different understanding or interpretation of mental health, mental illness and associated symptoms.
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8.2 Information on Condition and Treatment: Need and Help Rating Examples

Need Rating	Need Examples
0	Person has a good understanding of their mental and physical illness and its treatment
1	Person has not received or understood all information
2	Person has not received any information

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with information on condition and treatment, for example: <ul style="list-style-type: none"> - Family helps person to understand condition and keep file of pamphlets
2	Regular help with information on condition and treatment, for example: <ul style="list-style-type: none"> - Peers meets regularly for information purposes
3	Substantial help with information on condition and treatment, for example: <ul style="list-style-type: none"> - Family attends all client appointments as well as family education sessions to reinforce health teaching with person - Friend obtains and organizes all information about person's condition and keeps him/her informed

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with information on condition and treatment, for example: <ul style="list-style-type: none"> - Agency provides person with pamphlets and video - Psychiatrist provides person with information about medications
2	Regular help with information on condition and treatment, for example: <ul style="list-style-type: none"> - A CTT staff provide person with regular health teaching
3	Substantial help with information on condition and treatment, for example: <ul style="list-style-type: none"> - Person receives intensive psycho-educational program - Person receives substantial education around relapse prevention

9. Psychological Distress

9.1 Psychological Distress: Overview

Trigger Questions	Intent	Guiding Questions	Consumer Issues
<p>Has understanding your mental health condition and recommended services/treatments been a problem (an area of need)? These could include feelings of sadness or worry that interfere with your daily life. Are you getting the help you need?</p>	<ul style="list-style-type: none"> • To determine if the person manages occasional or mild distress. • To determine if the person needs and is receiving support to manage distress. • To determine if the person is not receiving help for serious psychological distress. 	<ul style="list-style-type: none"> • In the past (week and month) how has your mood been? • Has your mood changed in the last week or month? • Have you recently felt anxious or tense? • Has anxiety or panic interfered with your day-to-day activities? • Are there any recent events that have caused you worry, anger or hurt? • How do you generally cope when feelings of worry, anger or hurt arise? • Can you tell me what methods have helped you feel better in the past? • Have you ever been prescribed medication to manage anxiety? • Have you ever used the after-hours telephone crisis services? • Have you ever been hospitalized for reasons of emotional upset? 	<ul style="list-style-type: none"> • Remember to use all sources of collateral information. This is especially true when conducting a mental status assessment; e.g. you do not have to rely on consumer self report for information about appearance, affect, and behaviour. • Be aware that individuals may have difficulty articulating their emotional state • Remain alert and supportive in circumstances where consumers respond by saying, “I don’t know”; ask the question in a different manner and provide extra time for them to respond • Patiently probe further by asking questions such as, “How would others describe you?” or if you were to feel better, “How would you look differently”?

9.2 Psychological Distress: Need and Help Rating Examples

Need Rating	Need Examples
0	Person has mild distress or occasional anxiety
1	Person has frequent panic attacks, but receives support from staff of the 24-hour Group Home
2	Person is distressed and alternates between calling the distress centre nightly & going to the Emergency Room Person's 12 kg. weight loss and insomnia appear to be linked to anxiety

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with psychological distress, for example: Family calls occasionally to check in with person Spiritual leader occasionally drops in to visit person
2	Regular help with psychological distress, for example: - Friends regularly discuss coping mechanisms - Person receives regular supportive phone calls from family
3	Substantial help with psychological distress, for example: - Person reports meeting with church friends frequently for this purpose - Friends meet frequently to manage stressful feelings

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with psychological distress, for example: - Person attends "Prevent Panic Group" to increase coping strategies - Person receiving cognitive behavioural therapy occasionally for anxiety
2	Regular help with psychological distress, for example: - Person linked to Rape Crisis Centre after disclosure for regular therapy - Person regularly attends support group and therapist regarding gender transition
3	Substantial help with psychological distress, for example: - Person meets with ACTT and trauma specialist frequently - Person receives ACTT services daily to cope with anxiety

10. Safety to Self

10.1 Safety to Self: Overview

<p>Trigger Questions</p> <p>Have thoughts and/or acts of harming yourself been a problem (an area of need)? Are you getting the help you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> •To determine that the person has no suicidal thoughts or self harm behaviours. •To determine that the person needs and is receiving help for suicidal and self harm behaviour. •To determine if the person is at risk of serious self harm. 	<p>Guiding Questions</p> <ul style="list-style-type: none"> •Do you ever feel that life is not worth living? •Do you ever go to bed hoping to not wake up? •Have you ever thought that others would be better off without you? •Have you visualized or planned how you might harm yourself? •Do you have anything at home that you would use to hurt yourself? •How often do you have thoughts of hurting or killing yourself? •Have you hurt yourself in the past? If the answer is yes...ask “By what means?” •Has anyone in your family ever killed themselves? <p>NOTE: Although these questions encompass many common aspects of suicide risk assessment they are not intended to represent an exhaustive list of the appropriate questions or constitute a full suicide risk assessment where one may be indicated. If a client indicates that s/he currently has suicidal thoughts, then a suicide risk assessment should be conducted by a trained member of staff.</p>	<p>Consumer Issues</p> <ul style="list-style-type: none"> •Prior acts of self-harm should be considered when assessing this domain. •Remember that the presence of command hallucinations (voices telling the person to harm himself) is an extreme risk factor for self harm. •Identify recent stressors, losses, and family history of self harm and the consumer’s use of drugs or alcohol, all of which would increase risk. •Determine protective factors such as family, religious beliefs, coping skills. •Rely on supervision or consultation if you feel assessment of this domain presents challenges that you believe may be outside your scope of practice, experience or expertise.
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10.2 Safety to Self: Need and Help Rating Examples

Need Rating	Need Examples
0	Person is not at risk of self-harm
1	Person has occasional thoughts of harming self, but accesses crisis line
2	Person admits to wandering into traffic Person has been hospitalized repeatedly for self mutilation

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help to reduce the risk of self-harm, for example: <ul style="list-style-type: none"> - Person calls friends when feeling unsafe - Person calls family members as necessary
2	Regular help to reduce the risk of self-harm, for example: <ul style="list-style-type: none"> - Family monitor risk of harm regularly - Friends provide emotional support regularly
3	Substantial help to reduce the risk of self-harm, for example: <ul style="list-style-type: none"> - Person calls on family member nightly - Friends rotate in providing company to monitor risk of harm

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help to reduce the risk of self-harm, for example: <ul style="list-style-type: none"> - Person has a “Keep Safe Plan” on file with Case Manager - Person calls crisis line when necessary
2	Regular help to reduce the risk of self-harm, for example: <ul style="list-style-type: none"> - Person accesses Mobile Crisis Team regularly - Person receives therapy regularly
3	Substantial help to reduce the risk of self-harm, for example: <ul style="list-style-type: none"> - Person receives frequent risk assessment by ACTT Team - Person receives Intensive Case Management to monitor suicidal ideation

11. Safety to others

11.1 Safety to Others: Overview

Trigger Questions	Intent	Guiding Questions	Consumer Issues
<p>Have thoughts and/or acts of harming others been a problem (an area of need)? Are you getting the help you need?</p>	<ul style="list-style-type: none"> • To determine that the person has no history of violence or threatening behaviour. • To determine if the person is at risk of harming others and is getting help. • To determine if the person is engaged in behaviour resulting in harm to others. 	<ul style="list-style-type: none"> • At times we all become angry, please tell me about a time that you became angry. How did you deal with this and do you feel it was positive or could you have reacted differently? • Is there someone in your life causing you a great deal of stress? • Do you feel the need to protect yourself? • Are you concerned that others may be trying to harm you? If so, how have you dealt with this in the past and what do you intend to do about it? • Do you blame others when you get angry? • Have you ever been in difficulty with the police because of fighting with others? • Has anyone ever suggested you attend anger management sessions? • Have you ever been criminally charged for harming someone else? • Did you witness any violence in the home when you were growing up? • In any previous fights, have you felt that the other person deserved what they got? 	<ul style="list-style-type: none"> • Adults who witnessed domestic violence when they were growing up or who were victims of abuse are at greater risk for posing a safety risk to others. • Substance abuse often increases the safety risk to others in a person prone to violence. • Hostility often masks fear and insecurity • Remember that symptoms of mental illness, especially paranoia, may significantly increase the safety risk of harm to others.

11.2 Safety to Others: Need and Help Rating Examples

Need Rating	Need Examples
0	Person has no history of violence or threatening behaviour
1	Person is at risk of violence and receives intensive support Person accesses crisis bed when thoughts of violence are overwhelming
2	Person has breached probation on assault charges Person is a high risk to family who are now in a shelter Person is a convicted pedophile with constant thoughts

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help managing risk of harm to others, for example: - Person occasionally calls family members to talk things out
2	Regular help managing risk of harm to others, for example: - Person's family regularly monitors emotional state - Person's friends regularly provide emotional support
3	Substantial help managing risk of harm to others, for example: - Person's friends rotate in providing company to monitor risk of harm to others - Person's family frequently monitors emotional state

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help managing risk of harm to others, for example: - Person has monthly appointments with a probation worker - Person calls crisis line when necessary
2	Regular help managing risk of harm to others, for example: - Person accesses Mobile Crisis Team regularly - Person has regular appointments with Case Manager to assist with anger management
3	Substantial help managing risk of harm to others, for example: - Person receives frequent risk assessment by ACTT Team - Person receives Intensive Court Diversion support

12. Alcohol

12.1 Alcohol: Overview

<p>Trigger Questions</p> <p>Has alcohol use been a problem (an area of need)? Are you getting the help you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> • To determine if drinking is controlled. • To determine that the person requires and is receiving help for alcohol use. • To determine if current drinking has caused any harmful effects or loss of control of use. 	<p>Guiding Questions</p> <ul style="list-style-type: none"> • Has drinking caused you any problems in your life? • Do you find that you lose control when you drink? Have you ever lost control while drinking? • Do you want to cut down on your drinking? • Do you drink? If yes, what do you see as the impact that drinking has on you? How does drinking affect your daily functioning? • How would you describe the amount that you drink? How often do you drink? Do you want to reduce the amount and frequency that you drink? • How and when do you start drinking? • If the answer is “It’s just a social drink”, then staff can ask the individual what does he/she consider to be a “social drink”? • Have you ever got into any difficulties or trouble because of drinking? • How do your family members/significant others respond to/comment on your drinking? • . 	<p>Consumer Issues</p> <ul style="list-style-type: none"> • Remember that there continues to be some stigma about alcohol misuse and that consumers will need to feel very comfortable in order to reveal accurate information • Take note of cultural beliefs and practices concerning alcohol consumption • Consider patterns of alcohol use. For example, is use impacted by the amount of money available to the consumer and/or geographic remoteness, isolation?
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12.2 Alcohol: Need and Help Rating Examples

Need Rating	Need Examples
0	Person has no problem with controlled drinking.
1	Person has reduced use of alcohol from daily use to occasional use as a result of counselling Person has been a successful member of AA for 6 months
2	Person has been diagnosed with liver disease and is still drinking Person has been hospitalized repeatedly for alcohol poisoning Current drinking harmful or uncontrollable

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with issues around alcohol, for example: <ul style="list-style-type: none"> - Person's friend provides occasional rides to group therapy - Person's family members lend support when asked
2	Regular help with issues around alcohol, for example: <ul style="list-style-type: none"> - Person's family regularly monitor access to alcohol - Person's friend regularly provides emotional support
3	Substantial help with issues around alcohol, for example: <ul style="list-style-type: none"> - Person calls on family member nightly for counselling - Person's family manages money and access to alcohol

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with issues around alcohol, for example: <ul style="list-style-type: none"> - Person has appointments with harm reduction counsellor when necessary
2	Regular help with issues around alcohol, for example: <ul style="list-style-type: none"> - Person has regular discussions with Case Manager around use and coping strategies. - Person receives regular therapy at Addictions agency
3	Substantial help with issues around alcohol, for example: <ul style="list-style-type: none"> - Person is receiving frequent visits from Addictions Specialist/health care worker

13. Drugs

13.1 Drugs: Overview

Trigger Questions	Intent	Guiding Questions	Consumer Issues
<p>Has drug use been a problem (an area of need)? This could include illicit drugs or misuse of prescription drugs? Are you getting the help you need?</p>	<ul style="list-style-type: none"> • To determine that the person has no physical or psychological dependency on prescribed, non-prescribed or illegal drugs. • To determine if the person is receiving help for physical or psychological dependency on prescribed, non-prescribed or illegal drugs. • To determine if the person's current physical and/or psychological dependency on prescribed, non-prescribed or illegal drugs seriously impacts their quality of life. 	<ul style="list-style-type: none"> • Has anyone ever suggested you should cut down or stop using street or prescription drugs? • Do you ever regret the money you spend to get and use drugs? • Have you ever attempted to stop using drugs and been unable to do so? • Has using drugs ever gotten you into any trouble? • Do you and your friends get together to share drugs? • Have you had experiences where using drugs has made symptoms of physical and/or mental illness worse? • What does your doctor have to say about the effect of drugs on your mental health? 	<ul style="list-style-type: none"> • Using street drugs or misusing prescription medication with his or her peers may be one of the person's most pleasurable activities and their major source of social interaction • Abuse of even small amounts of non-prescribed drugs may seriously aggravate symptoms of mental illness; the concept of "recreational" drug use without consequences does not seem to apply • Remember that there is a stigma about drug abuse and that consumers will need to feel very comfortable in order to reveal accurate information • Identify the substances and patterns of use and abuse that would help determine the seriousness of the problem

13.2 Drugs: Need and Help Rating Examples

Need Rating	Need Examples
0	Person does not misuse drugs
1	Person is on a supervised Methadone program
2	Person misuses prescribed, non-prescribed or illegal drugs Person has a serious cocaine addiction that has caused frequent hospitalization

Help Rating	Informal Help
0	No help from family or friends
1	Some / occasional help with issues around drug misuse, for example: <ul style="list-style-type: none"> - Person calls friends who are clean when feeling unsafe - Person calls family members as necessary
2	Regular help with issues around drug misuse, for example: <ul style="list-style-type: none"> - Person's family provide motivation to stay clean regularly - Person's friend provides emotional support regularly
3	Substantial help with issues around drug misuse, for example: <ul style="list-style-type: none"> - Person calls on friends daily for support - Person's family ensures no available money to buy drugs

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with issues around drugs, for example: <ul style="list-style-type: none"> - Person has appointments with harm reduction counsellor when necessary
2	Regular help with issues around drugs, for example: <ul style="list-style-type: none"> - Person attends weekly Safe Needle Exchange and counselling - Person receives regular therapy at Addictions agency.
3	Substantial help with issues around drugs, for example: <ul style="list-style-type: none"> - Person admitted to residential concurrent disorders program - Person is receiving daily visits from Addictions Specialist on ACTT

14. Other Addictions

14.1 Other Addictions: Overview

<p>Trigger Questions</p> <p>Have other addictions been a problem (an area of need)? Other addictions could include gambling, overuse of electronic devices or smoking. Are you getting the help you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> •To determine if the person has no problem with behavioural addictions such as gambling, porn and/or sex. •To determine if the person needs and is receiving help for behavioural addictions. •To determine if the person’s behavioural addictions seriously impact their quality of life. 	<p>Guiding Questions</p> <ul style="list-style-type: none"> •Do you think you have an addiction to things other than drugs and alcohol, such as gambling, internet, lottery...? •Has anyone ever suggested you should cut down or stop your addictive behaviour? •Do you ever regret the money you spend on your addiction? •Have you ever attempted to stop your addiction and been unable to do so? •Has your behaviour ever gotten you into any trouble? •Do you recall experiences where your addiction made symptoms of physical and/or mental health worse? •What does your doctor say about your addiction and its effect on your physical and/or mental health? •Does your addiction cause any conflicts with your family? •Does practice of your addiction cause you any problems where you live? 	<p>Consumer Issues</p> <ul style="list-style-type: none"> •There is a high degree of stigma attached to certain addictions, especially sexual compulsions. •Individuals may deny or minimize details when it comes to addiction. Some may not acknowledge the term addiction and terms such as “excessive” or “overused” behaviours may be used.
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14.2 Other Addictions: Need and Help Rating Examples

Need Rating	Need Examples
0	Person has no other addictions
1	Person has gambling addiction and uses support group to deal with problem
2	Person unable to stop using internet porn sites and has lost job and wife Person uses all funds for Bingo and Nevada tickets Person uses grocery/rent money to support other addiction

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with addiction issues, for example: <ul style="list-style-type: none"> - Person calls friends when feeling unsafe - Person calls family members as necessary
2	Regular help with addiction issues, for example: <ul style="list-style-type: none"> - Person's family monitors activities and access to the internet regularly - Person's friends provide rides to support group regularly
3	Substantial help with addiction issues, for example: <ul style="list-style-type: none"> - Person calls on family member nightly for support - Person's family paying for treatment

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with addiction issues, for example: <ul style="list-style-type: none"> - Person occasionally meets with Case Manager to manage compulsions - Person calls crisis line when necessary and finds this helpful
2	Regular help with addiction issues, for example: <ul style="list-style-type: none"> - Person accesses Mobile Crisis Team regularly - Person attends individual and group therapy regularly
3	Substantial help with addiction issues, for example: <ul style="list-style-type: none"> - Person receives daily monitoring by ACTT to reduce behaviours and increase coping - Person admitted to residential treatment home

15. Company

15.1 Company: Overview

Trigger Questions Has your social life been a problem (an area of need)? Are you getting the help you need	Intent <ul style="list-style-type: none"> •To determine if the person is able to organize social/friend/family contact. •To determine if the person needs and receives help/support in organizing social contact. •To determine if the person feels lonely and isolated. 	Guiding Questions <ul style="list-style-type: none"> •When is the last time you socialized with friends? •Describe something fun you did with a friend lately. •How often do you have contact with members of your family? •Are you involved in family social activities, e.g. going out for a meal, visiting with relatives, etc? •List some activities you might enjoy doing with others. 	Consumer Issues <ul style="list-style-type: none"> •Not having a social network may be an area of bitter disappointment and deep hurt for some individuals. •Remain aware that accepting the status quo, even if undesirable, is often a coping mechanism for persons who lack friends •Some individuals may prefer/enjoy a solitary life. •Conflict in communities/neighbourhoods may foster feelings of isolation and loneliness. •Prejudice/racism against visible minorities may cause individuals to isolate themselves or be isolated.
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15.2 Company: Need and Help Rating Examples

Need Rating	Need Examples
0	Person is able to organize social contact
1	Person accesses social contacts through peer group and arranged social activities
2	Person is isolated at home with no social contacts

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with social life, for example: <ul style="list-style-type: none"> - Person occasionally calls friends when wanting company - Person calls family members as necessary
2	Regular help with social contact, for example: <ul style="list-style-type: none"> - Person participates in weekend gatherings with family members - Person regularly attends social club activities
3	Substantial help with social contact, for example: Persons has contact with family members several times per day <ul style="list-style-type: none"> - Friends invite person over or drop by daily

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with social contact, for example: <ul style="list-style-type: none"> - Person attends recreational program as wanted - Person invited to any social activities sponsored by local services
2	Regular help with social contact, for example: <ul style="list-style-type: none"> - Person regularly attends a social rehabilitation program - Person regularly helps to coach hockey teams with Case Manager's encouragement.
3	Substantial help with social contact, for example: <ul style="list-style-type: none"> - Person receives Intensive Case Manager services to facilitate social contacts

16. Intimate Relationships

16.1 Intimate Relationships: Overview

<p>Trigger Questions</p> <p>Have close personal relationships been a problem (an area of need)? Are you getting the help you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> • To determine if the person maintains close relationships. • To determine if the person needs and receives help for issues around close relationships. • To determine if the person is at risk in current relationship or identifies a need for a close relationship. 	<p>Guiding Questions</p> <ul style="list-style-type: none"> • Do you have a partner or an individual with whom you feel close? • Do you have problems in your partnership/marriage/friends hip? • Who are the important people in your life? • Which family members do you feel most attached to? • Are you satisfied with the relationships that you currently have? • Who are the people who have influenced your life? • Are there any changes you would desire in these relationships? • Are there relationships that bring you joy? 	<p>Consumer Issues</p> <ul style="list-style-type: none"> • Acknowledge that not everyone desires intimate relationships in the traditional way • Be alert to any indications of violence or abuse • Loneliness, isolation and anxiety may result where persons have few intimate relationships • Overt conflict may stem from unreported sexual issues that require a high degree of sensitivity and support • Note that problems in this domain frequently damage self-esteem
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16.2 Intimate Relationships: Need and Help Rating Examples

Need Rating	Need Examples
0	Person has satisfactory relationships with family, close friends, and/or partner
1	Person identifies problems in partnership with help from therapist
2	Person experiences violence in relationship Person has no intimate relationship which causes strong feelings of loneliness

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with forming and maintaining intimate relationship, for example: - Person receives some occasional help from family to help problem solve relationship issues
2	Regular help with forming and maintaining intimate relationships, for example: - Person receives regular assistance from friends in setting boundaries with others - Person participates in regular social activities with best friend
3	Substantial help with forming and maintaining intimate relationships, for example: - Pastor provides frequent relationship counselling

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with forming and maintaining intimate relationships, for example: - Person attends agency sponsored social events to meet new people
2	Regular help with forming and maintaining intimate relationships, for example: - Person attends anger management therapy and social skills counselling regularly
3	Substantial help with forming and maintaining intimate relationships, for example: - Person receives substantial help in developing and implementing a plan to promote healthy relationships

17. Sexual Expression

17.1 Sexual Expression: Overview

Trigger Questions Has your sex life and sexual health been a problem (an area of need)? Are you getting the help you need?	Intent <ul style="list-style-type: none"> • To determine if the person is satisfied with • his/her sexual expression. • To determine if the person needs and receives help with issues related to sexual expression. • To determine if the person has serious • sexual difficulty or engages in risky sexual behaviours. 	Guiding Questions <ul style="list-style-type: none"> • What does sexuality mean to you? • What does a meaningful sexual relationship look like to you? • Are you sexually active? • Emphasize that physical health is an important component of all OCAN questions including sexuality (if consumers are uncomfortable, move on, respect their decision) • Do you have any concerns about your sexual relationships? • Are you comfortable with your opportunities for sexual expression? • Once the topic has been effectively introduced, questions about past treatment for sexual issues could be introduced? • Worker could explore concerns/questions about masturbation. 	Consumer Issues <ul style="list-style-type: none"> • The consumer's mental health status and personal choice will determine whether this domain is explored • The consumer's comfort level will be impacted by worker self-awareness and practice comfort level in asking these questions • Remember to take gender differences into account during interviews-e.g. man interviewing a woman and vice versa
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17.2 Sexual Expression: Need and Help Rating Examples

Need Rating	Need Examples
0	Person is satisfied with current sexual expression
1	Person receives health teaching about erectile dysfunction Person and partner in counselling regarding communication, intimacy and sexuality
2	Person engages in high-risk sexual behaviours

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with sexual expression, for example: <ul style="list-style-type: none"> - Person linked to community health clinic by a friend - Person occasional talks with family member about his sexual frustration
2	Regular help with sexual expression, for example: <ul style="list-style-type: none"> - Person's partner attended several appointments to investigate causes of erectile dysfunction
3	Substantial help with sexual expression, for example: <ul style="list-style-type: none"> - Family paying for sex therapist

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with sexual expression, for example: <ul style="list-style-type: none"> - Person occasionally visits psychiatrist to discuss side effects and alternative medications
2	Regular help with sexual expression, for example: <ul style="list-style-type: none"> - Person regularly attends health teaching provided by agency - Person regularly attends marital counselling regarding sexual issues in relationship
3	Substantial help with sexual expression, for example: <ul style="list-style-type: none"> - Person receives daily monitoring around impulse control associated with psychosis - Person receiving daily monitoring around use of Depo Provera medication in order to reduce sexual urges.

18. Child Care

18.1 Child Care: Overview

<p>Trigger Questions</p> <p>Has looking after your children been a problem (an area of need)? This could include access to child care or parenting. Are you getting the help you need?</p>	<p>Intent</p> <ul style="list-style-type: none"> •To determine if the person is able to parent their children. •To determine if the person needs and receives help parenting their children. •To determine if the person is having serious difficulties parenting their children. 	<p>Guiding Questions</p> <ul style="list-style-type: none"> •Are you the primary caregiver for a child that is under the age of 18? •Are you a parent? Do you have children? •Do you have any difficulty looking after them? •Have childhood experiences affected your parenting style? •What circumstances, if any, make it difficult for you to care for your children? 	<p>Consumer Issues</p> <ul style="list-style-type: none"> •Grieving loss of children to social services; inability to provide. (past or current) •Loss of visitation rights, custody issues and divorce. •Removal from the home of loved ones •Loss of unborn children. •History of abortion. •Negative family of origin issues; childhood spent with alcoholic family members or abusive parents. •Cultural taboos about discussing family business with outsiders.
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18.2 Child Cre: Need and Help Rating Examples

Need Rating	Need Examples
0	Person has no children under age 18 or no problem with looking after children
1	Person has difficulties with parenting and receives help
2	Children identified as at risk and supervised by Children's Aid Society Person currently unable to care for children

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with child care, for example: <ul style="list-style-type: none"> - Person attends “parents without partners” support group occasionally - Family provides occasional child care
2	Regular help with child care, for example: <ul style="list-style-type: none"> - Person receives parenting instruction, childcare and emotional support from family on a regular basis - Friends regularly provide care for children
3	Substantial help with child care, for example: <ul style="list-style-type: none"> - Person lives with family who provide daily childcare

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with child care, for example: <ul style="list-style-type: none"> - Person receives occasional health care for both herself and child - Worker links mom and child to community centre
2	Regular help with child care, for example: <ul style="list-style-type: none"> - Person receives subsidized day care to support vocational needs
3	Substantial help with child care, for example: <ul style="list-style-type: none"> - Person receives frequent ACTT in-home visits to monitor parenting skills - Person receives frequent counselling related to plans to regain custody of children

19. Other Dependents

19.1 Other Dependents: Overview

Trigger Questions Has looking after other dependents been a problem (an area of need)? Other dependents could include elderly parents and pets. Are you getting the help you need?	Intent <ul style="list-style-type: none"> • To determine if the person is able to care for a loved one, a neighbour or a pet. • To determine if the person needs and is receiving help looking a loved one, a neighbour or a pet. • To determine if the person is having serious difficulty looking after dependents. 	Guiding Questions <ul style="list-style-type: none"> • Are you responsible for the care, either full or part-time of a loved one, a pet, a neighbour, or does anyone else depend on your care? • Are you a caregiver? Do you have someone who depends on you? • Do you have pets? • Do you have any difficulty looking after them? • Have childhood experiences affected your care-giving style? • What circumstances, if any, make it difficult for you to care for your dependents? (other than your children under 18)? 	Consumer Issues <ul style="list-style-type: none"> • Grieving loss of pet; or inability to provide for current pet. • Involuntary loss of or removal from responsibilities due to mental health symptoms. • Despite best intentions, inability to care for adult children or other non-children dependents. • Negative family of origin issues; cultural expectations around caring for elderly parents which may cause stress.
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19.2 Other Dependents: Need and Help Rating Examples

Need Rating	Need Examples
0	Person has no dependent or has no problem caring for dependent
1	Person has difficulties coping with ill parent and receives support
2	Person currently unable to care for dependent

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with care for dependent, for example: Person's friends occasionally provide care for dependent
2	Regular help with care for dependent, for example: - Person's family regularly provide care for dependent
3	Substantial help with care for dependent, for example: - Person lives with family who provide daily care for dependent

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help care for dependent, for example: - Worker links person to support group
2	Regular help with care for dependent, for example: - Person receives subsidized respite care to support vocational needs
3	Substantial help with care for dependent, for example: - Person receives frequent ACTT in-home visits to monitor coping

20. Basic Education

20.1 Basic Education: Overview

Trigger Questions	Intent	Guiding Questions	Consumer Issues
<p>Has reading, writing or basic math been a problem (an area of need)? Are you getting the help you need?</p>	<ul style="list-style-type: none"> • To determine if the person is able to read, write and understand English/French forms. • To determine if the person needs and receives help from others to read, write and understand English/French forms. • To determine if the person has serious difficulty reading, writing and understanding English/French forms. 	<ul style="list-style-type: none"> • What language do you use for day to day communications? • Do you have any trouble filling out forms? • How do you find reading, writing and speaking English/French? • How do you deal with the issues you have identified in the use of English? Do you get support from others? What type of support did you find helpful? • Do you think your illness has impact on your application of your education in pursuing what you want to do? • If relevant: “Do you think you have issues with applying your education in pursuing your goals after you immigrated to Canada? What are some of the issues?” 	<ul style="list-style-type: none"> • Be alert to any possible bias when associating an individual’s education and cognitive skills with ethnicity or immigration status. • Remember individuals feel very sensitive about education if they have limited schooling. • Be sensitive as there are individuals who are highly educated and may feel offended being asked questions on basic education. • Despite being able to function day to day in her/his community, without need for English or French language the main challenge is filling out government or social services form.

20.2 Basic Education: Need and Help Rating Examples

Need Rating	Need Examples
0	Person able to read, write and understand English/French forms
1	Person receives help to pay all bills and read all correspondence
2	Person has difficulty with reading, writing and understanding English/French forms

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with numeracy and literacy, for example: <ul style="list-style-type: none"> - Person receives occasional help from friend to learn to read - Person is referred to literacy group by family
2	Regular help with numeracy and literacy, for example: <ul style="list-style-type: none"> - Person regularly receives bill payment and banking assistance from family
3	Substantial help with numeracy and literacy, for example: <ul style="list-style-type: none"> - Person's partner takes care of all matters requiring these skills

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with numeracy and literacy, for example: <ul style="list-style-type: none"> - Worker arranged for volunteer to provide some occasional assistance and training
2	Regular help with numeracy and literacy, for example: <ul style="list-style-type: none"> - Worker regularly provides help around paying bills, shopping and banking
3	Substantial help with numeracy and literacy, for example: <ul style="list-style-type: none"> - Frequent encouragement and assistance from Case Manager for person to attend educational upgrading - Person attends daily English as a Second Language training at local community college

21. Communication

21.1 Communication Overview

Trigger Questions Has accessing or using a phone or computer been a problem (an area of need)? Are you getting the help you need?	Intent <ul style="list-style-type: none"> • To determine if the person can use a telephone or other means of communication. • To determine if the person able but dependent on others for use of phone or other means of communication. • To determine if the person has no access or ability to use a telephone or other means of communication. 	Guiding Questions <ul style="list-style-type: none"> • What is the best way for me to get in touch with you? • How would you prefer service providers to get in touch with you? • If you had an emergency, how would you reach out for help? • How do you contact your family and friends? • Do you have any concerns or frustrations about using the telephone or email? • Do you have any need for special communication devices and are these important to you? • Have you or do you have any reservations using a telephone? • Have you ever been provided with a phone card? 	Consumer Issues <ul style="list-style-type: none"> • Privacy and confidentiality— don't assume that you can leave a voicemail without violating the consumer's privacy; make sure you check with the individual. • Ensure consumer is comfortable with voicemail; has a password and the skill and will to use it.
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21.2 Communication: Need and Help Rating Examples

Need Rating	Need examples
0	Person has easy access to and can manage use of telephone or computer
1	Person has to request use of telephone or computer
2	Person has no access and/or is unable to use a telephone or computer

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some /occasional assistance with telephone use, for example: <ul style="list-style-type: none"> - Family provides one time security deposit to hook up telephone - Family occasionally provides person with a calling card
2	Regular assistance with telephone use, for example: <ul style="list-style-type: none"> - Person goes across hall to regularly use friend's phone for local calls - Family regularly take message on behalf of person
3	Substantial assistance with telephone use, for example: <ul style="list-style-type: none"> - Person lives with family who pay all bills and is provides a private phone

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional assistance with telephone use, for example: <ul style="list-style-type: none"> - Person living in group home and occasionally uses phone in private office - Person receives coaching from Case Manager around use of telephone book
2	Regular assistance with telephone use, for example: <ul style="list-style-type: none"> - Worker regularly provides coaching around use of crisis line
3	Substantial assistance with telephone use, for example: <ul style="list-style-type: none"> - ACTT frequently monitors person's compulsive cell phone use

22. Transport

22.1 Transport: Overview

Trigger Questions	Intent	Guiding Questions	Consumer Issues
<p>Has transportation been a problem (an area of need)? This could include getting to and from appointments and daily activities. Are you getting the help you need?</p>	<ul style="list-style-type: none"> • To determine if the person has the ability to use transportation. • To determine if the person needs and receives help with transportation needs. • To determine if the person has serious difficulties with transportation. 	<ul style="list-style-type: none"> • Do you get help with transportation from friends or family? • Do you feel comfortable when riding the bus or would you rather walk? • What arrangements do you make for grocery shopping? • Have you ever qualified for a bus pass before? • Do you have a car or access to one? • Have you ever been asked to get off a bus because of some misunderstanding or conflict with someone? • Have transportation problems caused you difficulty in pursuing employment or education? • Do you miss out on other opportunities because you have no way to get there? 	<ul style="list-style-type: none"> • Note that having a valid driver's license and mobility in general is seen as an important sign of adult independence in our society. • Not being able to drive, or get around, for whatever reason, is a source of shame, resentment or bitterness for many.

22.2 Transport: Need and Help Rating Examples

Need Rating	Need Examples
0	Person able to use public transport or has access to a car
1	Person requires and is receiving transportation allowance from ODSP Family provides transportation to doctor appointments, as the person has no other means of transport
2	<ul style="list-style-type: none"> - Person is unable to use public transport - Person is unable to learn transit system - Person has no access to public transit with no available alternatives

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional assistance with transport needs, for example: family provided rides to medical appointments, social outings
2	Regular assistance with transport, for example: <ul style="list-style-type: none"> - Person regularly travels with family for safety - Person's friends regularly provide rides
3	Substantial assistance to travel, for example: <ul style="list-style-type: none"> - Person's family meet all transportation needs

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional assistance to travel, for example: <ul style="list-style-type: none"> - Worker arranged for monthly bus pass for person
2	Regular assistance with transport needs, for example: <ul style="list-style-type: none"> - Worker provides regular coaching around use of public transport
3	Substantial assistance with transports, for example: <ul style="list-style-type: none"> - Person is picked up by program bus to attend day program

23. Money

23.1 Money: Overview

Trigger Questions	Intent	Guiding Questions	Consumer Issues
<p>Has managing your money been a problem (an area of need)? Are you getting the help you need?</p>	<ul style="list-style-type: none"> • To determine if the person is able to manage their money and can buy essential items. • To determine if the person needs and receives help with managing money and budgeting. • To determine if the person has serious difficulties managing money and budgeting. 	<ul style="list-style-type: none"> • Do you manage your own money, pay your own bills, your rent and buy things you need? • Does your money last or does it run out? • Do you have enough money to meet your needs? • What is your source of income? • When do you run out of money? • Have you ever used a budget? Do you think that might be helpful? • Do you have financial stress right now? • What is important for you to spend your money on? • If you are short of money is there someone you can turn to for help? • Have you ever been evicted for not paying rent? 	<ul style="list-style-type: none"> • Questions about money in our society are often experienced as intrusive and judgmental. • Acknowledge the difficulty in managing money; compliment someone on their resilience in coping with the hardships of managing on a limited income.

23.2 Monday: Need and Help Rating Examples

Need Rating	Need Examples
0	Person is able to buy essential items and pay bills
1	Person receives money management services through a trustee arrangement
2	Person often has no money for essentials or bills

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help with money, for example: <ul style="list-style-type: none"> - Person without a bank account receives occasional family help to cash cheques
2	Regular help with money, for example: <ul style="list-style-type: none"> - Person's family regularly supplement income
3	Substantial help with money, for example: <ul style="list-style-type: none"> - Person's family manages all financial affairs

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help with money, for example: <ul style="list-style-type: none"> - Person receives life skills coaching regarding money - Person is referred by worker to food bank to help stretch money - Person receives occasional counselling around money management
2	Regular help with money, for example: <ul style="list-style-type: none"> - Person regularly participates in money management program
3	Substantial help with money, for example: <ul style="list-style-type: none"> - Person receives complete money management services via Public Guardian and Trustee - Receives help from Case Manager to ensure that rent and bills are paid and budget is maintained

24. Benefits

24.1 Benefits: Overview

Trigger Questions	Intent	Guiding Questions	Consumer Issues
<p>Has accessing the benefits/money you're entitled to been a problem (an area of need)? This could include Ontario works, Disability Support Program and Drug Benefit. Are you getting the help you need?</p>	<ul style="list-style-type: none"> •To determine if the person is receiving his/her full entitlement of benefits. •To determine if the person needs and is receiving help in applying for and maintaining benefits. •To determine if the person has serious difficulty in receiving their entitled benefits. 	<ul style="list-style-type: none"> •Are you aware of all the sources of money and benefits that you are entitled to? •Do they have or need any of the usual benefits such as: Drug Benefits Card or Dental Benefits card? •Optional - transportation allowance, access to special allowances for diabetic care supplies, special diets, prosthetics or other assistive devices. •Does the person qualify for rent subsidy? •Determine whether the person is on a provincial disability pension (if warranted) versus Ontario Works •Determine whether the consumer has ever been refused, cut off or asked to repay any benefits 	<ul style="list-style-type: none"> •Clients often have had negative experiences when it comes to benefits since they may find the system complex, bureaucratic, difficult to access, arbitrary, and genuinely confusing •Symptoms of mental illness may impact an individual's response to these types of questions, e.g. paranoia or grandiose delusions •Some individuals have run afoul of the benefit system and either intentionally or unknowingly received benefits they were not entitled to, causing a clawback situation •Immigration status affects ability to receive any benefits

24.2 Benefits: Need and Help Rating Examples

Need Rating	Need Examples
0	Person receives full benefit entitlement
1	Person receives help to fill out benefit forms
2	Person is not receiving benefits and has no financial means of support

Help Rating	Informal Help Examples
0	No help from family or friends
1	Some / occasional help in receiving full entitlement to benefits, for example: <ul style="list-style-type: none"> - Person with no fixed address is using friend's home as a mail drop - Family occasionally assists in completing benefit forms
2	Regular help in receiving full entitlement to benefits, for example: <ul style="list-style-type: none"> - Person's family regularly advocates for increased benefits
3	Substantial help in receiving full entitlement to benefits, for example: <ul style="list-style-type: none"> - Person's family fights ODSP appeal

Help Rating	Formal Help Examples
0	No help from local services
1	Some / occasional help in receiving full entitlement to benefits, for example: <ul style="list-style-type: none"> - Worker occasionally monitors document submission for benefits - Nurse practitioner applies for client to receive special diabetic needs allowance
2	Regular help in receiving full entitlement to benefits, for example: <ul style="list-style-type: none"> - Worker assists person with regular communication with ODSP
3	Substantial help in receiving full entitlement to benefits, for example: <ul style="list-style-type: none"> - Person cut off Ontario Works for failure to provide address and needs intense advocacy Person has been denied ODSP and worker documents and helps to appeal the decision