

## PROPOSED CHECKLIST FOR MENTAL HEALTH CARE PLANS AND CWP

<p><b>1 Staying well</b></p> <p><u>1.1 To stay <i>mentally well</i>:</u></p> <p>1.1.1 What do you find helps you to <b>stay well</b> and what tends to make you <b>unwell</b>?</p> <p>1.1.2 What can you do to <b>help yourself</b> stay mentally well?</p> <p>1.1.3 What <b>help from others</b> do you need to stay mentally well? (<i>e.g. medication &amp; talking treatment options, goals, etc.</i>)</p> <p><u>1.2 For your <i>physical health</i> needs:</u></p> <p>1.2.1 Do you get an <b>annual health check</b> from your GP?</p> <p>1.2.2 Do you have any <b>long term conditions</b> or <b>disabilities</b>?</p> <p>1.2.3 What <b>further help</b> with these difficulties do you need?</p> <p><u>1.3 For your <i>accommodation, daily living and mobility</i> needs:</u></p> <p>1.3.1 How well are these needs being met? (e.g. well, not very well, unacceptable)</p> <p>1.3.2 Do you need <b>support</b> to meet these needs?</p> <p>1.3.3 Do you need help to clarify or obtain <b>benefits</b>?</p>	<p><b>2 Staying safe</b></p> <p><u>2.1 Have you any <i>history of harm</i>:</u></p> <p>2.1.1 <b>to yourself?</b> (e.g. self-neglect, self-injury, alcohol or drug dependency)</p> <p>2.1.2 <b>from others?</b> (e.g. bullying, abuse, violence)</p> <p>2.1.3 <b>to others?</b> (e.g. aggression, anger management concerns)</p> <p><u>2.2 For your <i>Personal Safety Plan</i>:</u></p> <p>2.2.1 What are your <b>triggers</b> and <b>advance signs</b> for a crisis?</p> <p>2.2.2 What helps you to <b>keep yourself safe</b>?</p> <p>2.2.3 What <b>help from others</b> do you need to stay safe?</p> <p><u>2.3 For your <i>treatment</i> and the <i>involvement of others</i>:</u></p> <p>2.3.1 Who and what do you <b>want</b> to be involved in your care, particularly in a crisis?</p> <p>2.3.2 Who and what do you <b>not want</b> to be involved in your care?</p> <p>2.3.3 Do you have an <b>Advance Statement</b> in place to record your wishes?</p>	<p><b>3 Achieving aspirations</b></p> <p><u>3.1 How your <i>financial needs</i> are being met:</u></p> <p>3.1.1 Are you in <b>full time</b> or <b>part time</b> employment or <b>solely on benefits</b>?</p> <p>3.1.2 Do you need help with <b>education, training</b> or <b>employment finding</b>?</p> <p>3.1.3 Do you need help with clarifying and obtaining your <b>benefits</b>?</p> <p><u>3.2 <i>Relationships</i>:</u></p> <p>3.2.1 What <b>family</b> relationships do you have?</p> <p>3.2.2 What <b>carer</b> responsibilities do you have and have you had a <b>Carer Assessment</b>?</p> <p>3.2.3 What <b>help from others</b> do you need to cope with these responsibilities?</p> <p><u>3.3 <i>Voluntary and leisure</i> interests:</u></p> <p>3.3.1 What hobbies and voluntary and leisure interests do you have <b>already</b>?</p> <p>3.3.2 What can you do to help yourself <b>enjoy and increase these activities</b>?</p> <p>3.3.3 What <b>help from others</b> do you need to increase these activities.</p>
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