

Online supplement



editorial

The Elderly Psychiatric Needs Schedule

1. Psychiatric assessment and treatment needs: does the patient have a problem with their nerves in the form of anxiety, depression, abnormal beliefs or experiences (delusion or hallucinations)?
2. Dementia assessment and management needs: does the patient have problem with his/her memory?
3. Management of medication: does the patient have difficulty in complying with or understanding the way she/he should take medication (e.g. needs doset box or community psychiatric nurse visit)?
4. Substance misuse services needs: has the patient been harmed by consuming alcohol or prescribed or non-prescribed drugs that are causing dependence, confusion or unusual behaviour?
5. Physical health needs: does the patient have a physical health problem that affects his/her quality of life or requiring regular treatment (e.g. having hypertension, diabetes and coronary heart diseases)?
6. Communication needs: does the patient have significant sensory impairment in hearing or vision?
7. Mobility needs: does the patient have a problem with his mobility that makes him/her require or receive assessment and help with physical mobility (e.g. physiotherapy assessment, mobility aids)?
8. Incontinence service need: does the patient have incontinence problem related to bowels or bladder control that stops him/her from leaving home and makes him/her socially unacceptable?
9. Self-care needs: are there problems related to patient's ability to look after themselves in terms of washing, cooking, eating, etc.?
10. Domestic management needs: does the patient have a problem that makes him/her require or receive home help to assist the patient with home management tasks like cleaning, shopping, washing clothes, etc.?
11. Food and eating needs: does the patient have a problem providing him/herself with a nutritious diet?
12. Safety and protection needs: are there dangers of the patient harming him/herself or being abused by others verbally, financially or physically?
13. Social activity needs: is the patient socially isolated to the degree that makes him/her benefit from a provision that ensures meeting friends, relative and provision of befriending services?
14. Day care needs: does the patient have a problem keeping occupied and does he/she lack structure of his/her day?
15. Money and benefits needs: does the patient have a problem in getting access to their benefit entitlements or managing their money?
16. Transport needs: does the patient have a problem in getting transport when he/she wants to get to shops, day centre, hospital or friends?
17. Housing needs: does the patient live in appropriate and adequate accommodation in terms of decoration, heating, amenities and residential support?
18. Ethnic and cultural needs: are there cultural or ethnic barriers that prevent the patient from accessing or integrating with main stream culture and services?
19. Management of patient's affairs: does the patient have any problems with management of financial and other affairs due to incapacity?
20. Other needs, details: