Clustering Booklet

For use in Mental Health Payment by Results evaluation work (July – Dec 2009)

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Introduction

This booklet has been designed for use in a specific piece of evaluation work which will help in the preparation for mental health Payment by Results (PbR).

It is the result of collaborative working between:

- The Care Pathways and Packages Consortium
- The London Mental Health Currency Development Programme
- The Royal College of Psychiatrists
- The Department of Health

It contains two major pieces of information:

HoNOS PbR – This clinical data set has been prepared in conjunction with the Royal College of Psychiatrists. It builds on work done by the Care Pathways and Packages Project in developing an assessment tool for cluster allocation. It has the advantage that it retains intact HoNOS, an internationally recognised outcome measure (collection of which is mandatory), thus avoiding the need for two separate data collections.

HoNOS PbR is the tool the Department of Health is currently evaluating to ensure it can achieve appropriate allocation to clusters.

Cluster Descriptions – The 21 clusters developed by the Care Pathways and Packages Project are laid out with the associated scoring profiles for use in allocation.

It should be noted that the content of both pieces of work will be refined before they are mandated for use. The exact nature of these changes will be dependant on the evaluation of their compatibility and the continued cluster validation work of the Care Pathways and Packages Project.

How Do I Cluster Someone?

As the organisations use different IT system, the exact procedures for allocating service users to clusters and recording these results will vary from trust to trust. However all mental health providers will follow these basic steps.

Step 1:

Based on the information you have gathered during your routine screening / assessment process, score the individual's needs you identified using the HoNOS PbR tool in appendix 1.



Step 2:

Use the decision tree on the first page of appendix 2 and decide if the presenting needs are primarily non-psychotic, psychotic or organic in origin, then which of the next level of headings is most accurate. This will have narrowed down the list of possible clusters.



Step 3

For the set of possible clusters identified, consult the relevant descriptions in the remainder of appendix 2. Use the HoNOS PBR scores you have made to decide which one is the most appropriate.



N.B. The scores shaded in red indicate the type and level of need which someone in each cluster is expected to score whilst those in yellow represent the levels that are likely but not absolutely necessary for inclusion. Those items left blank are those where no common themes have been found ie scores can be anywhere from 0-4 and the person may still fit the cluster. Remember, the final clustering decision is yours, based on your assessment results and your clinical judgement.

When should I cluster someone?

People's needs change over time, and over the course of their treatment. Lessons are still being learnt about how to make sure a PbR system reflects the differing levels of input that are provided throughout changing and unpredictable episodes of care. In order to achieve this, it is essential that people are not only assessed and clustered at the point of referral but also re-assessed and re-clustered periodically. In practice this will equate to assessing and clustering people at:



- The point of referral.
- Planned CPA or other formal reviews.
- Any other point where a significant change in planned care is deemed necessary (eg unplanned reviews, urgent admissions etc.)

Appendix 1

HoNOS PbR

HoNOS PbR - Proposed PbR clinical data set, incorporating HoNOS

Undergoing Evaluation.

Introduction

This new proposed data set has been developed at the request of the Department of Health. with the intention of providing a workable means of allocating to the Care Pathways and Packages' clusters, whilst retaining HoNOS in its original form. The 18 scales presented here are in two parts:

Part 1 contains, scales relating to the severity of problems experienced by the individual during the 2 weeks prior to the date of the rating. These begin with HoNOS (the first 12 scales).

Part 2 contains scales that consider problems from a more 'historical' perspective. These will be problems that occur in episodic or unpredictable ways. Whilst they may not have been experienced by the individual during the two weeks prior to the rating date, clinical judgement would suggest that there is still a cause for concern that cannot be disregarded (i.e. no evidence to suggest that the person has changed since the last occurrence either as a result of time, therapy, medication or environment etc.) In these circumstances, any event that remains relevant to the cluster allocation (and hence the interventions offered) should be included.

Summary of rating information

- 1) Rate each scales in order from 1 to 18
- 2) Do not include information rated in an earlier scale except for scale 10 which is an overall rating
- 3) Rate the MOST SEVERE problem that occurred
- 4) All scales follow the format:
 - 0 = no problem
 - 1 = minor problem requiring no action
 - 2 = mild problem but definitely present
 - 3 = moderately severe problem
 - **4** = severe to very severe problem
 - Rate 9 if Not Known

N.B. The first data item (current rating of Overactive, aggressive, disruptive or agitated behaviour) is not used in the clustering process, hence does not appear on the cluster profiles. All other ratings are used.

PART 1: Current Ratings

For scales 1-13, rate the most severe occurrence in the <u>previous two weeks</u>

1. Overactive, aggressive, disruptive or agitated behaviour (current)

- Include such behaviour due to any cause (e.g. drugs, alcohol, dementia, psychosis, depression, etc.).
- Do not include bizarre behaviour rated at Scale 6.
- **0** No problem of this kind during the period rated.
- 1 Irritability, quarrels, restlessness etc. not requiring action.
- 2 Includes aggressive gestures, pushing or pestering others; threats or verbal aggression; lesser damage to property (e.g. broken cup, window); marked overactivity or agitation.
- 3 Physically aggressive to others or animals (short of rating 4); threatening manner; more serious overactivity or destruction of property.
- 4 At least one serious physical attack on others or on animals; destructive of property (e.g. fire-setting); serious intimidation or obscene behaviour.

Rate 9 if not known

2. Non-accidental self-injury (current)

- Do not include accidental self-injury (due e.g. to dementia or severe learning disability); the cognitive problem is rated at Scale 4 and the injury at Scale 5.
- Do not include illness or injury as a direct consequence of drug/alcohol use rated at Scale 3 (e.g. cirrhosis of the liver or injury resulting from drink driving are rated at Scale 5).
 - **0** No problem of this kind during the period rated.
 - 1 Fleeting thoughts about ending it all but little risk during the period rated; no self-harm.
 - 2 Mild risk during the period rated; includes non-hazardous self-harm (e.g. wrist-scratching).
 - **3** Moderate to serious risk of deliberate self-harm during the period rated;

includes preparatory acts (e.g. collecting tablets).

4 Serious suicidal attempt and/or serious deliberate self-injury during the period rated.

Rate 9 if Not Known

3. Problem-drinking or drug-taking (current)

- Do not include aggressive/destructive behaviour due to alcohol or drug use, rated at Scale 1.
- Do not include physical illness or disability due to alcohol or drug use, rated at Scale 5.
- **0** No problem of this kind during the period rated.
- 1 Some over-indulgence but within social norm.
- 2 Loss of control of drinking or drug-taking, but not seriously addicted.
- Marked craving or dependence on alcohol or drugs with frequent loss of control; risk taking under the influence.
- 4 Incapacitated by alcohol/drug problem. *Rate 9 if Not Known*

4. Cognitive problems (current)

- Include problems of memory, orientation and understanding associated with any disorder: learning disability, dementia, schizophrenia, etc
- Do not include temporary problems (e.g. hangovers) resulting from drug/alcohol use, rated at Scale 3.
- **0** No problem of this kind during the period rated.
- Minor problems with memory or understanding (e.g. forgets names occasionally).
- Mild but definite problems (e.g. has lost the way in a familiar place or failed to recognise a familiar person); sometimes mixed up about simple decisions.
- Marked disorientation in time, place or person; bewildered by everyday events; speech is sometimes incoherent; mental slowing.
- 4 Severe disorientation (e.g. unable to recognise relatives); at risk of accidents; speech incomprehensible; clouding or stupor.

Rate 9 if Not Known

5. Physical illness or disability problems (current)

- Include illness or disability from any cause that limits or prevents movement, or impairs sight or hearing, or otherwise interferes with personal functioning.
- Include side-effects from medication; effects of drug/alcohol use; physical disabilities resulting from accidents or self-harm associated with cognitive problems, drink-driving, etc.
- Do not include mental or behavioural problems rated at Scale 4.
- **0** No physical health problem during the period rated.
- 1 Minor health problems during the period (e.g. cold, non-serious fall, etc.).
- 2 Physical health problem imposes mild restriction on mobility and activity.
- Moderate degree of restriction on activity due to physical health problem.
- **4** Severe or complete incapacity due to physical health problem.

Rate 9 if Not Known

6. Problems associated with hallucinations and delusions (current)

- Include hallucinations and delusions irrespective of diagnosis.
- Include odd and bizarre behaviour associated with hallucinations or delusions.
- Do not include aggressive, destructive or overactive behaviours attributed to hallucinations or delusions, rated at Scale 1.
- **0** No evidence of hallucinations or delusions during the period rated.
- 1 Somewhat odd or eccentric beliefs not in keeping with cultural norms.
- Delusions or hallucinations (e.g. voices, visions) are present, but there is little distress to patient or manifestation in bizarre behaviour, i.e. clinically present but mild.
- 3 Marked preoccupation with delusions or hallucinations, causing much distress and/or manifested in obviously bizarre behaviour, i.e. moderately severe clinical problem.
- 4 Mental state and behaviour is seriously and adversely affected by delusions or hallucinations, with severe impact on patient.

Rate 9 if Not Known

7. Problems with depressed mood (current)

- Do not include overactivity or agitation, rated at Scale 1.
- Do not include suicidal ideation or attempts, rated at Scale 2.
- Do not include delusions or hallucinations, rated at Scale 6.
- **0** No problem associated with depressed mood during the period rated.
- 1 Gloomy; or minor changes in mood.
- 2 Mild but definite depression and distress (e.g. feelings of guilt; loss of selfesteem).
- 3 Depression with inappropriate self-blame; preoccupied with feelings of guilt.
- **4** Severe or very severe depression, with guilt or self-accusation.

Rate 9 if Not Known

8. Other mental and behavioural problems (current)

- Rate only the most severe clinical problem not considered at scales 6 and 7 as follows.
- Specify the type of problem by the entering the appropriate letter: A phobic; B anxiety; C obsessive-compulsive; D mental strain/tension; E dissociative; F somatoform; G eating; H sleep; I sexual; J other, specify.
- **0** No evidence of any of these problems during period rated.
- 1 Minor problems only.
- 2 A problem is clinically present at a mild level (e.g. patient has a degree of control).
- 3 Occasional severe attack or distress, with loss of control (e.g. has to avoid anxiety provoking situations altogether, call

in a neighbour to help, etc.) i.e. moderately severe level of problem.

4 Severe problem dominates most activities.

Rate 9 if Not Known

9. Problems with relationships (current)

- Rate the patient's most severe problem associated with active or passive withdrawal from social relationships, and/or nonsupportive, destructive or self-damaging relationships.
- **0** No significant problem during the period.
- 1 Minor non-clinical problems.
- **2** Definite problem in making or sustaining supportive relationships: patient complains and/or problems are evident to others.
- **3** Persisting major problem due to active or passive withdrawal from social relationships and/or to relationships that provide little or no comfort or support.
- 4 Severe and distressing social isolation due to inability to communicate socially and/or withdrawal from social relationships.

Rate 9 if Not Known

10. Problems with activities of daily living (current)

- Rate the overall level of functioning in activities of daily living (ADL) (e.g. problems with basic activities of self-care such as eating, washing, dressing, toilet; also complex skills such as budgeting, organising where to live, occupation and recreation, mobility and use of transport, shopping, self-development, etc.).
- Include any lack of motivation for using selfhelp opportunities, since this contributes to a lower overall level of functioning.
- Do not include lack of opportunities for exercising intact abilities and skills, rated at Scales 11-12.
- **0.** No problem during period rated; good ability to function in all areas.
- **1.** Minor problems only (e.g. untidy, disorganised)
- **2.** Self-care adequate, but major lack of performance of one or more complex skills (see above).
- **3.** Major problem in one or more areas of self-care (eating, washing, dressing, toilet) as well as major inability to perform several complex skills.
- **4.** Severe disability or incapacity in all or nearly all areas of self-care and complex skills.

Rate 9 if Not Known

11. Problems with living conditions (current)

• Rate the overall severity of problems with the quality of living conditions and daily domestic

- routine. Are the basic necessities met (heat, light, hygiene)? If so, is there help to cope with disabilities and a choice of opportunities to use skills and develop new ones?
- Do not rate the level of functional disability itself, rated at Scale 10.

NB: Rate patient's usual situation. If in acute ward, rate activities during period before admission. If information not available, rate 9.

- Accommodation and living conditions are acceptable; helpful in keeping any disability rated at Scale 10 to the lowest level possible, and supportive of self-help.
- Accommodation is reasonably acceptable although there are minor or transient problems (e.g. not ideal location, not preferred option, doesn't like the food, etc.).
- 2 Significant problem with one or more aspects of the accommodation and/or regime (e.g. restricted choice; staff or household have little understanding of how to limit disability or how to help use or develop new or intact skills).
- Distressing multiple problems with accommodation (e.g. some basic necessities absent); housing environment has minimal or no facilities to improve patient's independence.
- Accommodation is unacceptable (e.g. lack of basic necessities, patient is at risk of eviction, or 'roofless', or living conditions are otherwise intolerable) making patient's problems worse.

Rate 9 if Not Known

12. Problems with occupation and activities (current)

- Rate the overall level of problems with quality of day-time environment. Is there help to cope with disabilities, and opportunities for maintaining or improving occupational and recreational skills and activities? Consider factors such as stigma, lack of qualified staff, access to supportive facilities e.g. staffing and equipment of day centres, workshops, social clubs, etc.
- Do not rate the level of functional disability itself, rated at Scale 10.

NB: Rate patient's usual situation. If in acute ward, rate activities during period before admission. If information not available, rate 9.

- Patient's day-time environment is acceptable: helpful in keeping any disability rated at Scale 10 to the lowest level possible, and supportive of self-help.
- Minor or temporary problems (e.g. late giro cheques): reasonable facilities available but not always at desired times, etc.
- 2 Limited choice of activities; lack of reasonable tolerance (e.g. unfairly refused entry to public library or baths, etc.); handicapped by lack of a permanent address; insufficient carer or professional support; helpful day setting available but for very limited hours.
- 3 Marked deficiency in skilled services available to help minimise level of existing disability; no opportunities to use intact skills or add new ones; unskilled care difficult to access.
- 4 Lack of any opportunity for daytime activities makes patient's problems worse.

Rate 9 if Not Known

13 Strong unreasonable beliefs occurring in non-psychotic disorders only. (current)

- Rate any apparent strong unreasonable beliefs (found in some people with disorders such as Obsessive Compulsive Disorder, Anorexia Nervosa, personality disorder, morbid jealousy etc.)
- Do not include Delusions rated at scale 6.
- Do not include Severity of disorders listed above where strong unreasonable beliefs are not present rated at Scale 9.
- Do not include Beliefs / behaviours consistent with a person's culture.
- **0** No Strong unreasonable beliefs evident.
- Holds illogical or unreasonable belief(s) but has insight into their lack of logic or reasonableness and can challenge them most of the time and they have only a minor impact on the individual's life.
- Holds illogical or unreasonable belief(s) but individual has insight into their lack of logic or reasonableness. Belief(s) can be successfully challenged by individual on occasions. Does not have a significant negative impact on the person's life.
- 3 Holds strong illogical and unreasonable belief(s) but has some insight into the relationship between the beliefs and the disorder. Belief(s) can be 'shaken' by rational argument. Tries to resist belief but with little effect. Has a significant negative

- impact on person's life. The disorder makes treatment more difficult than usual.
- Holds strong illogical or unreasonable belief(s) with little or no insight in the relationship between the belief and the disorder. Belief(s) cannot be 'shaken' by rational argument. Does not attempt to resist belief(s). Has a significant negative impact on the person's life or other people's lives and the disorder is very resistant to treatment.

Rate 9 if not known

N.B. Additional rating scales (e.g. for cultural diversity, mental capacity, participation and carers support) will be included at this point in subsequent versions of this data set.

PART 2: Historical Ratings

For scales 14-18, rate problems that occur in an episodic or unpredictable way. Whilst there may not be any direct observation or report of a manifestation during the last two weeks the evidence and clinical judgement would suggest that there is still a cause for concern that cannot be disregarded (i.e. no evidence to suggest that the person has changed since the last occurrence either as a result of time, therapy, medication or environment etc.) In these circumstances, any event that remains relevant to the current plan of care should be included.

14. Agitated behaviour/ expansive mood (historical)

- Rate agitation and overactive behaviour causing disruption to social role functioning. Behaviour causing concern or harm to others. Elevated mood that is out of proportion to circumstances.
- Include such behaviour due to any cause (e.g. drugs, alcohol, dementia, psychosis, depression etc)
- Excessive irritability, restlessness, intimidation, obscene behaviour and aggression to people animals or property.
- Do not include odd or bizarre behaviour to be rated at Scale 6.
- **0** No needs in this area.
- 1 Presents as irritable, argumentative with some agitation. Some signs of elevated mood or agitation not causing disruption to functioning.
- Makes verbal / gestural threats. Pushes / pesters but no evidence of intent to cause serious harm. Causes minor damage to property (eg glass or crockery). Is obviously over-active or agitated.
- Agitation or threatening manner causing fear in others. Physical aggression to people or animals. Property destruction. Serious levels of elevated mood, agitation, restlessness causing significant disruption to functioning.
- 4 Serious physical harm caused to persons / animals. Major destruction of property. Seriously intimidating others or exhibiting highly obscene behaviour. Elevated mood, agitation, restlessness causing complete disruption

Rate 9 if not known

15. Repeat self-harm (historical)

- Rate repeat acts of self harm aimed at managing people, stressful situations, emotions or to produce mutilation for any reason.
- Include self cutting, biting, striking, burning, breaking bones or taking poisonous substances etc.
- Do not include accidental self-injury (due e.g. to learning disability or cognitive impairment); the cognitive problem is rated at Scale 4 and the injury at Scale 5.
- Do not include harm as a direct consequence of drug / alcohol use (e.g. liver damage) to be rated at Scale 3. Injury sustained whilst intoxicated to be rated at Scale 5
- **0** No problem of this kind.
- 1 Superficial scratching or non-hazardous doses of drugs.
- 2 Superficial cutting, biting, bruising etc or small ingestions of hazardous substances unlikely to lead to significant harm even if hospital treatment not sought.
- Repeat self-injury requiring hospital treatment. Possible dangers if hospital treatment not sought. However, unlikely to leave lasting severe damage even if behaviour continues providing hospital treatment sought.
- 4 Repeat serious self-injury requiring hospital treatment and likely to leave lasting severe damage if behaviour continues (i.e., severe scarring, crippling or damage to internal organ) and possibly to death.

Rate 9 if not known

16. Safeguarding Children & Vulnerable Dependent Adults (historical)

- Rate the potential or actual impact of the patient's mental illness, or behaviour, on the safety and well being of vulnerable and dependent persons, including children, vulnerable adults and dependent elders.
- Include any patient who lives in a household with children under the age of 18 years.
- Include any patient who has substantial access and contact with children or other vulnerable persons.
- Do not include risk to wider population covered at scale 14
- Do not include challenge to relations covered in scale 9.

- No obvious impact of the individuals' illness or behaviour on the safety or well being of vulnerable persons.
- 1 Mild concerns about the impact of the individual's illness or behaviour on the safety or well-being of vulnerable persons.
- 2 Illness or behaviour has an impact on the safety or well being of vulnerable persons. The individual is aware of the potential impact but is supported and is able to make adequate arrangements.
- Illness or behaviour has an impact on the safety or well being of vulnerable persons but does not meet the criteria to score 4. There may be delusions, suicide risk or self-harm. However, the individual has insight, can take action to significantly reduce the impact of their behaviour on the children and is adequately supported.
- Without action the illness or behaviour is likely to have direct or indirect significant impact on the safety or well-being of vulnerable persons. Problems such as delusions, severe suicide risk or problems of impulse control may be present. There may be lack of insight, an inability or unwillingness to take precautions to protect vulnerable persons and/or lack of adequate support and protection for vulnerable persons.

Rate 9 if not known

17. Engagement (historical)

- Rate the individual's motivation and understanding of their problems, acceptance of their care/treatment and ability to relate to care staff.
- Include the ability, willingness or motivation to engage in their care/ treatment appropriately, agreeing personal goals, attending appointments. Dependency issues.
- Do not include Cognitive issues as in scale 4, severity of illness or failure to comply due to practical reasons.
- Has ability to engage / disengage appropriately with services. Has good understanding of problems and care plan.
- 1 Some reluctance to engage or slight risk of dependency. Has understanding of own problems.
- Occasional difficulties in engagement i.e. missed appointments or contacting services between appointments inappropriately.
 Some understanding of own problems.

- 3 Contacts services inappropriately. Has little understanding of own problems. Unreliable attendance at appointments. Or attendance depends on prompting or support.
- 4 Contacts multiple agencies i.e. GP, A & E etc, constantly. Little or no understanding of own problems. Fails to comply with planned care. Rarely attends appointments. Refuses service input.

 Or Attendance and compliance dependent on intensive prompting and support.

Rate 9 if not known

18. Vulnerability (historical)

- Rate failure of an individual to protect themselves from risk of harm to their health and safety or well-being.
- Include physical, sexual, emotional and financial exploitation or harm/ harassment
- Do not include problems of engagement (rated at scale 17).
- **0** No vulnerability evident.
- 1 No significant impact on person's health, safety or well-being.
- 2 Concern about the individuals ability to protect their health, safety or well-being requiring support support or removal of existing support would increase concern.
- 3 Clear evidence of significant vulnerability affecting the individuals ability to protect their health and safety or well-being that requires support (but not as severe as a score of 4).Or removal of existing support would increase risk.
- 4 Severe vulnerability total breakdown in individual's ability to protect themselves resulting in major risk to the individual's health, safety or well-being.

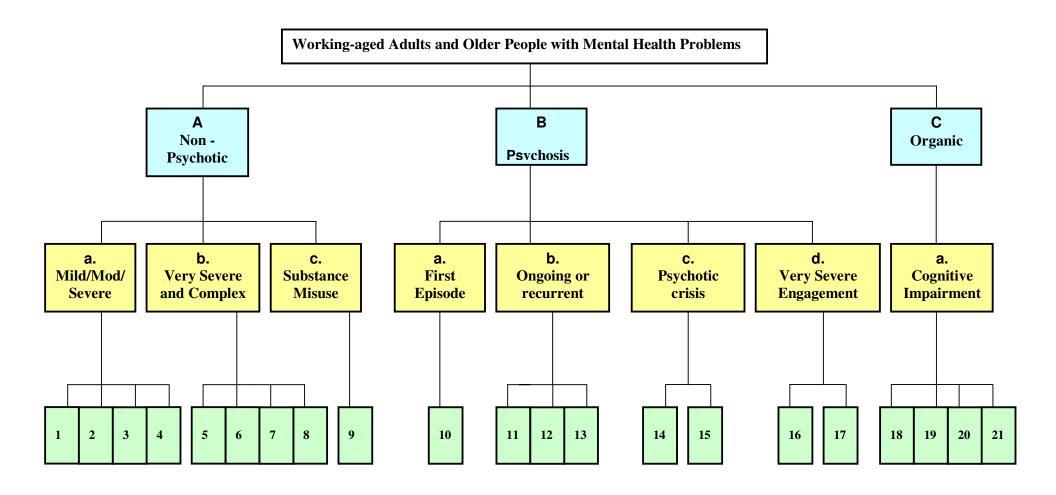
Rate 9 if not known

Appendix 2

Cluster Descriptions



DECISION TREE (RELATIONSHIP OF CARE CLUSTERS TO EACH OTHER)



CARE CLUSTER 0: Variance

6 13 7 8 3	Hallucinations and Delusions Non-Psychotic Strong Unreasonable Beliefs Depressed Mood* Other Mental & Behavioural Problems* Problem Drinking or Drug-taking	0	1	2	3	4
13 7 8	Non-Psychotic Strong Unreasonable Beliefs Depressed Mood* Other Mental & Behavioural Problems*					
7 8	Beliefs Depressed Mood* Other Mental & Behavioural Problems*					
8	Depressed Mood * □ Other Mental & Behavioural Problems * □					
8	Other Mental & Behavioural Problems *					
3	Problem Drinking or Drug-taking					
4	Cognitive Problems					
5						
9						
10						
11	Living conditions					
12	Occupation and activities					
		,			r	
14	Agitated behaviour/expansive mood					l
2	Non-Accidental Self-Injury					
15	Repeat Self-Harm					
16	Safeguarding children and vulnerable dependent adults					
17	Engagement					
18	Vulnerability					
	Expected to score					
	Unlikely to feature					
	Issue for some					
	5 9 10 11 12 14 2 15 16	 Physical Illness or Disability Relationships Activities of daily living Living conditions Occupation and activities Agitated behaviour/expansive mood Non-Accidental Self-Injury Repeat Self-Harm Safeguarding children and vulnerable dependent adults Engagement Vulnerability Expected to score Unlikely to feature 	5 Physical Illness or Disability 9 Relationships 10 Activities of daily living 11 Living conditions 12 Occupation and activities 14 Agitated behaviour/expansive mood 2 Non-Accidental Self-Injury 15 Repeat Self-Harm 16 Safeguarding children and vulnerable dependent adults 17 Engagement 18 Vulnerability Expected to score Unlikely to feature	5 Physical Illness or Disability 9 Relationships 10 Activities of daily living 11 Living conditions 12 Occupation and activities 14 Agitated behaviour/expansive mood 2 Non-Accidental Self-Injury 15 Repeat Self-Harm 16 Safeguarding children and vulnerable dependent adults 17 Engagement 18 Vulnerability Expected to score Unlikely to feature	5 Physical Illness or Disability 9 Relationships 10 Activities of daily living 11 Living conditions 12 Occupation and activities 14 Agitated behaviour/expansive mood 2 Non-Accidental Self-Injury 15 Repeat Self-Harm 16 Safeguarding children and vulnerable dependent adults 17 Engagement 18 Vulnerability Expected to score Unlikely to feature	5 Physical Illness or Disability 9 Relationships 10 Activities of daily living 11 Living conditions 12 Occupation and activities 14 Agitated behaviour/expansive mood 2 Non-Accidental Self-Injury 15 Repeat Self-Harm 16 Safeguarding children and vulnerable dependent adults 17 Engagement 18 Vulnerability Expected to score Unlikely to feature

*Either / Or Dl/19/12007/jp

CARE CLUSTER: 1 Common Mental Health Problems (Low Severity)

CARE CLUSTER: 1	No	ITEM DESCRIPTION		E			
Description: This group has definite but minor	110	TIENT DES CIUI TION	0	1	2	3	4
problems of depressed mood, anxiety or other disorder	6	Hallucinations and Delusions					
but they do not present with any psychotic symptoms	13	Strong Unreasonable Beliefs					
	7	Depressed Mood*					
	8	Other Mental & Behavioural Problems *					
	3	Problem Drinking or Drug-taking					
Diagnoses: May not attract a formal diagnosis but	4	Cognitive Problems					
nay include mild symptoms of: F32 Depressive	5	Physical Illness or Disability					
Episode, F40 Phobic Anxiety Disorders, F41 Other	9	Relationships					
Anxiety Disorders, F42 Obsessive-Compulsive	10	Activities of daily living					
Disorder, F43 Stress Reaction/Adjustment Disorder,	11	Living conditions					
F50 Eating Disorder.	12	Occupation and activities					
						1	
Impairment : Disorder unlikely to cause disruption to	14	Agitated behaviour/expansive mood					
wider functioning.	2	Non-Accidental Self-Injury					
	15	Repeat Self-Harm					
Risks: Unlikely to be an issues	16	Safeguarding children and vulnerable dependent adults					
	17	Engagement					
	18	Vulnerability					
Course: The problem is likely to be short term and		Expected to score					
related to life events		Unlikely to feature					
		Issue for some					

CARE CLUSTER: 2 Common Mental Health problems (Low Severity with greater need)

	No	ITEM DESCRIPTION		S	SCOR	CORE				
Description: This group has definite but minor			0	1	2	3	4			
problems of depressed mood, anxiety or other disorder	6	Hallucinations and Delusions								
but not with any psychotic symptoms. They may have	13	Strong Unreasonable Beliefs								
already received care associated with cluster l and	7	Depressed Mood*								
require more specific intervention or previously been	8	Other Mental & Behavioural Problems *								
successfully treated at a higher level but are	3	Problem Drinking or Drug-taking								
representing with low level symptoms.										
Diagnoses: Likely to include: F32 Depressive	4	Cognitive Problems								
Episode, F40 Phobic Anxiety Disorders, F41 Other	5	Physical Illness or Disability								
Anxiety Disorders, F42 Obsessive-Compulsive	9	Relationships								
Disorder, F43 Stress Reaction/Adjustment Disorder,	10	Activities of daily living								
0 Eating Disorder.	11	Living conditions								
	12	Occupation and activities								
Impairment: Disorder unlikely to cause serious	14	Agitated behaviour/expansive mood	П							
disruption to wider functioning but some people will	2	Non-Accidental Self-Injury								
experience minor problems.	15	Repeat Self-Harm								
Risks: Unlikely to be an issue	16	Safeguarding children and vulnerable	П							
		dependent adults								
	17	Engagement	П							
	18	Vulnerability	П							
		Expected to score								
		Unlikely to feature								
		Issue for some								
Course: The problem is likely to be short term and										
related to life events										
di Printa de la constanta de l										

^{*}Either / Or

CARE CLUSTER: 3 Non Psychotic (Moderate Severity)

	No	ITEM DESCRIPTION		\$	SCOR	CORE				
Description: Moderate problems involving depressed			0	1	2	3	4			
mood, anxiety or other disorder (not including	6	Hallucinations and Delusions								
psychosis)	13	Strong Unreasonable Beliefs								
	7	Depressed Mood*								
	8	Other Mental & Behavioural Problems *								
	3	Problem Drinking or Drug-taking								
Diagnoses: Likely to include, F32 Depressive	4	Cognitive Problems								
Episode (Non-Psychotic), F40 Phobic, Anxiety	5	Physical Illness or Disability								
Disorders, F41 Other Anxiety Disorders, F42	9	Relationships								
Obsessive-Compulsive Disorder, F43 Stress	10	Activities of daily living								
Reaction/Adjustment Disorder, F50 Eating Disorder.	11	Living conditions								
	12	Occupation and activities								
						1				
Impairment: Disorder unlikely to cause serious	14	Agitated behaviour/expansive mood								
disruption to wider function but some people will	2	Non-Accidental Self-Injury								
experience moderate problems	15	Repeat Self-Harm								
Risks: Unlikely to be a serious issue	16	Safeguarding children and vulnerable dependent adults								
	17	Engagement								
	18	Vulnerability								
Course: short-term		Expected to score Unlikely to feature			Ţ	_				
		Issue for some								
						_				

CARE CLUSTER: 4 Non-psychotic (Severe)

	No	ITEM DESCRIPTION		5	SCOF	RE	
Description: This group is characterised by severe			0	1	2	3	4
depression and/or anxiety and/or other and increasing	6	Hallucinations and Delusions					
complexity of needs. They may experience disruption	13	Strong Unreasonable Beliefs					
to function in everyday life and there is an increasing	7	Depressed Mood * □					
likelihood of significant risks.	8	Other Mental & Behavioural Problems * 🛘					
	3	Problem Drinking or Drug-taking					
Diagnoses: Likely to include: F32 Depressive	4	Cognitive Problems					
Episode (Non-Psychotic), F40 Phobic Anxiety	5	Physical Illness or Disability					
Disorders, F41 Other Anxiety Disorders, F42	9	Relationships					
Obsessive-Compulsive Disorder, F43 Stress	10	Activities of daily living					
Reaction/Adjustment Disorder, F44 Dissociative	11	Living conditions					
Disorder, F45 Somatoform Disorder, F48 Other	12	Occupation and activities					
Neurotic Disorders, F50 Eating Disorder							
Impairment: Some may experience significant	14	Agitated behaviour/expansive mood					
disruption in everyday functioning	2	Non-Accidental Self-Injury					
	15	Repeat Self-Harm					
Risks: Some may experience moderate risk to self through self-harm or suicidal thoughts or behaviours	16	Safeguarding children and vulnerable dependent adults					
	17	Engagement					
	18	Vulnerability					
Course: Unlikely to improve without treatment and		Expected to score					
may deteriorate with long term impact on functioning.		Unlikely to feature					
		Issue for some					

CARE CLUSTER: 5 Non-Psychotic Disorders (Very Severe)

	No	ITEM DESCRIPTION		5	SCOR	E	
Description: This group will be severely depressed			0	1	2	3	4
and/or anxious and/or other. They will not present	6	Hallucinations and Delusions					
with hallucinations or delusions but may have some	13	Strong Unreasonable Beliefs					
unreasonable beliefs. They may often be at high risk	7	Depressed Mood * □					
for suicide and they may present safeguarding issues	8	Other Mental & Behavioural Problems *					
and have severe disruption to everyday living.	3	Problem Drinking or Drug-taking					
						1	
Diagnoses: Likely to include: F32 Depressive	4	Cognitive Problems					
Episode (Non-Psychotic), F33 Recurrent Depressive	5	Physical Illness or Disability					
Episode (Non-Psychotic), F40 Phobic Anxiety	9	Relationships					
Disorders, F41 Other Anxiety Disorders, F42	10	Activities of daily living					
Obsessive-Compulsive Disorder, F43 Stress	11	Living conditions					
Reaction/Adjustment Disorder, F44 Dissociative	12	Occupation and activities					
Disorder, F45 Somatoform Disorder, F48 Other							
Neurotic Disorders, F50 Eating Disorder			I	I		Ι	
Impairment : Moderate or severe problems with	14	Agitated behaviour/expansive mood					
relationships. Level of problems in other areas of role	2	Non-Accidental Self-Injury					
functioning likely to vary.	15	Repeat Self-Harm					
Risks: Likely moderate or severe risk of suicide with other possible risk, including safeguarding issues if	16	Safeguarding children and vulnerable dependent adults					
any responsibility for young children or vulnerable	17	Engagement					
dependent adults	18	Vulnerability					
					·	!	
Course: Probably known to service for more than a		Expected to score					
year or expected to be known for an extended period.		Unlikely to feature					
year at any and any and parious		Issue for some					

CARE CLUSTER: 6 Non-Psychotic Disorder of Over-valued Ideas

	No	ITEM DESCRIPTION		5	SCOR	RE	
Description: Moderate to very severe disorders that			0	1	2	3	4
are difficult to treat. This may include treatment	6	Hallucinations and Delusions					
resistant eating disorder, OCD etc, where extreme	13	Strong Unreasonable Beliefs					
beliefs are strongly held, some personality disorders	7	Depressed Mood * □					
and enduring depression.	8	Other Mental & Behavioural Problems *					
	3	Problem Drinking or Drug-taking					
Diagnoses: Likely to include: F32 Depressive	4	Cognitive Problems					
Episode (Non-Psychotic), F33 Recurrent Depressive	5	Physical Illness or Disability					
Episode (Non-Psychotic), F40 Phobic Anxiety	9	Relationships					
Disorders, F41 Other Anxiety Disorders, F42	10	Activities of daily living					
Obsessive-Compulsive Disorder, F43 Stress Reaction/Adjustment Disorder, F44 Dissociative Disorder, F45 Somatoform Disorder, F48 Other Neurotic Disorders, F50 Eating Disorder and some F60	11	Living conditions					
	12	Occupation and activities					
Impairment : Likely to seriously affect activity and	14	Agitated behaviour/expansive mood					
role functioning in many ways.	2	Non-Accidental Self-Injury					
eaction/Adjustment Disorder, F44 Dissociative Isorder, F45 Somatoform Disorder, F48 Other Education Disorders, F50 Eating Disorder and some 50 Inpairment: Likely to seriously affect activity and le functioning in many ways.	15	Repeat Self-Harm					
Risks: Unlikely to be a major feature but safeguarding may be an issue if any responsibility for	16	Safeguarding children and vulnerable dependent adults					
young children or vulnerable dependant adults.	17	Engagement					
	18	Vulnerability					
Course: The problems will be enduring.		Expected to score			1		
		Unlikely to feature					
		Issue for some					

CARE CLUSTER: 7 Enduring Non-Psychotic Disorders (High Disability)

	No	ITEM DESCRIPTION		5	COR	E	
Description: This group suffers from moderate to			0	1	2	3	4
severe disorders that are very disabling. They will	6	Hallucinations and Delusions					
have received treatment for a number of years and	13	Strong Unreasonable Beliefs					
although they may have improvement in positive	7	Depressed Mood * □					
symptoms considerable disability remains that is likely	8	Other Mental & Behavioural Problems *					
to affect role functioning in many ways.	3	Problem Drinking or Drug-taking					
Diagnoses: Likely to include: F32 Depressive	4	Cognitive Problems					
pisode (Non-Psychotic), F33 Recurrent Depressive	5	Physical Illness or Disability					-
Episode (Non-Psychotic), F40 Phobic Anxiety	9	Relationships					
Disorders, F41 Other Anxiety disorders, F42	10	Activities of daily living					
Obsessive-Compulsive Disorder, F43 Stress	11	Living conditions					
eaction/Adjustment Disorder, F44 Dissociative isorder, F45 Somatoform Disorder, F48 Other	12	Occupation and activities					
Neurotic Disorders, F50 Eating Disorder and some F60							
Impairment : Likely to seriously affect activity and	14	Agitated behaviour/expansive mood					
role functioning in many ways.	2	Non-Accidental Self-Injury					
	15	Repeat Self-Harm					
Risks: Unlikely to be a major feature but safeguarding may be an issue if any responsibility for	16	Safeguarding children and vulnerable dependent adults					
young children or vulnerable dependent adults.	17	Engagement					
	18	Vulnerability					
Course: The problems will be enduring		Expected to score Unlikely to feature Issue for some					
*Tithor / Or							

CARE CLUSTER: 8 Non-Psychotic Chaotic and Challenging Disorders

	No	ITEM DESCRIPTION		5	SCOR	E	
Description: This group will have a wide range of			0	1	2	3	4
symptoms and chaotic and challenging lifestyles.	6	Hallucinations and Delusions					
They are characterised by moderate to very severe	13	Strong Unreasonable Beliefs					
repeat deliberate self-harm and/or other impulsive	7	Depressed Mood*					
behaviour and chaotic, over dependent engagement	8	Other Mental & Behavioural Problems *					
and often hostile with services	3	Problem Drinking or Drug-taking					
Diagnoses: Likely to include, F60 Personality disorder	4	Cognitive Problems					
	5	Physical Illness or Disability					
	9	Relationships					
	10	Activities of daily living					
	11	Living conditions					
	12	Occupation and activities					
					_	_	
Impairment: Poor role functioning with severe	14	Agitated behaviour/expansive mood					
problems in relationships	2	Non-Accidental Self-Injury					
	15	Repeat Self-Harm					
Risks: Moderate to very severe repeat deliberate self-harm, with chaotic, over dependent and often hostile	16	Safeguarding children and vulnerable dependent adults					
engagement with service. Suicide risks likely to be	17	Engagement					
present. Safeguarding may be an issue.	18	Vulnerability					
Course: Likely to be enduring over many years	Unlik	ected to score kely to feature for some					

CARE CLUSTER: 9 Substance Misuse

	No	ITEM DESCRIPTION	SCORE							
Description: The main problem of this group is their			0	1	2	3	4			
misuse of alcohol or drugs. They may have some	6	Hallucinations and Delusions								
anxiety or depression and transient psychiatric	13	Strong Unreasonable Beliefs								
symptoms related to their substance misuse. It is	7	Depressed Mood * □								
possible that this group will suffer from cognitive	8	Other Mental & Behavioural Problems *								
impairment and/or physical problems as a result of	3	Problem Drinking or Drug-taking								
long-term substance misuse.										
Diagnoses: Will include, (F10-F19) Mental and	4	Cognitive Problems								
behavioural disorders due to psychoactive substance	5	Physical Illness or Disability								
use	9	Relationships								
	10	Activities of daily living								
	11	Living conditions								
	12	Occupation and activities								
			ı							
Impairment : Physical illness may be present and	14	Agitated behaviour/expansive mood								
possibly cognitively impaired as a consequence of	2	Non-Accidental Self-Injury								
substance misuse. One or more areas of role	15	Repeat Self-Harm								
functioning may be affected by substance misuse										
Risks: May engage in risk behaviour and may present a risk to self and others	16	Safeguarding children and vulnerable dependent adults								
	17	Engagement								
	18	Vulnerability								
		Expected to score								
Course: Acute to ongoing		Unlikely to feature								
		Issue for some								

CARE CLUSTER: 10 First Episode Psychosis

	No	ITEM DESCRIPTION	CRIPTION				
Description: This group will be presenting to the			0	1	2	3	4
service for the first time with mild to severe psychotic	6	Hallucinations and Delusions					
phenomena. They may also have depressed mood	13	Strong Unreasonable Beliefs					
and/or anxiety or other behaviours. Drinking or drug-	7	Depressed Mood*					
taking may be present but will not be the only	8	Other Mental & Behavioural Problems *					
problem.	3	Problem Drinking or Drug-taking					
Diagnoses: Likely to include (F20-F29)	4	Cognitive Problems					
Schizophrenia, schizotypal and delusional disorders,	5	Physical Illness or Disability					
Bi-polar disorder.	9	Relationships					
	10	Activities of daily living					
	11	Living conditions					
	12	Occupation and activities					
					-		
Impairment: Mild to moderate problems with	14	Agitated behaviour/expansive mood					
activities of daily living. Poor role functioning with	2	Non-Accidental Self-Injury					
mild to moderate problems with relationships.	15	Repeat Self-Harm					
Risks: Vulnerable to harm from self or others. Some may be at risk of suicide or a threat to others.	16	Safeguarding children and vulnerable dependent adults					
	17	Engagement					
	18	Vulnerability					
Course: First Episode		Expected to score Unlikely to feature Issue for some					

CARE CLUSTER: 11 Ongoing Recurrent Psychosis (Low symptoms)

	No	ITEM DESCRIPTION		RE			
Description: This group has a history of psychotic			0	1	2	3	4
symptoms that are currently controlled and causing	6	Hallucinations and Delusions					
minor problems if any at all. They are currently	13	Strong Unreasonable Beliefs					
experiencing a period of recovery where they are	7	Depressed Mood*					
capable of full or near functioning. However, there	8	Other Mental & Behavioural Problems *					
may be impairment in self-esteem and efficacy and	3	Problem Drinking or Drug-taking					
vulnerability to life.							
Diagnoses: Likely to include, (F20-F29)	4	Cognitive Problems					
Schizophrenia, schizotypal and delusional disorders	5	Physical Illness or Disability					
F30 Manic Episode, F31 Bipolar Affective Disorder	9	Relationships					
	10	Activities of daily living					
	11	Living conditions					
	12	Occupation and activities					
Impairment: Full or near full functioning. Full or	14	Agitated behaviour/expansive mood	П				
near full functioning.	2	Non-Accidental Self-Injury					
	15	Repeat Self-Harm					
Risks: Relapse	16	Safeguarding children and vulnerable dependent adults					
	17	Engagement					
	18	Vulnerability					
Course: Long-term		Expected to score					
		Unlikely to feature					
		Issue for some					

CARE CLUSTER: 12 Ongoing or recurrent Psychosis (High Disability)

	No	ITEM DESCRIPTION			SCOR	E	
Description: This group have a history of psychotic			0	1	2	3	4
symptoms with a significant disability with major	6	Hallucinations and Delusions					
impact on role functioning. They are likely to be	13	Strong Unreasonable Beliefs					
vulnerable to abuse or exploitation	7	Depressed Mood*					
	8	Other Mental & Behavioural Problems *					
	3	Problem Drinking or Drug-taking					
Diagnoses: Likely to include, (F20-F29)	4	Cognitive Problems					
Schizophrenia, schizotypal and delusional disorders,	5	Physical Illness or Disability					
F30 Manic Episode, F31 Bipolar Affective Disorder	9	Relationships					
	10	Activities of daily living					
	11	Living conditions					
	12	Occupation and activities					
Impairment: Possible cognitive and physical	14	Agitated behaviour/expansive mood					
problems linked with long-term illness and	2	Non-Accidental Self-Injury					
medication. May have limited survival skills and be lacking basic life skills and poor role functioning in all areas	15	Repeat Self-Harm					
Risks: Vulnerability to abuse or exploitation	16	Safeguarding children and vulnerable dependent adults					
	17	Engagement					
	18	Vulnerability					
Course: Long term		Expected to score Unlikely to feature Issue for some					

CARE CLUSTER: 13 Ongoing or Recurrent Psychosis (high symptom and disability)

	No	ITEM DESCRIPTION			SCORE				
Description: This group will have a history of			0	1	2	3	4		
psychotic symptoms which are not controlled. They	6	Hallucinations and Delusions							
will present with moderate to severe psychotic	13	Strong Unreasonable Beliefs							
symptoms and some anxiety or depression. They have	7	Depressed Mood*							
a significant disability with major impact on role	8	Other Mental & Behavioural Problems *							
functioning.	3	Problem Drinking or Drug-taking							
				,					
Diagnoses: Likely to include, (F20-F29)	4	Cognitive Problems							
Schizophrenia, Schizotypal and delusional disorders,	5	Physical Illness or Disability							
F30 Manic Episode, F31 Bipolar Affective Disorder	9	Relationships							
	10	Activities of daily living							
	11	Living conditions							
	12	Occupation and activities							
Impairment: Possible cognitive and physical	14	Agitated behaviour/expansive mood							
problems linked with long-term illness and	2	Non-Accidental Self-Injury							
medication. May be lacking basic life skills and poor role functioning in all areas	15	Repeat Self-Harm							
Risks: Vulnerability to abuse or exploitation	16	Safeguarding children and vulnerable dependent adults							
	17	Engagement							
	18	Vulnerability							
Course: Long-term		Expected to score Unlikely to feature Issue for some			1				

CARE CLUSTER: 14 Psychotic Crisis

	No	ITEM DESCRIPTION	ITEM DESCRIPTION				
Description: They will be experiencing an acute			0	1	2	3	4
psychotic episode with severe symptoms that cause	6	Hallucinations and Delusions					
severe disruption to role functioning. They may	13	Strong Unreasonable Beliefs					
present as vulnerable and a risk to others or	7	Depressed Mood*[
themselves	8	Other Mental & Behavioural Problems *					
	3	Problem Drinking or Drug-taking					
Diagnoses: Likely to include, (F20-F29)	4	Cognitive Problems					
Schizophrenia, schizotypal and delusional disorders,	5	Physical Illness or Disability					
F30 Manic Episode, F31 bipolar Affective Disorder	9	Relationships					
130 Waine Episode, 131 oipolai 7 incenve Disorder	10	Activities of daily living					
	11	Living conditions					
	12	Occupation and activities					
	12	occupation and activities					
Impairment: Cognitive problems may present.	14	Agitated behaviour/expansive mood					
Activities will be severely disrupted in most areas.	2	Non-Accidental Self-Injury					
Role functioning is severely disrupted in most areas.	15	Repeat Self-Harm					
Risks: There may be risks to self or others because of challenging behaviour and some vulnerability to abuse	16	Safeguarding children and vulnerable dependent adults					
or exploitation. Also, possibly poor engagement with	17	Engagement					
service. Safeguarding risk if parent/carer.	18	Vulnerability					
		Expected to score					
Course: Acute		Unlikely to feature					
		Issue for some					

CARE CLUSTER: 15 Severe Psychotic Depression

	No	ITEM DESCRIPTION	SCORE				
Description: This group will be suffering from an			0	1	2	3	4
acute episode of moderate to severe depressive	6	Hallucinations and Delusions					
symptoms. Hallucinations and delusions will be	13	Strong Unreasonable Beliefs					
present. It is likely that this group will present a risk	7	Depressed Mood*					
of suicide and have disruption in many areas of their	8	Other Mental & Behavioural Problems *					
lives.	3	Problem Drinking or Drug-taking					
Diagnoses: Likely to include, F32.3 Severe depressive	4	Cognitive Problems					
episode with psychotic symptoms.	5	Physical Illness or Disability					
episode with psycholic symptoms.	9	Relationships					
	10	Activities of daily living					
	11	Living conditions					
	12	Occupation and activities					
Impairment: Cognitive problems may present.	14	Agitated behaviour/expansive mood					
Activities will be severely disrupted in most areas.	2	Non-Accidental Self-Injury					
Role functioning is severely disrupted in most areas.	15	Repeat Self-Harm					
Risks: Risk of suicide and vulnerability likely to be present with other risks variable. Consider	16	Safeguarding children and vulnerable dependent adults					
safeguarding risks if parent or carer.	17	Engagement					
	18	Vulnerability					
Course: Acute		Expected to score Unlikely to feature Issue for some					

CARE CLUSTER: 16 Dual Diagnosis

	No	ITEM DESCRIPTION		SCORE						
Description: This group has enduring, moderate to			0	1	2	3	4			
severe psychotic or affective symptoms with unstable,	6	Hallucinations and Delusions								
chaotic lifestyles and co-existing substance misuse.	13	Strong Unreasonable Beliefs								
They may present a risk to self and others and engage	7	Depressed Mood*								
poorly with services. Role functioning is often	8	Other Mental & Behavioural Problems *								
globally impaired.	3	Problem Drinking or Drug-taking								
Diagnoses: Likely to include, (F10-F19) Mental and	4	Cognitive Problems								
behavioural disorders due to psychoactive substance	5	Physical Illness or Disability								
use (F20-F29) Schizophrenia, schizotypal and	9	Relationships								
delusional disorders, Bi-Polar Disorder	10	Activities of daily living								
,	11	Living conditions								
	12	Occupation and activities								
				,						
Impairment : Physical illness may be present as a	14	Agitated behaviour/expansive mood								
result of substance misuse and possibly cognitively	2	Non-Accidental Self-Injury								
impaired as a consequence of psychotic features or substance misuse. Global impairment of role function likely.	15	Repeat Self-Harm								
Risks: Moderate to severe risk to other due to violent and aggressive behaviour. Likely to engage poorly	16	Safeguarding children and vulnerable dependent adults								
with services. Some risk of accidental death.	17	Engagement								
	18	Vulnerability								
		Expected to score								
Course: Long-term		Unlikely to feature								
		Issue for some								

CARE CLUSTER: 17 Psychosis and Affective Disorder – Difficult to Engage

	No	ITEM DESCRIPTION		5	SCOR	Æ	
Description: This group has moderate to severe			0	1	2	3	4
psychotic symptoms with unstable, chaotic lifestyles.	6	Hallucinations and Delusions					
There may be some problems with drugs or alcohol	13	Strong Unreasonable Beliefs					
not severe enough to warrant dual diagnosis care. This	7	Depressed Mood*					
group have a history of non-concordance, are	8	Other Mental & Behavioural Problems *					
vulnerable & engage poorly with services.	3	Problem Drinking or Drug-taking					
Diagnoses: Likely to include, (F20-F29)	4	Cognitive Problems					
Schizophrenia, schizotypal and delusional disorders,	5	Physical Illness or Disability					
Bi-Polar	9	Relationships					
	10	Activities of daily living					
	11	Living conditions					
	12	Occupation and activities					
Impairment: Possibly cognitively impaired as a	14	Agitated behaviour/expansive mood					
consequence of psychotic features or substance misuse	2	Non-Accidental Self-Injury					
including prescribed medication. Likely severe problems with relationships and one or more other area of functioning.	15	Repeat Self-Harm					
Risks: Moderate to severe risk of harm to others due to aggressive or violent behaviour. Risk of suicide.	16	Safeguarding children and vulnerable dependent adults					
Likely to be non-compliant, vulnerable and engage	17	Engagement					
poorly with service.	18	Vulnerability					
Course:		Expected to score Unlikely to feature Issue for some					

^{*}Either / Or

CARE CLUSTER: 18 Cognitive Impairment (low need)

	No	ITEM DESCRIPTION		SCORE					
Description: People who may be in the early stages			0	1	2	3	4		
of dementia (or who may have an organic brain	6	Hallucinations and Delusions							
disorder affecting their cognitive function) who have	13	Strong Unreasonable Beliefs							
some memory problems, or other low level cognitive	7	Depressed Mood*[
impairment but who are still managing to cope	8	Other Mental & Behavioural Problems *							
reasonably well. Underlying reversible physical	3	Problem Drinking or Drug-taking							
causes have been rule out.									
Diagnoses: Diagnoses likely to include: F00 –	4	Cognitive Problems							
Dementia in Alzheimer-s disease, F01 – Vascular dementia, F02 – Dementia in other diseases classified	5	Physical Illness or Disability							
	9	Relationships							
elsewhere F03 – Unspecified Dementia, Dementia	10	Activities of daily living							
with lewy bodies (DLB), Frontotemporal dementia	11	Living conditions							
(FTD)	12	Occupation and activities							
Impairment : Some memory and other low level	14	Agitated behaviour/expansive mood							
impairment will be present. ADL function will be	2	Non-Accidental Self-Injury							
unimpaired, or only mildly impaired. There may be changes in ability to manage vocational and social roles.	15	Repeat Self-Harm							
Risks: None or minor	16	Safeguarding children and vulnerable dependent adults							
	17	Engagement							
	18	Vulnerability							
		Expected to score							
Course:		Unlikely to feature							
		Issue for some							

CARE CLUSTER: 19 Cognitive Impairment or Dementia Complicated (Moderate Need)

	No	ITEM DESCRIPTION			SCOR	E	E		
Description: People who have problems with their			0	1	2	3	4		
memory, and or other aspects of cognitive functioning	6	Hallucinations and Delusions							
resulting in moderate problems looking after	13	Strong Unreasonable Beliefs							
themselves and maintaining social relationships.	7	Depressed Mood * □							
Probable risk of self-neglect or harm to others and	8	Other Mental & Behavioural Problems *							
may be experiencing some anxiety or depression.	3	Problem Drinking or Drug-taking					1		
Diagnoses: Likely to include: F00 – Dementia in	4	Cognitive Problems							
Alzheimer's disease, F01 – Vascular dementia, F02 –	5	Physical Illness or Disability							
Dementia in other diseases classified elsewhere, F03 –	9	Relationships							
Unspecified Dementia, F09 – unspecified organic or	10	Activities of daily living							
symptomatic mental disorder, Dementia with lewy	11	Living conditions							
bodies (DLB), Frontotemporal dementia (FTD)	12	Occupation and activities							
Impairment : Impairment of ADL and some difficulty	14	Agitated behaviour/expansive mood							
with communication and in fulfilling social and family	2	Non-Accidental Self-Injury							
roles.	15	Repeat Self-Harm							
Risks: Risk of self neglect, harm to self or others. May lack awareness of problems.	16	Safeguarding children and vulnerable dependent adults							
	17	Engagement							
	18	Vulnerability							
Course:		Expected to score Unlikely to feature							
		Issue for some							

CARE CLUSTER: 20 Cognitive Impairment or Dementia Complicated (High Need)

	No	ITEM DESCRIPTION		5	SCOR	E	
Description: People with dementia who are having			0	1	2	3	4
significant problems in looking after themselves and	6	Hallucinations and Delusions					
whose behaviour may challenge their carers or	13	Strong Unreasonable Beliefs					
services. They may have high levels of anxiety or	7	Depressed Mood*					
depression, psychotic symptoms or significant	8	Other Mental & Behavioural Problems *					
problems such as aggression or agitation. The may	3	Problem Drinking or Drug-taking					
not be aware of their problems. They are likely to be at high risk of self-neglect or harm to others, and there may be a significant risk of their care arrangements breaking down.							
Diagnoses: Likely to include: F00 – Dementia in	4	Cognitive Problems					
Alzheimer's disease, F01 – Vascular dementia, F02 –	5	Physical Illness or Disability					
Dementia in other diseases classified elsewhere, F03 –	9	Relationships					
Unspecified Dementia, F09 – unspecified organic or	10	Activities of daily living					
symptomatic mental disorder, Dementia with lewy	11	Living conditions					
bodies (DLB), Frontotemporal dementia (FTD)	12	Occupation and activities					
Impairment: Significant impairment of ADL	14	Agitated behaviour/expansive mood					
function and/or communication. May lack awareness	2	Non-Accidental Self-Injury					
of problems. Significant impairment of role functioning. Unable to fulfil social and family roles.	15	Repeat Self-Harm					
Risks: High risk of self-neglect or harm to self or others. Risk of breakdown of care.	16	Safeguarding children and vulnerable dependent adults					
	17	Engagement					
	18	Vulnerability					
Course: Long-term		Expected to score Unlikely to feature					
Long term		Issue for some					

CARE CLUSTER: 21 Cognitive Impairment or Dementia (High Physical or Engagement)

	No	ITEM DESCRIPTION	SCORE						
Description: People with cognitive impairment or			0	1	2	3	4		
dementia who are having significant problems in	6	Hallucinations and Delusions							
looking after themselves, and whose physical	13	Strong Unreasonable Beliefs							
condition is becoming increasingly frail. They may	7	Depressed Mood*							
not be aware of their problems and there may be a	8	Other Mental & Behavioural Problems *							
significant risk of their care arrangements breaking	3	Problem Drinking or Drug-taking							
down.									
Diagnoses: Likely to include: F00 – Dementia in	4	Cognitive Problems							
Alzheimer's disease, F01 – Vascular dementia, F02 –	5	Physical Illness or Disability							
Dementia in other diseases classified elsewhere, F03 –	9	Relationships							
Unspecified Dementia, F09 – unspecified organic or	10	Activities of daily living							
symptomatic mental disorder, Dementia with lewy	11	Living conditions							
bodies (DLB), Frontotemporal dementia (FTD)	12	Occupation and activities							
Impairment : Likely to lack awareness of problems.	14	Agitated behaviour/expansive mood							
Significant impairment of ADL function. Unable to	2	Non-Accidental Self-Injury							
fulfil self-care and social and family roles. Major impairment of role functioning.	15	Repeat Self-Harm							
Risks: High risk of self-neglect. Risk of breakdown of care.	16	Safeguarding children and vulnerable dependent adults							
	17	Engagement							
	18	Vulnerability							
		Expected to score							
Course: Long-term		Unlikely to feature							
		Issue for some							
NATE OF THE PROPERTY OF THE PR									