

Jefferson Plaza Family Health Home Screening

CC:
Widget:
ROI:

Patient Initials: _____

MCPN ID: _____

Referral Made _____

JCMH ID: _____

Staff Initials: _____

Date: _____

Research shows that integrating mental health, substance use, and primary care services produces the best outcomes and proves the most effective approach for caring for people with multiple health care needs.

To help us better serve your family, please answer the following questions:

1. What has been your family's biggest stressor(s) since the last medical appointment?
 - Lack of food/clothing
 - Housing
 - Child care
 - Employment
 - Legal issues
 - Relationship concerns
 - Parenting
 - Safety at home or in the community
 - Changes in mood or behavior (of any family member)
 - Assistant program (WIC, CCAP, TANF, food stamps...)
 - School difficulties
 - Health concerns
 - Drug and/or alcohol use
 - Other: _____

2. How much are any of these events still bothering your family?
 - Not at all
 - A little
 - Most of the time
 - All the time

3. Even with these struggles, what strengths do you notice in your family?

4. Any additional information you would like to share?



The Eight Dimensions of Wellness:

Please select a number under each wellness dimension to represent your level of functioning since your last medical appt.

1. **Emotional-** Coping effectively with life and creating satisfying relationships.

Example: I feel safe and supported in my relationships.

1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10

2. **Environmental-** Good health by occupying pleasant, stimulating environments that support well-being.

Example: I feel safe in my neighborhood and community.

1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10

3. **Financial-** Satisfaction with current and future financial situations.

Example: I am able to make my own financial decisions. I am able to pay for groceries and rent. I am able to pay for "surprises" such as car repairs or emergencies.

1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10

4. **Intellectual-** Recognizing creative abilities and finding ways to expand knowledge and skills.

Example: I know my strengths and am supported in my education and learning.

1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10

5. **Occupational-** Personal satisfaction and enrichment from one's work or school.

Example: I have job stability. My job meets my financial needs.

1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10

6. **Physical-** Recognizing the need for physical activity, healthy foods, and sleep.

Example: I have good energy. My body is safe. I usually get at eight hours of sleep.

1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10

7. **Social-** Developing a sense of connection, belonging, and a well-developed support system.

Example: I have family and friends I can talk with in time of need. I have healthy relationships.

1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10

8. **Spiritual-** Expanding a sense of purpose and meaning in life.

Example: Meditate or pray every day and/or spend time with nature. I feel supported by my church and/or spiritual leaders.

1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10