

**Assessing the Health Needs of an Individual:
Recommended Questions for Behavioral Health Providers**

1. What is the individual's idea of health? Is the individual's quality of life impacted by their health? What are the individual's health habits/typical patterns? Have they tried to make changes in any of the following areas? Do they want to focus on any of these areas? (follow up would be with MH, CD and PH providers)

- Diet and nutrition
- Exercise
- Dental care
- Sexual health
- Sleep
- Use of alcohol, drugs, tobacco

2. What are known risk factors/ existing disease states?

3. When you have a health care need, where do you go? Do you have health insurance?

4. Are you in contact with health care providers? Who are your providers?

- When was your last physical exam? By whom? Are you comfortable with your providers?
- Do your health care providers communicate with each other?
- Who is your dentist? When was your last dental exam?

5. Have your health care providers offered any health recommendations? What is your understanding of these recommendations? How interested are you with following these recommendations?

- Medications?
 - Are you taking any prescribed, over the counter, herbal remedies, diet supplements, etc.? How many?
 - Are your health providers aware of all the medications you are taking?
 - What pharmacy (pharmacies) do you fill your medication?
 - Do you have extra medication at home you are not currently using?
- Medical equipment?
 - Do you use eyes glasses, hearing aides, etc?
- Does your provider recommend regular blood work? How often? For what reason?
- When was the last time you had your weight / BMI measured? Your blood pressure? Do you know what these are?
- Does your health care provider ask you about your interest in quitting smoking?

- Are you interested in maintaining a personal health record and/or communication log that you could take to all of your appointments?

6. Are you interested in alternative or non-traditional treatment methods?
(e.g.: Yoga, acupuncture, meditation, massage therapy, Reiki, etc.)

7. Do you participate in any community wellness activities? What resources do you have to improve your health?

- Exercise group/gym
- Illness management group (e.g.: diabetes education)
- Nutrition/cooking group
- Other: _____

8. Are there barriers, assumptions, fears that need to be overcome in any of the above areas?