

# Essential Needs

## **I. Medical/Clinical Mental Health Needs**

①Comprehensive Diagnostic Assessment leading to diagnosis and Comprehensive Treatment Plan

Includes all the following and other standard psychiatric assessment areas

- a. Mental status
- b. Past Psychiatric history
- c. Cognitive Functioning Assessment
- d. Substance Abuse
- e. Adaptive Functioning
- f. Symptomatology
- g. General Medical assessment and history
- h. Developmental/Social History
- i. Family history
- j. Psychosocial assessment/vocational/educational assessment
- k. Legal history
- l. Spirituality

①Symptom Management

①Medication Management

①Mental Illness education

## **II. Medical Physical Health Needs**

①Access to health care (including dental care)

①Regular physical examination, as appropriate, and health status monitoring

②Wellness activity

②Lifestyle change support

## **III. Age Appropriate Daily Functioning Needs Due to Psychiatric Disability**

①Initial Identification and Outreach

①Monitoring Outreach

## MENTAL HEALTH OVERSIGHT COUNCIL WORK IN PROGRESS – FOR DISCUSSION

- ①Income (includes all entitlements)
- ①Hygiene
- ①Nutrition/Food preparation
- ①Personal Finance/Money Management
- ①Housing and Appropriate Home environment (including care of personal space and possessions)
- ①Crisis management
- ①Family Support/Education/Involvement
- ①Mental illness self-awareness include diagnosis understanding, and symptom and medication management skill building
- ①Transportation
- ①Work/School/Meaningful Activities
- ②Education/training
- ②Life planning/personal goal setting
- ②Interpersonal Communication/Social Skill training
- ②Social/Recreational/Leisure
- ②Friendship/personal network
- ②Peer Support
- ②Independence/Self-responsibility
- ②Self-advocacy
- ①Spirituality

### **IV. Risk Avoidance Needs**

- ①Physical violence
- ①Victimization

- ①Sexual offense
- ①Deliberate self-harm/suicidal tendencies
- ①Illegal or other unacceptable behaviors
- ①Substance abuse
- ①Treatment Noncompliance
- ①Runaway
- ①Poor impulse control
- ①Cognitive dysfunction
- ①General Risky behaviors

**①V. Community Needs**

Education, Training, and Awareness Activities

Interagency Collaboration

Alliance Building

Social Service Networking

Public Planning and Assessment

Systems Coordination-legal, social services, health care, schools, spiritual organizations, etc.

Consultation

Clear lines of responsibility, communication

Mental health services and training to detention facilities

The Subcommittee discussed the need to prioritize essential needs given the limited resources the public mental health system operates under. A ① represents the highest priority essential needs. A ② represents an essential need, but does not rank as high as a priority. This prioritization is meant to reflect the financial realities that financing the public mental health system will require prioritizing and eliminating certain services.

Other members of the subcommittee felt that prioritizing “essential” needs was an oxymoron. They expressed the proposition that if individuals essential needs are met at the appropriate time and place higher cost services can be avoided. If financial pressures force limiting services, then services could be triaged based upon those with the greatest need.

## **VI. Gradations of Need**

**The following gradations of need are provided as a recommended method for assessing, identifying, and meeting essential needs in the lives of individuals served by the State of Montana’s Public mental health system. In doing so, the system will be more responsive to closing gaps in care, and in transitioning individuals from appropriate levels of care to best meet individual needs. The specific gradations may be more appropriate to one need area than another.**

### **Gradations of need related to daily functioning**

1. Not Able (completely dependent on other people to perform)
2. Rarely (requires constant supervision to perform)
3. Marginally (relies on close supervision and {re}direction to manage)
4. Somewhat (manages with regular assistance)
5. Mostly (generally able to manage with occasional help)
6. Fully (completely able and willing)

### **Gradations of need related to family capacity to support a child with special needs**

1. Not Able (parents are unavailable or the family is otherwise unable to support the child)
2. Rarely (the family requires constant supervision to support the child)
3. Marginally (the family relies on close supervision to support the child)
4. Somewhat (the family manages with regular assistance)
5. Mostly (the family generally is able to manage with occasional help)
6. Fully (the family is available, able and willing to support the child)

### **Gradations of impairment**

1. Severe Impairment
2. Moderate Impairment
3. Mild Impairment
4. Minimal or no impairment

### **Gradations of Level of Care (Adults)**

1. **Lock hospital with high-intensity care or similar** (such as special safety interventions, 1:1 supervision, or restraints)
2. **Locked hospital**
3. **Unlocked hospital or similar**

## MENTAL HEALTH OVERSIGHT COUNCIL WORK IN PROGRESS – FOR DISCUSSION

4. **High-daily** (face-to-face support or treatment services more than 18 hours per day, including residential program with awake overnight staff and all nursing and rest homes)
5. **Medium-daily** (face-to-face support or treatment services between 4 and 17 hours per day, including residential programs with asleep overnight staff)
6. **Low-daily** (face-to-face support or treatment services up to 4 hours each day)
7. **Several times weekly** (face-to-face support or treatment services between 2 and 6 times per week)
8. **Weekly or less** (face-to-face support or treatment services one a week or less)
9. **None** (lives independently without services, or accesses resources as needed independently or through personal support network)

### **Complexity of Interventions (Children)**

1. Acute, emergent, immediate special safety needs requiring 1:1 supervision 24 hrs a day.
2. 24 Hour custodial care needs
  - a. Short Term
  - b. Chronic
3. Multi-Agency Involvement (developmental, court, protection, education, other)
4. Family-Daily Support Needs (refer to elements #4-9 in gradations in levels of care for adults)
  - a. High-daily
  - b. Medium- daily
  - c. Low- daily
  - d. Several Times weekly
  - e. Weekly or less
  - f. None