Appendix 2

Camberwell Assessment of Need Short Appraisal Schedule (CANSAS), 2nd Edition

Need rating Service user name N = No needU = Unmet need M = Met need ? = Not known Assessment number 2 3 1 U/S/C | U/S/C | U/S/C | U/S/C Circle who is interviewed (U = Service user, S = Staff, C = Carer) Date of assessment Initials of assessor Accommodation What kind of place do you live in? 2 Food Do you get enough to eat? Looking after the home Are you able to look after your home? Self-care Do you have problems keeping clean and tidy? Daytime activities How do you spend your day? Physical health How well do you feel physically? Psychotic symptoms Do you ever hear voices or have problems with your thoughts? Information on condition and treatment Have you been given clear information about your medication? Psychological distress Have you recently felt very sad or low? 10 Safety to self Do you ever have thoughts of harming yourself? Safety to others Do you think you could be a danger to other people's safety? 12 Alcohol Does drinking cause you any problems? 13 Drugs Do you take any drugs that aren't prescribed? 14 Company Are you happy with your social life? Intimate relationships Do you have a partner? 16 Sexual expression How is your sex life? 17 Dependents Do you have any dependents, e.g. children under 18? Basic education Any difficulty in reading, writing or understanding English? Digital communication Do you have a phone and access to the internet? Transport 20 How do you find using the bus, tube or train? Money How do you find budgeting your money? Are you getting all the money you are entitled to? Total Met needs - count the number of M's in the column Total Unmet needs - count the number of U's in the column

C

Total number of needs - add together A + B