

Psychosocial Acuity - County

Client name: _____ Client number: _____

(Check the appropriate level in each life area. Multiply the number of “checks” in each column by the number of “points” for a total.) If any of the following conditions apply, the psychosocial acuity level is automatically 4 and the acuity must be reassessed in 60 days:

Incarcerated within the last 90 days

Diagnosed with HIV in the last 180 days

Currently homeless

Life area	1 (1 point)	2 (2 points)	3 (3 points)	4 (4 points)
Basic needs	Client is able to meet own basic needs. Client is able to access community assistance on their own as needed.	Occasional help to access assistance. Needs occasional food or financial assistance < 2 months per year.	Difficulty accessing assistance. Often without basics. Accesses food or financial assistance 3-6 months per year.	Has limited access to food. Without most basic needs. Accesses food or financial assistance > 7 months per year.
Transportation	Has reliable transportation. Is able to cover costs of transportation.	Needs occasional assistance < 2 months per year.	No means. Under or un-served area. Needs assistance 3-6 months per year.	Serious impact on medical care. Needs assistance > 7 months per year.
Risk reduction	Understand risks and practices harm reduction behavior.	Poor understanding of risk and no exposure to high risk situations or behaviors.	Has poor knowledge and/or occasionally engages in risky behaviors.	Lacks knowledge and/or engages in significant risky behaviors.

Life area	1 (1 point)	2 (2 points)	3 (3 points)	4 (4 points)
Health insurance/ medical care coverage	Has own medical insurance and payer. Able to access medical care.	Enrolled in CAREAssist. Needs occasional assistance accessing medical care < 2 times per year.	Needs CM assistance or referral to access insurance or CAREAssist. No medical crisis. Needs assistance accessing medical care 3–6 times per year.	Needs immediate assistance to access insurance or CAREAssist. Medical crisis. Does not have access to medical care.
Self sufficiency	Independent. F/U on referrals and access services.	Sometimes requires assistance in F/U and completing forms.	Difficulty w/ F/U; completing forms; accessing services.	Never F/U; unable to complete forms; burns bridges.
Life area	1 (2 point)	2 (4 points)	3 (6 points)	4 (8 points)
Housing/Living arrangement	Living in clean, habitable, stable housing. Does not need assistance.	Stable housing subsidized or not. Occasionally needs assistance with housing < 2 months per year.	Temporary housing. OHOP violation or eviction imminent. Frequently accesses assistance 3–6 months per year or pays rent late Unsafe housing.	Homeless. Recently evicted. Unable to live independently. Accesses assistance > 7 mo. per year.
Mental health	No reported mental health problems. No need for referral.	Reports current difficulties/stress — is functioning. Engaged in mental health care.	Experiencing severe difficulty in day-to-day functioning. Requires significant support. Needs referral to mental health care.	Danger to self/ others, needs immediate intervention. Needs but not accessing therapy.

Life area	1 (2 point)	2 (4 points)	3 (6 points)	4 (8 points)
Substance Use	No risk, or low risk alcohol/drug use. No tobacco use.	Risky use of alcohol/drugs. Tobacco user, contemplating or attempting to quit.	Harmful use of alcohol/drugs. Tobacco user. No desire to quit.	Dependent use of alcohol/drugs.
Points per level				
Total points				

Date: _____