

The Dementia Carer Assessment of support Needs Tool

Being a carer to a person with dementia

When caring for a person with dementia you may need help and support for yourself. Your answers will help to identify if you have a need for support, and what might help in your present situation. The questions may address topics sensitive to you. When answering questions you have to consider support needs aside from the support you and the person with dementia may already receive. Filling out the questionnaire takes about 10 minutes.

Please answer all of the questions, and tick only one response per question. If you find a question difficult to answer, you may choose the response most relevant to you.

Daily life when caring for a person with dementia

| Consider your present situation caring for the person with dementia. Do <u>you</u> have a need for support... | No (not relevant/ need met) | Yes, a little more | Yes, quite a bit more | Yes, very much more |
|---|--------------------------------|--------------------------|-----------------------------|---------------------------|
| 1. to manage everyday chores (e.g. dressing, cleaning, transportation)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. to manage changed behaviour in the person with dementia (e.g. aggressive, restless or passive behaviour)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. to make decisions regarding the person with dementia? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. to create nice experiences together with the person with dementia? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. to share the responsibility of caring with someone else? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. to prioritise your own health? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. to maintain your social network? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. to talk to someone about intimacy? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Maintaining your well-being

| Consider your present situation caring for the person with dementia. Do <u>you</u> have a need for support... | No (not relevant/ need met) | Yes, a little more | Yes, quite a bit more | Yes, very much more |
|---|--------------------------------|--------------------------|-----------------------------|---------------------------|
| 9. to cope with your own emotions (e.g. loss or grief)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. to manage stress? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. to deal with bad conscience or guilt? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. to sleep better? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Focus on yourself

| Consider your present situation caring for the person with dementia. Do <u>you</u> have a need for support... | | No (not relevant/ need met) | Yes, a little more | Yes, quite a bit more | Yes, very much more |
|--|---|--------------------------------|--------------------------|-----------------------------|---------------------------|
| 13. | to manage person with dementia's lack of disease awareness? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. | to feel appreciated in what you are doing for the person with dementia? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. | to ask for help for yourself? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. | to feel confident in the caring role? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Communicating and interacting with surroundings

| Consider your present situation caring for the person with dementia. Do <u>you</u> have a need for support... | | No (not relevant/ need met) | Yes, a little more | Yes, quite a bit more | Yes, very much more |
|--|--|--------------------------------|--------------------------|-----------------------------|---------------------------|
| 17. | to make sure that services targeted the person with dementia conform to your daily life? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. | to get respite from everyday caring? (ome)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. | to prepare for deterioration of the situation (e.g. moving into nursing h | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. | to get in contact with others in the same situation as you? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. | to get information about who to contact for support? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. | to be involved in this collaborative caring work? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. | to involve family/network in tasks or decision making in relation to the person with dementia? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. | to navigate rules and legislation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. | to manage financial issues on behalf of the person with dementia? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

Thank you