

	SERVICE USER PROFILE INTERVIEW FORM	Document Control Information: Document No.: CHR-PREV-FR-010 Revision No.: 000 Revision Date: 10 June 2022 Page 1 of 3
	Office: Prevention Cluster	

Mental Health facility: _____

Service User Name: _____

Date of Admission: _____

Categories of Residents: (Children, Juveniles, Elderly Residents, Residents with Substance Abuse Problems, Forensic Residents)

Personal Circumstances:

	Yes	NO	Indicate the explanation given
1. Voluntary admission			
2. Involuntary admission			
3. Is involuntary admission processed in therapy with the resident and family?			
4. Do cases of involuntary admission come with a court order or barangay request?			
5. Is there an informed consent? (consent voluntarily given by a service user to a treatment plan, a patient must give prior informed consent before receiving treatment or care including the right to withdraw such consent)			
6. Is the informed consent properly explained to the residents/guardians/legal representatives?			
7. Who are the signatories in the informed consent?			
8. Do you have an Advance Directive? (prepared while mentally competent and state the person's treatment preferences or health care if you can't make the decisions yourself)			

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9. Is the advance directive intelligently arrived at by the resident/family/guardian and mental health professionals?			
10. Do you have a legal representative?			
11. Is confidentiality being practiced and respected?			
12. Right to freedom from discrimination			
13. Right to protection from torture, cruel inhumane, and degrading treatment			
14. What are the disciplinary measures being implemented in the facility?			
15. Are rules within the facility communicated clearly with the residents?			
16. Right to after-care and rehabilitation			
17. Right to be adequately informed about the psychosocial and clinical treatment			
18. Are the residents able to communicate freely to the outside world, with their right to privacy respected?			
19. What are the means of communication?			
20. What is the schedule of visitation?			
21. Is withholding visitation rights considered as punishment?			
22. Is the use of restraint/seclusion			

covered by a doctor's order?			
23.Do the residents have the right to complain regarding restraint/seclusion?			
24.Are medicines accessible and affordable?			

2. Briefly enumerate/describe the daily routines/activities of residents

3. Challenges are the challenges being encountered?

4. Recommendation/Request for the improvement of the mental health/drug rehabilitation facility

Interviewer:

Date: _____