

Changes In My Personal Needs

Your personal needs can change due to natural aging, after an illness or hospitalization, or the loss of a partner. Health care professionals use assessment tools and checklists to better understand your needs by asking you questions and observing you in your home. Use this activity to help you identify if you are experiencing any changes in your personal needs, how to communicate this with others, and how to ask for the assistance you need.

Resource Kit

Click the underlined words in each activity to explore the online resource kit. The resource kit provides definitions and links to research-based websites, services, resources, tools, videos, and more!

MywellHealth.info

Write your full name & date completed/updated here:
(It will automatically appear on every page)

Changes in My Personal Needs

Your personal needs can change due to natural aging, after an illness or hospitalization, or the loss of a partner. Health care professionals use assessment tools and checklists to better understand your needs by asking you questions and observing you in your home. It can be difficult to acknowledge that your physical and/or mental health is changing. It is important to be honest and realistic when responding to questions in any checklist or assessment. Use this activity to help you identify if you are experiencing any changes in your personal needs, how to communicate this with others, and how to ask for the assistance you need.

Tip: Complete this checklist with someone who is close to you and who you trust. Try to see the list as a way to get assistance with what you need rather than a list of what you cannot do. Consider asking your care partners for help with the tasks you identify as challenging.

Identifying Changes in My Personal Needs

Even though your needs can change day-to-day, check the items that you currently find challenging and need help with or items others have noticed you might need help with..

Date Updated:

Personal Care

___ Bathing	___ Using the toilet	___ Skin care
___ Dressing	___ Shampoo & hair care	___ Mouth and denture care
___ Shaving	___ Applying make-up	___ Nail care
___ Ear cleaning/ Wax removal	___ Bowel or bladder control	___ Checking weight

Safety

___ Taking medication at the right time and the right dose.	___ Completing health care treatments or monitoring (such as blood pressure or blood glucose)	___ Concern of excessive alcohol or drug use
___ Loss of balance or falls	___ General muscle or hand weakness	___ Identifying tripping hazards (such as mats & low objects)

Identifying Changes in My Personal Needs(2)		
Mind and Socializing		
___ Vision	___ Hearing	___Mood changes or irritability
___ Memory loss	___ Anger or outbursts	___ Loneliness
___ Explaining wants and needs to others	___ Quiet time/ Personal space	___ Using the home or cell phone
Activities		
___ Errands and shopping	___ Exercising	___ Going to social outings
___ Getting to appointments	___ Participating in activities	___ Banking and money management
___ Driving	___ Taking public transit	___ Taking a taxi
Mobility		
___ Getting in and out of a chair	___ Walking up and down stairs	___ Walking inside the house
___ Walking outside		
Food Preparation & Meal Support		
___ Grocery Shopping	___ Planning meal choices	___Preparation of meals and snacks
___ Using the stove and oven safely, turning it off after use.	___Identifying spoiled food	___ Chewing and swallowing
___ Drinking enough or limiting fluids	___	___

Identifying Changes in My Personal Needs(3)		
Home Hygiene		
____Cleaning kitchen and dishes	____ Making and changing the bed	____Wash & dry laundry and put away
____ Vacuuming and sweeping	____ Garbage and recycling	____ Cleaning the bathroom
____ Picking up and sorting the mail	____Managing and reducing clutter	____Dusting
Home Maintenance		
____ Garbage removal	____ Lawn or garden care	____ Sidewalk cleaning/ snow removal
____ Cleaning roof gutters	____ Minor home repairs	____

Tip: You also might consider asking your physician or nurse practitioner for a cognitive assessment if you are noticing difficulties with your memory, confusion, and/or irritability.

Notes for Changes In My Personal Needs

Use the 'Notes for My Place to Call Home' as needed. It keeps all your thoughts, questions, and things to do in one place. Might be a place to list ideas, services, and resources you like.

Date	A place to record your thoughts, questions, and learning

Notes	
Date	A place to record your thoughts, questions, and learning

Notes	
Date	A place to record your thoughts, questions, and learning