

# Dimensions of Health and Wellbeing Report

# **Dimensions Report**

This is your personalised Dimensions report based on responses given on 29/02/2024. We **do not** store any reports, you must SAVE the report to your device (which will save a copy in your download folder). You can then choose to share the report with someone who is supporting you.

This report provides a summary of the ratings you have provided, identifying **strengths and areas where further support would be helpful**. The report includes links to pdf documents which contain signposting to information or services based on your responses. This includes local and national support, apps, video/audio and/or reading.

**Note:** Remember to save or print this report if you want to look at it again. You have 20 minutes from clicking **finish** to do this.

# How to use this report

We recommend that you focus on the Dimensions documents in this order.

| Orange or Red         |                       | Areas further support would be most beneficial |
|-----------------------|-----------------------|--|
| Light Green or Yellow | IRSTING LAVAL 3 OF /I | Areas further support would be helpful         |
| Dark Green            |                       | Areas of strength but support may be helpful   |

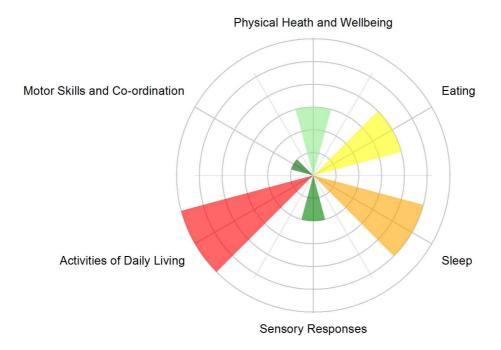
This icon on the report indicates that there is link to a pdf document which contain signposting to information or services.

# **Further Support**

If you have any concerns that may not have been captured by the Dimensions tool, we suggest that you talk to a professional about these, so they can make sure you are getting the help you need. That could be a support worker, a teacher/SENCO, a social worker or a health professional such as a GP.

For further support and information about neurodiversity you may want to view the 'Information and Advice Booklet for Neurodivergent People and their Families' by following this link: dimensions.covwarkpt.nhs.uk/News.aspx?NID=26

# **Body and Physical Wellbeing**



#### **Dimensions Ratings:**

#### Physical Heath and Wellbeing: Level 3

I have physical health needs that have a LITTLE impact on my mental wellbeing and everyday life.



#### Eating: Level 4

Difficulties with food or eating noticed REGULARLY and STRUGGLE to maintain healthy weight and/or meet nutritional needs, noticed over a long period of time (a couple months or more).



#### Sleep: Level 5

Difficulties with sleep have a SIGNIFICANT impact on energy and engagement in activities of everyday living and/or emotional wellbeing through the day. You may have considered or sought specialist or medical support to help manage this (which may include medication).

As you have rated highly, we recommend you discuss your concerns with your GP Practice or another health care professional.



#### Sensory Responses: Level 2

Some difficulty with sensory preferences and this has a MINIMAL impact on my everyday life.

# **Activities of Daily Living: Level 6**

I have significant difficulty in activities of daily living and this has a SEVERE impact on me.

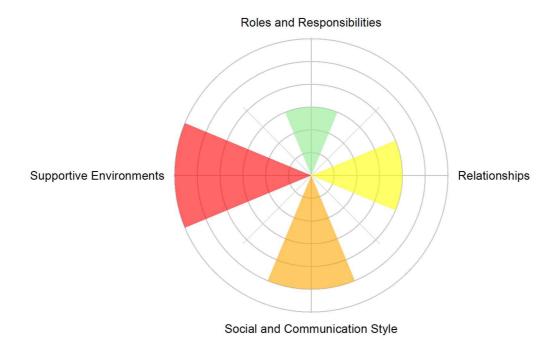
As you have rated highly, we recommend you discuss your concerns with your GP Practice or another health care professional.



#### Motor Skills and Co-ordination: Level 1

I have no difficulties with motor skills and/or co-ordination, and this has NO impact on my daily life.

#### **Relationships and Connections**



#### **Dimensions Ratings:**

#### Roles and Responsibilities: Level 3

Parent or carer roles and responsibilities undertaken have a LITTLE impact on my everyday life and/or I mostly have the support to help manage this.



#### Relationships: Level 4

I have SOME difficulties in relationships with others.



#### Social and Communication Style: Level 5

I am RARELY able to express my needs, understand and be understood by others.

As you have rated highly, we recommend you discuss your concerns with your GP Practice or another health care professional.

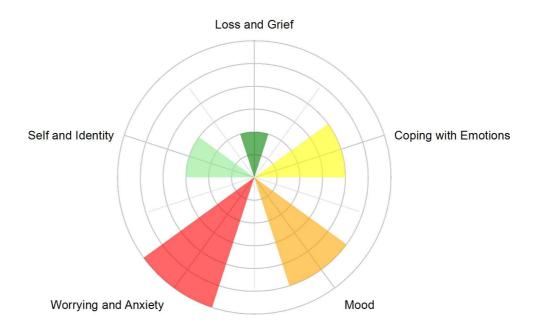


#### **Supportive Environments: Level 6**

My environments are NOT supportive and do not meet my needs.

As you have rated highly, we recommend you discuss your concerns with your GP Practice or another health care professional.

#### **Emotional Wellbeing and Mental Health**



# **Dimensions Ratings:**

#### Loss and Grief: Level 2

I have an experience of loss, and this has a MINIMAL impact on me and/or my everyday life.



#### **Coping with Emotions: Level 4**

Emotions OFTEN have an impact on my everyday life.



#### Mood: Level 5

Difficulties with mood have a SIGNIFICANT impact on my everyday life. You may have considered or sought specialist or medical support to help manage this (which may include an antidepressant prescription).

As you have rated highly, we recommend you discuss your concerns with your GP Practice or another health care professional.



#### Worrying and Anxiety: Level 6

Difficulties with anxiety have a SEVERE impact on my daily life. You may have a diagnosis of an anxiety disorder.

As you have rated highly, we recommend you discuss your concerns with your GP Practice or another health care professional.

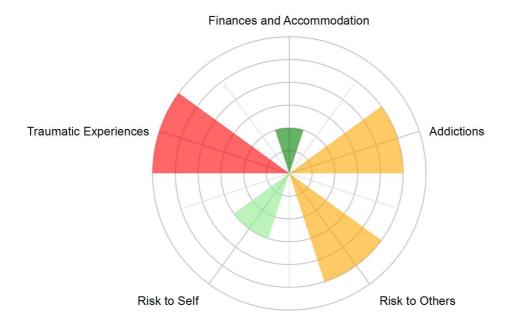
Worrying and Anxiety Level 4-6 Adult Self-care

# Self and Identity: Level 3

How I view myself and my identity has a LITTLE impact on my confidence and self-esteem levels.



#### Safety and Risk



### **Dimensions Ratings:**

#### Finances and Accommodation: Level 2

I have difficulties with my finances and/or accommodation and this has a MINIMAL impact on my physical and/or mental wellbeing.



#### Addictions: Level 5

I have little control over habits, and this has a SIGNIFICANT impact on my everyday life.

As you have rated highly, we recommend you seek immediate support from one of the support organisations on the flyer below or in an emergency call 999.



#### Risk to Others: Level 5

I experience thoughts to cause risk and/or harm to others EVERYDAY and have acted on this in the past but have little to NO intentions to act on this currently.

As you have rated highly, we recommend you seek immediate support from one of the support organisations on the flyer below or in an emergency call 999.

#### Risk to Self: Level 3

I am SOMETIMES at risk to myself.



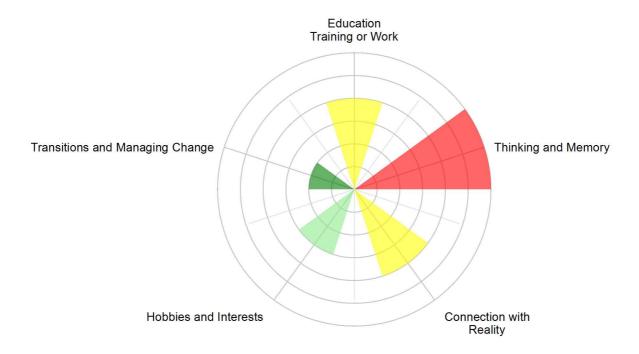
#### **Traumatic Experiences: Level 6**

I have experienced traumatic events, that have a SEVERE impact on my distress levels and everyday life.

As you have rated highly, we recommend you discuss your concerns with your GP Practice or another health care professional.



#### Thinking and Learning



# **Dimensions Ratings:**

# **Education, Training or Work: Level 4**

I OCCASSIONALLY struggle to access and/ or engage in education, training and/or work and/or this may have some impact on my wellbeing.



#### Thinking and Memory: Level 6

Thinking and memory skills have a SEVERE impact on my everyday life.

As you have rated highly, we recommend you discuss your concerns with your GP Practice or another health care professional.



#### **Connection with Reality: Level 4**

You experience a loss of connection with reality, and this OCCASSIONALLY causes me distress or puts me or others at risk.



#### **Hobbies and Interests: Level 3**

I have active hobbies and interests that I am SOMETIMES able to access.

# Hobbies and Interests Level 2-6 Adult Self-care

#### Transitions and Managing Change: Level 2

Change has a MINIMAL impact on my everyday life and/or I have some level of support.



If no flyers are presented, then it does not appear that this person has difficulties related to their health and well-being. However, if you have concerns about this, or feel that the problems they have are not captured by Dimensions, it would be helpful to talk to a professional about your worries. In this situation, it would be a good idea to call the service and discuss it with a clinician before sending in a referral.

| Question:                         | Response: |
|-----------------------------------|-----------|
| Who are you looking for help for? | Myself    |
| What is your age group?           | 35-44     |
| What is your gender?              | Male      |
| Which area do you live in?        | Coventry  |

| Dimension:                   | Level (0-6): |
|------------------------------|--------------|
| Education, Training or Work  | 4            |
| Finances and Accommodation   | 2            |
| Loss and Grief               | 2            |
| Addictions                   | 5            |
| Coping with Emotions         | 4            |
| Physical Heath and Wellbeing | 3            |
| Eating                       | 4            |
| Sleep                        | 5            |
| Mood                         | 5            |

| Roles and Responsibilities      | 3 |
|---------------------------------|---|
| Relationships                   | 4 |
| Risk to Others                  | 5 |
| Sensory Responses               | 2 |
| Risk to Self                    | 3 |
| Thinking and Memory             | 6 |
| Traumatic Experiences           | 6 |
| Connection with Reality         | 4 |
| Worrying and Anxiety            | 6 |
| Activities of Daily Living      | 6 |
| Hobbies and Interests           | 3 |
| Motor Skills and Co-ordination  | 1 |
| Self and Identity               | 3 |
| Social and Communication Style  | 5 |
| Supportive Environments         | 6 |
| Transitions and Managing Change | 2 |