

<b>D</b>	Demographics	<b>Explore regional background, level of acculturation, age and sex as they influence health care behaviours:</b> <ul style="list-style-type: none"> <li>• Where were you born? • Where was “home” before coming to the U.K.? • How long have you lived in the U.K.?</li> <li>• What is the patient’s age and sex?</li> </ul>
<b>I</b>	Ideas	<b>Ask the patient to explain their ideas or thoughts of mental health and illness:</b> <ul style="list-style-type: none"> <li>• What do you think keeps you healthy? • What do you think makes you sick? • What do you think is the cause of your illness?</li> <li>• Why do you think the problem started?</li> </ul>
<b>V</b>	Views	<b>Ask about treatment preference, use of home remedies, and treatment delay/avoidance:</b> <ul style="list-style-type: none"> <li>• Are there any mental health care treatments that might not be acceptable?</li> <li>• Do you use any traditional, spiritual or home health remedies to improve your mental health?</li> <li>• Who do you speak to about this? • What have you used before? • Have you used alternative healers?</li> <li>• What kind of treatments do you think will help?</li> </ul>
<b>E</b>	Expectations	<b>Ask about what your patient expects from their doctor/nurse/clinician:</b> <ul style="list-style-type: none"> <li>• What do you hope to achieve from today’s visit? • What do you hope to achieve from treatment?</li> <li>• Do you find it easier to talk with a male/female? • Someone younger/older?</li> </ul>
<b>R</b>	Religion	<b>Ask about your patient’s religious and spiritual traditions:</b> <ul style="list-style-type: none"> <li>• How important is religion/spirituality in your everyday life? • Has your illness affected your ability to practice your religion or spirituality?</li> <li>• Will religious or spiritual observances affect your ability to follow treatment? How and why?</li> <li>• Do you avoid any particular foods/drinks? • Does your diet affect which medication you can take?</li> <li>• During the year, do you change your diet in celebration of religious and other holidays?</li> <li>• Do you receive any support from members of your faith community? • Are there any practices or rituals that help you cope?</li> </ul>
<b>S</b>	Speech	<b>Identify your patient’s communication needs including language, literacy levels, BSL or other:</b> <ul style="list-style-type: none"> <li>• What language do you prefer to speak? • Do you need an interpreter? • What language do you prefer to read?</li> <li>• Are you satisfied with how well you read? • Would you prefer printed or spoken instructions? (Avoid using a family member as an interpreter.)</li> </ul>
<b>E</b>	Environment	<b>Identify patient’s home environment and the cultural/diversity aspects that are part of the environment (home environment includes the patient’s daily schedule, support system and level of independence):</b> <ul style="list-style-type: none"> <li>• Do you live alone? • How many other people live in your house? • Do you have transport? • Do you get out and meet people?</li> <li>• Who gives you emotional support? • Who helps you when you are ill or need help? • Can you get yourself washed and dressed?</li> <li>• Do you have the ability to shop/cook for yourself? • What times of day do you usually eat? • What is your largest meal of the day?</li> </ul>