**MEDICAL AND PSCHYCHOSOCIAL ASSESSMENT FORM**

**VULNERABILITY ASSESMENT**

**GREECE**

|  |  |
| --- | --- |
| **Α) VULNERABLE** | Significant vulnerability is evident. Follow up assessment and development of a care plan is recommended. Reference should be made to the immediate need of support |
| **B) NON VULNERABLE WITH SPECIAL NEEDS FOR HOSTING** | Frequent monitoring of vulnerability status.If there are no preventative support measures, these persons could develop vulnerability due to their clinical and/or psychosocial condition. |
| **(C) NON VULNERABLE WITH NO NEEDS FOR SUPPORT** | Non vulnerable persons without any need of support |

Comments on vulnerability rating: provide the relevant medical code as accepted by the MoH. This includes the international classification of Diseases (ICD-10) or the diagnostic and of the statistical Manual of Mental Disorders (DSM).

|  |
| --- |
|  **PERSONAL DETAILS OF THE PATIENT** |
| **DIKA nr** |
| **First Name**  |
| **Family Name** |
| **Gender** |
| **Birth Date** |
| **Country of Origin** |
| **Representative (if applicable)** |
| **Identity Documents** |
| ID |
| Passport |
| Other |
| **Child** |
| Unaccompanied  |
| Child accompanied by parent/s |
| Child accompanied by family member/s |
| Child accompanied by temporary guardian |

**VULNERABILITY TEMPLATE**

|  |
| --- |
| **1. MEDICAL HISTORY** |
| **1A. HEALTH CONDITION** |
| Physical health |  |
| Mental health |  |
| Risk of suicide & self-harm and harm to others (*see suicide risks in annex III*)  |  |
| Disability  |  |
| Substance addiction |  |
| Other Findings |  |

|  |
| --- |
| **1B. MEDICAL DOCUMENTS PRESENTED BY THE PATIENT** |
| (include details of the medical documents, brief summary of the content, relevancy) |

|  |
| --- |
| **2. TREATMENT**  |
| (include details of the patient’s previous, current and possible need for further treatment, whether continuous treatment is required, need for special diet, availability of treatment locally etc) |

|  |
| --- |
| **3. TRAVEL RESTRICTIONS OF THE PATIENT** |
| (include details if the patient has any restrictions to travel due to the medical condition) |

|  |
| --- |
| **4. ADDITIONAL OBSERVATIONS AND/OR FINDINGS** |
| (Include any additional details that may be relevant, such as effect of the vulnerability in daily activities, whether support from another person is required,non-availability of drugs etc.) |

The patient was properly informed in a language he/she understands and consented to the sharing of his/her health personal data by the police/first reception/asylum services for the purposes of granting asylum.

**EXAMINING PHYSICIAN’S DECLARATION**

This declaration must be signed and dated by the examining physician responsible for this evaluation. This declaration must be signed after the examining physician has sighted and considered all medical data. Please read carefully before signing. Please write name and other details below:

I certify that this person has been examined by me or staff under my supervision and their identification in terms of papers has been confirmed.

I certify that the statements my staff and I have made are true, correct and complete to the best of my knowledge.

Date:

D D M M Y Y Y Y

Full name:

Member number of the medical association:

Place of issue:

Postal address:

Daytime telephone number

Email address:

Signature of examining physician:

|  |  |
| --- | --- |
|  | **IDENTIFIED FORMS OF VULNERABILITY****(according to Greek law 4375/2016)** |
| 1 | UAM/separated child |
| 2 | Person with incurable disease Person with serious diseasePerson with disabilities  |
| 3 | Elderly person |
| 4 | Pregnant woman / woman who recently gave birth |
| 5 | One parent family with underage children |
| 6 | Victim of torture Victim of sexual exploitationSGBV victimPersons with PTSDShipwreck survivorsRelatives of shipwreck victimsTHB victims |

**If the person has a disability, identify and circle according to category (D1, D2, D3 or E1, E2, E3, E4). The categories are described in Annex I.**

**D. Impairment associated with physical and developmental conditions**

D1. Mobility

D2. Cognitiveimpairment/ dysfunction

D3. Other disabilities according to the Greek Law .11321/οικ.31102/1870/31-10-13 (ΦΕΚ 2906 Β΄/18-11- 13)

1. **Impairment associated with psychological and psychiatric conditions**

**E1**. Impaired attention and lack of concentration

**E2**. Impaired form and content of thought

**E3**. Impairedmemory

**Ε4.** Other psychiatric and psychological disabilities according to the Greek Law Φ.11321/οικ.31102/1870/31-10-13 (ΦΕΚ 2906 Β΄/18-11- 13)

**Ifthepersonhasaserious disease, identify and circle according to category (Z1, Z2, Z3, Z4). The categories are described in Annex II.**

**Z1.** Chronic conditions

**Z2.** Infections

**Z3.** Allergic episodes

**Z4.** Mental illness (disorder)

 **ANNEX I – Categories of disabilities**

**D. Impairment associated with physical and developmental conditions**

***D1****. Mobility*

Limitations to physical mobility –needing a wheelchair, walking frame

Incontinence

Needing oxygen support

Difficulty in sitting or walking

***D2.*** *Cognitive impairment/ dysfunction*

Cognitive impairment can be caused by intellectual disability, developmental disorders, acquired brain injury and physical conditions affecting brain functioning. Stroke or neurological damage resulting in severe impairment need expert physician assistance.

***D3.*** *Other disabilities according to the Greek Law Φ.11321/οικ.31102/1870/31-10-13 (ΦΕΚ 2906 Β΄/18-11- 13)*

Diseases related to blood

* Thalassemia
* Sickle cell anemia

Diseases of respiratory system

* Pulmonary fibrosis
* Pulmonary hypertension
* Sarcoidosis with disability
* Total pneumonectomy

Diseases of circulatory system

* Heart failure
* Hear transplantation

Diseases of peptic system

* Liver transplantation
* Diseases related to metabolism
* Gaucher’s disease
* Dermatological diseases
* Xeroderma Pigmentosum-XP
* Epidermolysis bullose
* Muscular Dystrophy

Orthopedic diseases

* Amputation and phocomelia of arms
* Paralysis/ cross-section of nerves of arms after two years of their establishment
* Amputation and phocomelia of legs
* Paralysis/ cross-section of nerves of legs after two years of their establishment
* Arthrogryposis

Ear, throat and nose diseases

* Mutism because of deafness
* Irreversible resection
* Tongue resection
* Slowness of tongue because of permanent nerve damage
* Paralysis of tongue – throat nerve
* Throat resection, permanent tracheotomy

Surgical diseases

* Permanent jejunostomy, ileostomy, colostomy

Surgical diseases of urinary system

* (part or total penis resection

Eye diseases

* Reduce of visual acuity without possible improvement
* Daltonism / colour-blindness/dyschromatopsia

Diseases of kidney

* Chronic kidney failure under dialysis
* Kidney transplantation
* Cystic fibrosis level 2

Oncological diseases

* Malignant neoplasm at the last stage
1. **Impairment associated with psychological and psychiatric conditions**

***E1.*** *Impaired attention and concentration*

Concentration is required in order to direct attention to something or someone. A large number of psychological conditions and disorders go together with a reduced capacity to concentrate e.g. –PTSD-depression

***E2.*** *Impaired form and content of thought*

 Impairments in the form and content of thought involve disruption to the low of thought (flight of ideas/loosening of associations; over-inclusive or tangential thinking .the individual cannot confine their thoughts to the topic discussed

When severe they are usually associated with psychiatric conditions:

* bipolar disorder,
* mood disorder with psychotic features
* schizophrenic disorders

or can result from physical conditions:

* infection
* intoxication
* brain damage

***E3.*** *Impaired memory*

* Memory impairment caused by:
* Psychological conditions,
* Physical and developmental conditions
* A current mental disorder
* PTSD
* Normal age related memory loss

***Ε4.*** *Other psychiatric and psychological disabilities according to the Greek Law Φ.11321/οικ.31102/1870/31-10-13 (ΦΕΚ 2906 Β΄/18-11- 13)*

Mental diseases

* Dementia (Alzheimer, Pick etc.)
* Intellectual disability
* Genetic syndrome of chromosomes
* Pervasive development disorder (like autism, Rett syndrome, Asperger syndrome)

Diseases of nervous system

* Progressive level of Parkinson
* Huntington disease
* Spinal cord/ Cerebellar diseases
* Amyotrophic Lateral Sclerosis
* Hemiplegia/ hemiparesis two years after its appearance and with no signs of improvement
* Tetraplegia, paraplegia, diplegia two years after its appearance and with no signs of improvement
* Cranial nerves paralysis

**ANNEXII – Categories of serious diseases**

**If the person has a serious disease, identify and circle according to category (Z1, Z2, Z3, Z4 ).**

***Z1.*** *Chronic conditions*

Chronic conditions, such as diabetes, asthma, inflammatory bowel disease, epilepsy, narcolepsy, fibromyalgia, or some sleep disorders.

***Z2.*** *Infections*

***Z3.*** *Allergic episodes*

***Z4.****Mental illness (disorder)*

A mental disorder (also called a psychiatric disorder) can be defined as a mental or behavioural pattern or anomaly that causes either suffering and/or an impaired ability to function in ordinary life, and which is not developmentally or socially normative.

Examples are schizophrenia, depression, psychotic disorders, anxiety disorders, disorders due to drug abuse, etc.

The causes of mental disorders are varied and complex, and in some cases unclear. Some mental disorders may be triggered by traumatic experiences. Applicants for international protection may encounter significant addition stressors that could affect their capacity to cope, such as social isolation, inability to communicate effectively and discrimination.

In mental health, the term mental disorder is used as a way of acknowledging the complex interaction of biological, psychological (which entails thoughts, emotions, and behaviours), and social (socio-economical, socio-environmental and cultural) factors, which all play a significant role in human functioning in the context of mental disorders.

**ANNEX III - List of factors associated with the risk of suicide:**

|  |
| --- |
|  |
| * Current suicidal thoughts: specificity of plan, means, time and place
* History of suicide attempts
* Family/peer history of suicide
* History of violence (including witnessing violence)
* Intensity of current depressive symptoms
* Recent life stressors
* History of mental health and substance dependency problems
* Current living situation and access to means of self-harm
* Recent change in behaviour and mood
* Isolation versus access to company/family/friends

Keep in mind the options of referral to specialist services and/or emergency services.  |