HealthConnection Clinic Complexity Assessment Tool (AMPS)
USER GUIDE

The HealthConnection Clinic Complexity Assessment Tool was developed to help you, the clinician, identify any challenges or risks that can impact a client’s health and well-being. The tool is also known simply as AMPS, the acronym referring to four main areas of complexity that are addressed:

- Attachment
- Medical
- Psychiatric, mental health and addictions
- Social.

AMPS does not have to be completed on the first visit, but the more information obtained the better the understanding of all the health and social issues for the client. This will help the entire team direct their care over time and provide a benchmark for monitoring future progress.

Each item in the tool is scored using a scale of 0 to 3, where 0 indicates “no complexity” and 3 indicates “very complex.” A total score out of 33 is calculated. The tool is to be scored from your perspective and any information obtained directly from the client could be used to inform your assessment. In other words, the complexity score should reflect your own interpretation and not simply the client’s expressed viewpoint. This user guide is to assist you in using the tool more effectively. Below are sample questions you can ask the client, as well as questions you can reflect on when assessing complexity.

A: ATTACHMENT
To determine whether or not the client has an ongoing relationship with a GP or NP to follow up on health issues that arise. Answers to the following questions will help you score this section of the complexity tool.

Consider asking clients:
- Who is your usual doctor? Do you see him/her regularly?
- Do you use walk in clinics or go to ER if you need medical help?
- If you go to a walk in clinic or ER, how often would you go?
- What would be a reason for you going to a clinic or ER? (ie refills, minor reasons)

M: MEDICAL
To determine severity of symptoms and any challenges with the management of medical problem(s).

Reflect on the following:
- Are there any symptoms? If so, are they mild or severe and impairing the client’s activities?
- Is it clear and easy to identify the problem(s)?

There may be no diagnostic challenges, or there may be many issues that are unclear. Symptoms and management of medical problems may also be affected by other issues, bio/psycho/social in nature.
The client may be calm, or in a great deal of distress, preoccupied, tense, confused, which may interfere with the diagnosis.
There may be multiple providers involved (making coordination of care more challenging).
Consider also asking the client:
Who else is involved in your care?
Have doctors ever had difficulties finding a diagnosis with the complaints/medical problems you have/are currently experiencing?

**P: PSYCHIATRIC (MENTAL HEALTH AND ADDICTIONS)**
To determine severity of symptoms, mental stability and cognitive function.

On general assessment:
Ask the client about sleep, appetite, stress, anxiety, medications.

Mental Health:
Reflect on the following:
*Has there been any counselling or support groups involved?*
*Have there been hospitalizations for mental health issues? Have there been any attempts at self harm? Suicide attempts?*
*Does the client show signs of neglect, such as being dirty, unshaven, malodorous, smelling of alcohol, bad teeth, wet clothing, signs of cutting?*
*Ask about how the client manages daily activities: is there any interference in function?*  
*Does the client work, or is he/she unable to hold down a job? How do they relate to others?*

Addictions:
*Ask the client about smoking, drinking, street drugs, prescribed drug use, over-the-counter drugs, supplements, behaviours (sex, gambling).*
*Is the addiction active, are there street drugs involved? Escalating?*
*Has there been police involvement?*
*Does the client see it as a problem?*
*Has the client ever been admitted to hospital for treatment of overdose or detox?*
*Is the client controlling the addiction or is the addiction controlling the client?*

**S: SOCIAL**
To determine the social determinants of health that may be directly impacting on the client’s health and ability to manage day to day issues. The client’s current home and social situation may be influencing health outcomes in a positive or negative way. Basic needs such as shelter, food, clothing and safety can be lacking. There may also be signs evident of self neglect (homeless, carrying all possessions, signs of transience). The client may be untidy, malodorous, have open wounds, etc.

Housing:
*Inquire as to where the client lives: living with friends, couch surfing, staying in the shelter?*  
*(Under a bridge, in the woods, generally on the street?)*  
*Do they feel safe there?*
*Managing independently or relying on others for help?*
*In an abusive relationship, or dangerous location?*
*Do they worry about theft?*
Poverty:
The client may be on a pension, may have no benefits, barely making ends meet, or may be in debt. May not have money left over at the end of the month, relying on food bank, friends, drop in centres, etc.
Ask the client:
*Do you ever have difficulty making ends meet at the end of the month? For example, to pay your bills, cover the cost of food, housing, etc.? Can you afford to pay for your medications?*

Social support:
*Does the client have friends or family that can help if needed?*
*Who would the client ask for help, if needed?*
*Is there risk of financial or physical abuse? Or active abuse?*
Consider asking the client:
*Do you see or hear from friends/relatives at least once a month?*
*Do you feel close enough with friends/relatives that you can talk with them about private matters or ask for help? Who would you ask?*
*Do you feel close enough with friends/relatives that you could call on them for help? Who might you call?*

Readiness for change:
*Is the client cooperative? Wanting help, or resisting? Hostile?*
Consider asking the client:
*What do you see as your greatest problem right now?*
*What are you willing to do to get better?*
*What have you tried in the past?*

Other Considerations
The clinician completing the assessment should note any barriers or challenges they faced in using the tool (e.g., could not complete due to language barrier, cognitive impairment, need more time to build trust, ran out of time; uncertain how to interpret; not enough information to assess, etc.).