

Adult Needs and Strengths Assessment San Bernardino

**An Information Integration Tool
for Adults with Behavioral Health Challenges**

ANSA-SB Manual

INTRODUCTION

The Adult Needs and Strengths Assessment (ANSA) is a multi-purpose tool developed for adult behavioral health services to support decision making, including level of care and service planning, to facilitate quality improvement initiatives, and to allow for the monitoring of outcomes of services. The copyright for the ANSA Information Integration Tool is held by the Praed Foundation. Information on guidelines for use and development can be obtained by contacting the foundation at praedfoundation@yahoo.com.

The County of San Bernardino Department of Behavioral Health developed the ANSA-San Bernardino (ANSA-SB) from various ANSA and CANS (Child and Adolescent Needs and Strengths) manuals: ANSA Version 2.0, Texas ANSA Version 2.1, San Francisco ANSA Adult/Older Adult Assessment Long Form Version 3.0, Indiana ANSA Version 2.1, Alameda County ANSA-T, Child and Adolescent Needs and Strengths-San Bernardino (CANS-SB), and Massachusetts CANS. Each item was reviewed by clinical and administrative staff of the County of San Bernardino Department of Behavioral Health (DBH) to ensure the items are suitable for the population served by the Department. In addition to compiling items from various ANSA and CANS manuals, some items were created by DBH staff to target local needs.

ITEM RATINGS

The ANSA-SB consists of eight core elements comprised of various mandatory items and six modules, some of which are discretionary. Each item is rated on a 4-point scale. **Unless otherwise specified, each item is based on the last 30 days.**

The ratings and action levels for **NEEDS** are as follows:

0	1	2	3
No evidence that a need exists. No need for action.	Mild degree of need exists. Watchful waiting/prevention.	Moderate degree of need exists. Action required.	Severe, profound, dangerous, or disabling level of need exists. Immediate/intensive action required.

The ratings and action levels for **STRENGTHS** are as follows:

0	1	2	3
Significant strength is present. Strength can be used for treatment planning.	Moderate level of strength is present. Strength can be used for treatment planning.	Mild level of strength is present. Strength must be developed.	Strength is not present. Strength must be identified and developed.

A few items have a “N/A” rating available for instances when the item does not apply to the individual.

CORE ELEMENTS OF THE ANSA-SB

I. Life Domain Functioning **Page 5**

1. Family
2. Social Functioning
3. Recreational
4. Intellectual/Developmental
5. Employment Functioning
6. Legal
7. Physical/Medical
8. Sexual Relations
9. Sleep
10. Independent Living Skills
11. Residential Stability
12. Self-Care
13. Psychotropic Medication Adherence
14. Decision-Making/Judgment
15. Involvement in Recovery/Motivation for Treatment
16. Transportation
17. Parenting Roles
18. Intimate Relationships
19. Educational Attainment

II. Strengths **Page 12**

1. Family Environment
2. Social Connectedness
3. Optimism/Hopefulness
4. Educational Environment
5. Talents/Interests
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7. Community Connections
8. Resiliency
9. Resourcefulness
10. Job History

III. Culture **Page 16**

1. Language
2. Cultural Identity
3. Cultural Practices
4. Cultural Stress

IV. Care/Support Strengths and Needs **Page 18**

1. Involvement with Care
2. Knowledge
3. Resources
4. Physical/Behavioral Health
5. Safety
6. Family Stress

V. Behavioral Health Needs **Page 21**

1. Psychosis/Thought Disturbance
2. Impulse Control
3. Depression
4. Anxiety
5. Antisocial Behavior/Conduct*
6. Adjustment to Trauma*
7. Anger Control
8. Eating Disturbances
9. Somatization
10. Substance Use*
11. Cognition
12. Mania

VI. Risk Behaviors **Page 27**

1. Danger to Self*
2. Danger to Others*
3. Self-Injurious Behavior
4. Reckless Behavior
5. Exploitation
6. Sexual Aggression
7. Criminal Behavior*
8. Gambling
9. Command Hallucinations
10. Grave Disability

VII. Physical/Medical **Page 31**

1. Primary Care Physician (PCP) Connected
2. Chronic Health Conditions
3. Non-Psychiatric Medical Hospitalization or Emergency Room (ER) Visit
4. Non-Psychiatric Medical Prescription
5. Health Care Adherence

VIII. Psychiatric Crises & Hospitalizations **Page 33**

1. Number of Psychiatric Crisis Episodes Without Hospitalization
2. Number of Hospitalizations in the Past 6 Months
3. Number of Hospitalizations Lasting Less than 30 Consecutive Days Within the Past Two Years
4. Number of Hospitalizations Lasting More than 30 Consecutive Days Within the Past 2 Years

*Item associated with module.

MODULES OF THE ANSA-SB

Modules are triggered when needs are identified for targeted items.

I. Substance Use Disorder **Page 34**

1. Severity of Use
2. Duration of Use
3. Stage of Recovery
4. Peer Influences
5. Environmental Influences
6. Recovery Support Group Participation

II. Criminal Behavior **Page 36**

1. Seriousness
 2. History
 3. Arrests
 4. Planning
 5. Community Safety
 6. Legal Compliance
 7. Peer Influences
 8. Immediate Family Criminal Behavior Influences
 9. Environmental Influences
- This module is required for all Forensics Programs and discretionary for all other programs.*

DISCRETIONARY MODULES:

These modules may be completed when triggered by relevant items and there seems to be clinical benefit to obtaining and documenting the additional information. A program may also choose to always complete a module when triggered.

III. Danger to Self **Page 39**

1. Ideation
2. Intent
3. Planning
4. Suicide History
5. History of Family/Friend Suicide

IV. Danger to Others **Page 40**

1. Ideation
2. Intent
3. Planning
4. Lethal Aggression History
5. History of Family/Friend Aggression

V. Dangerousness **Page 41**

1. Frustration Management
2. Hostility
3. Paranoid Thinking
4. Secondary Gains from Anger
5. Violent Thinking
6. Awareness of Violence Potential
7. Response to Consequences
8. Commitment to Self Control
9. Treatment Involvement

VI. Trauma **Page 44**

1. Sexual Abuse
2. Physical Abuse
3. Emotional Abuse
4. Neglect
5. Medical Trauma
6. Natural Disaster
7. Witness to Family Violence
8. Witness to Domestic Violence
9. Witness to Community Violence
10. Witness/Victim to Criminal Activity
11. War Affected
12. Terrorism Affected
13. Affect Regulation
14. Intrusions
15. Attachment
16. Traumatic Grief/Separation
17. Reexperiencing
18. Avoidance
19. Numbing
20. Dissociation

I. LIFE DOMAIN FUNCTIONING

FAMILY			
<i>Family ideally should be defined by the individual; however, in the absence of this knowledge consider biological relatives, their significant others, and other individuals with whom the individual still has contact as the definition of "family." Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual is doing well in relationships with family members.	Individual is doing adequately in relationships with family members although some problems may exist. For example, some family members may have some problems in their relationships with individual.	Individual is having moderate problems with parents, siblings and/or other family members. Frequent arguing, difficulties in maintaining any positive relationship may be observed.	Individual is having severe problems with parents, siblings, and/or other family members. This would include problems of domestic violence, constant arguing, etc.

SOCIAL FUNCTIONING			
<i>This item refers to the individual's current status in getting along with others in his/her life.</i>			
0	1	2	3
Individual has good relations with others.	Individual is having some minor problems with his/her social functioning.	Individual is having some moderate problems with his/her social functioning. Problems with relationships currently interfere with functioning in other life domains.	Individual is experiencing severe disruptions in his/her social functioning. Individual is socially disabled. Either he/she has no relations with others or all relationships are currently conflictual.

RECREATIONAL			
<i>This item is intended to reflect the individual's access to and use of leisure time activities.</i>			
0	1	2	3
Individual has and enjoys positive recreational activities on an ongoing basis.	Individual is adequately engaged in and enjoys recreational activities, although some problems may exist.	Individual is having moderate problems with recreational activities. Individual may experience some problems with effective use of leisure time.	Individual has no access to or interest in recreational activities. Individual has significant difficulties making positive use of leisure time.

INTELLECTUAL/DEVELOPMENTAL			
<i>This item is intended to capture a functioning problem such as low IQ, intellectual disability, or other developmental disability.</i>			
0	1	2	3
No evidence of intellectual or developmental impairment.	Mild developmental delay. May be characterized by low IQ score (i.e., 71 to 85), if available.	Mild intellectual disability. If available, may be characterized by IQ score of between 50 and 70.	Moderate to severe intellectual disability or severe or Pervasive Developmental Disorder. IQ score (if available) would be less than 50).

EMPLOYMENT FUNCTIONING				
<i>This item rates the performance of the individual in work settings. This performance can include issues of behavior, attendance or productivity.</i>				
N/A	0	1	2	3
No evidence of a need to create employment at this time (e.g., retired).	No evidence of problems at work if individual is gainfully employed.	A mild degree of problems with work functioning. Individual may have some problems in work environment involving attendance, productivity or relations with others. OR Individual is not currently working though is motivated and is actively seeking work.	A moderate degree of work problems including disruptive behavior and/or difficulties with performing required work. Supervisors likely have warned individual about problems with his/her work performance. OR Though not working, individual seems interested in doing so, though may have some anxiety about it. He or she may need support and/or training.	A severe degree of school or work problems including aggressive behavior toward peers or superiors or severe attendance problems. Individual may be recently fired or at very high risk of firing (e.g. on notice). OR Individual is unmotivated or uninterested in working even though he or she would be capable of employment with support and/or training.

LEGAL			
<i>This item involves only the individual's involvement with the legal system.</i>			
0	1	2	3
Individual has no known legal difficulties.	Individual has a history of legal problems but currently is not involved with the legal system.	Individual has some legal problems and is currently involved in the legal system.	Individual has serious current or pending legal difficulties that place him/her at risk for incarceration.

PHYSICAL/MEDICAL			
<i>This item includes both health problems and chronic/acute physical conditions.</i>			
0	1	2	3
No evidence of physical or medical problems.	Mild or well-managed physical or medical problems. This might include well-managed chronic conditions like diabetes or asthma.	Chronic physical or moderate medical problems.	Severe or life threatening physical or medical conditions.

SEXUAL RELATIONS			
<i>This item describes inappropriate, problematic, and dysfunctional sexual behavior. This includes risky behaviors, sexual dissatisfaction, and libido problems, if leading to relationship concerns.</i>			
0	1	2	3
No evidence of any problems with sexual relations.	Mild to moderate problems with sexual relations are indicated. This may include concerns about the reactions of others.	Significant problems with sexual relations are indicated.	Profound problems with sexual relations are indicated. This rating would include frequent, risky sexual behavior or sexual aggression.

SLEEP			
<i>This item rates the individual's sleeping pattern.</i>			
0	1	2	3
Individual gets a full night's sleep each night.	Individual has some problems sleeping. Generally gets a full night's sleep but at least once a week problems arise. This may include having difficulties falling asleep or awakening early or in the middle of the night occasionally.	Individual is having problems with sleep. Sleep is often disrupted and individual seldom obtains a full night of sleep, or may sleep too much.	Individual is generally sleep-deprived. Sleeping is difficult for the individual and they are not able to get a full night's sleep or sleep too much.

INDEPENDENT LIVING SKILLS			
<i>This item focuses on the presence or absence of short or long-term impairments in independent living abilities.</i>			
0	1	2	3
This rating indicates an individual who is fully capable of independent living. No evidence of any deficits that could impede maintaining own home.	This rating indicates an individual with mild impairment of independent living skills. Some problems exist with maintaining reasonable cleanliness, diet, and so forth. Problems with money management may occur at this level. These problems are generally able to be addressed with training or supervision.	This rating indicates an individual with moderate impairment of independent living skills. Notable problems with completing tasks necessary for independent living are apparent. Difficulty with cooking, cleaning, and self-management when unsupervised would be common at this level. Problems are generally addressable with in-home services.	This rating indicates an individual with profound impairment of independent living skills. This individual would be expected to be unable to live independently given his/her current status. Problems require a structured living environment.

RESIDENTIAL STABILITY			
<i>This item is used to rate the individual's or caregiver's current and likely future housing circumstances. If the individual lives independently, rate his or her history of residential stability.</i>			
0	1	2	3
No evidence of residential instability. The individual has stable housing for the foreseeable future.	Individual has relatively stable housing, but has either moved in the past three months or there are indications that housing problems could arise at some point within the next three months. This rating also reflects a mild degree of residential instability if living independently, characterized by the potential loss of housing due to the individual's difficulty with self-care, disruptive behavior, financial situation, or other psychosocial stressor. A recent move for any reason that the individual found stressful would be rated here.	Individual has moved multiple times in the past year. This rating also includes a moderate degree of residential instability if the individual is living independently, characterized by recent and temporary lack of permanent housing.	Individual has experienced periods of homelessness in the past six months. This rating also includes a significant degree of residential instability if living independently, characterized by homelessness for at least 30 days as defined by living on the streets, in shelters, or other transitional housing.

SELF-CARE

This item focuses on current status of self-care functioning. Suicidal or homicidal behavior would not be rated here, but eating disorders could be included.

0	1	2	3
No evidence of self-care impairments. This is characterized by the ability to independently complete all activities of daily living such as bathing, grooming, dressing, cooking, and managing personal finances.	A mild degree of impairment with self-care is indicated. This is characterized by self-care difficulties that impair the individual's level of functioning, but do not represent a significant short or long-term threat to the person's well-being.	A moderate degree of self-care impairment is evidenced. This is characterized by an extreme disruption in one self-care skill or moderate disruption in more than one self-care skill. Self-care does not represent an immediate threat to the person's safety, but has the potential for creating significant long-term problems if not addressed.	A significant degree of self-care impairment is evidenced by extreme disruptions in multiple self-care skills. Current self-care abilities are sufficiently impaired that he/she represents an immediate threat to himself/herself and requires immediate crisis intervention.

PSYCHOTROPIC MEDICATION ADHERENCE

This item focuses on the level of the individual's willingness and participation in taking prescribed medications. Please rate the highest level from the past 30 days.

0	1	2	3
This rating indicates an individual who takes medications as prescribed and without reminders, or an individual who is not currently on any medication.	This rating indicates an individual who will take prescribed medications routinely, but who sometimes needs reminders to maintain adherence. Also, a history of inconsistent use or abuse of medications but no current problems would be rated here.	This rating indicates an individual who is somewhat non-adherent. This individual may be unconvinced to the value of taking psychotropic medications or this individual may tend to overuse his or her medications. He/she might adhere with prescription plans for periods of time (1-2 weeks) but generally does not sustain taking medication in prescribed dose or protocol, including timely refills.	This rating indicates an individual who has refused to take prescribed psychotropic medications during the past 30 day period or an individual who has abused his or her medications to a significant degree (i.e., overdosing or over using medications to a dangerous degree).

DECISION-MAKING/JUDGMENT

This item describes the individual's judgment. This item should reflect the degree to which an individual can concentrate on issues, think through decisions, anticipate consequences, and follow-through on decisions.

0	1	2	3
No evidence of any problems with decision-making.	Mild to moderate problems with decision-making are indicated. Individual may have some challenges with thinking through problems or concentrating.	Significant problems with decision-making. Individual may be struggling with thinking through problems, anticipating consequences or concentrating.	Profound problems with decision-making are evident. Individual is currently unable to make decisions.

INVOLVEMENT IN RECOVERY/MOTIVATION FOR TREATMENT

This item focuses on the level of the individual's active participation in treatment and self-management of behavioral health needs.

0	1	2	3
This rating indicates an individual who is fully involved in his/her recovery. He or she has identified treatment choices and fully participates.	This rating indicates an individual who is generally involved in his/her recovery. He or she participates in treatment but does not actively exercise choice.	This rating indicates an individual who is marginally involved in his/her recovery. He or she is minimally involved in treatment.	This rating indicates an individual who is uninvolved in his/her recovery. He or she is currently not making effort to address needs.

TRANSPORTATION

This item is used to rate unmet transportation needs, e.g., the level of transportation required to ensure that the individual could effectively participate in his/her own treatment.

0	1	2	3
The individual has no unmet transportation needs.	The individual has occasional transportation needs (e.g., appointments). These needs would be no more than weekly and/or do not seem to be a barrier to treatment (e.g., they do not result in missed or late appointments).	The individual's frequent transportation needs (e.g., daily to work or therapy) or ability to navigate the transportation system occasionally result in missed or late appointments.	The individual's frequent (e.g., daily to work or therapy) transportation needs or ability to navigate the transportation system result in regular missed or late appointments.

PARENTING ROLES

This item is intended to rate the individual in any caregiver roles. For example, an individual with a son or daughter or an individual responsible for an elderly parent or grandparent would be rated here. Include pregnancy as a parenting role. Please rate the highest level from the past 30 days.

0	1	2	3
The individual has no role as a parent/caregiver.	The individual has responsibilities as a parent/caregiver but is currently able to manage these responsibilities.	The individual has responsibilities as a parent/caregiver and either the individual is struggling with these responsibilities, or responsibilities are currently interfering with the individual's functioning in other life domains.	The individual has responsibilities as a parent/caregiver and the individual is currently unable to meet these responsibilities, or these responsibilities are making it impossible for the individual to function in other life domains.

INTIMATE RELATIONSHIPS

This item is used to rate the individual's current status in terms of romantic/intimate relationships. Please rate the highest level from the past 30 days.

0	1	2	3
The individual has a strong, positive partner relationship with an age-appropriate peer. This peer functions as a member of the family.	The individual has a generally positive partner relationship with an age-appropriate peer.	The individual is currently not involved in any partner relationship, which is a concern for the individual, or in a relationship where dysfunction, including power/control concerns, may exist.	Significant difficulties exist with a partner relationship. The individual is currently involved in a negative, unhealthy relationship.

EDUCATIONAL ATTAINMENT

This item focuses the degree to which the individual has completed, or progressed toward, their planned education. Please rate the highest level from the past 30 days.

0	1	2	3
Individual has achieved all educational goals. Or, individual has no educational goals; however, this has no impact on lifetime vocational functioning.	Individual has set educational goals and is currently making progress towards achieving them.	Individual has set educational goals but is currently not making progress towards achieving them.	Individual has no educational goals and lack of educational attainment is interfering with individual's lifetime vocational functioning.

II. STRENGTHS

FAMILY ENVIRONMENT

All family with whom the individual remains in contact, along with other individuals in relationships with these family members.

0	1	2	3
Significant family strengths. This rating indicates a family with much love and mutual respect for each other. Family members are central in each other's lives.	Moderate level of family strengths. This rating indicates a loving family with generally good communication and ability to enjoy each other's company. There may be some problems between family members.	Mild level of family strengths. Family is able to communicate and participate in each other's lives; however, family members may not be able to provide significant emotional or concrete support for each other.	This rating indicates an individual with no known family strengths.

SOCIAL CONNECTEDNESS

This item is used to refer to the interpersonal skills of the individual as they relate to others.

0	1	2	3
Significant interpersonal strengths. The individual is seen as well-liked by others and has significant ability to form and maintain positive relationships. The individual has multiple close friends and is friendly with others.	Moderate level of interpersonal strengths. The individual has formed positive interpersonal relationships with peers and other non-caregivers. The individual may currently have no friends, but has a history of making and maintaining friendships with others.	Mild level of interpersonal strengths. The individual has some social skills that facilitate positive relationships with peers but may not have any current healthy relationships, but has a history of making and maintaining healthy friendships with others.	This rating indicates an individual with no known interpersonal strengths. The individual currently does not have any friends nor has he/she had any friends in the past.

OPTIMISM/HOPEFULNESS

This item should be based on the individual's sense of him/herself in his/her own future. This is intended to rate the individual's positive future orientation.

0	1	2	3
Individual has a strong and stable optimistic outlook on his/her life. Individual is future oriented.	Individual is generally optimistic. Individual is likely able to articulate some positive future vision.	Individual has difficulties maintaining a positive view of him/herself and his/her life. Individual may vary from overly optimistic to overly pessimistic.	Individual has difficulties seeing any positives about him/herself or his/her life.

EDUCATIONAL ENVIRONMENT				
<i>This item is used to refer to the strengths of the school/vocational training environment and may or may not reflect any specific educational/work skills possessed by the individual.</i>				
N/A	0	1	2	3
Participation in an educational or vocational training program is not necessary for the individual to achieve his/her career aspirations.	This rating indicates an individual who is in school or a training program and is involved with an educational plan or work environment that appears to exceed expectations. The school or training program works exceptionally well with the individual and family to create an effective learning environment.	This rating indicates an individual who is in school or a training program; however, there have been problems such as tardiness, absenteeism, reductions in productivity, or conflict with supervisors or teachers.	This rating indicates an individual who is in school but has a plan that does not appear to be effective.	This rating indicates an individual who has dropped out of school. Completing school or a vocational program is required to meet individual's career aspirations.

TALENTS/INTERESTS			
<i>This item should be based broadly on any talent, creative or artistic skills an individual may have including art, theater, music, athletics, and so forth.</i>			
0	1	2	3
This rating indicates an individual with significant creative/artistic strengths. An individual who receives a significant amount of personal benefit from activities surrounding a talent would be rated here.	This rating indicates an individual with a notable talent. For example, an individual who is involved in athletics or plays a musical instrument would be rated here.	This rating indicates an individual who has expressed interest in developing a specific talent or talents even if they have not yet developed that talent.	This rating indicates an individual with no known talents, interests or hobbies.

SPIRITUAL/RELIGIOUS			
<i>This item refers to the individual's experience of receiving comfort and support from spiritual or religious involvement.</i>			
0	1	2	3
Individual is involved in and receives comfort and support from spiritual and/or religious beliefs, practices and/or community.	Individual is involved in and receives some comfort and/or support from spiritual and/or religious beliefs, practices and/or community.	Individual has expressed some interest in spiritual or religious belief and practices.	Individual has expressed concerns about spiritual or religious beliefs, including their impact on treatment and/or relationships. Individuals who do not identify spirituality as a strength and do not have a desire for it would be included here. Note: A 3 does not necessarily indicate dysfunction.

COMMUNITY CONNECTIONS			
<i>This item reflects the individual's connection to people, places or institutions in his or her community.</i>			
0	1	2	3
Individual is well-integrated into his/her community. He/she has positive ties to the community.	Individual is somewhat involved with his/her community.	Individual has an identified community but has only limited, or unhealthy, ties to that community.	There is no evidence of an identified community of which he/she is a member at this time.

RESILIENCY			
<i>This item should be based on the individual's ability to identify and use internal strengths in managing his/her life.</i>			
0	1	2	3
This rating indicates an individual who is able to both identify and use strengths to better his/herself and successfully manage difficult challenges.	This rating indicates an individual who is able to identify most of his/her strengths and is able to partially utilize them.	This rating indicates an individual who is able to identify strengths but is not able to utilize them effectively.	This rating indicates an individual who is not yet able to identify personal strengths.

RESOURCEFULNESS

This item should be based on the individual's ability to identify and use external resources in managing his/her life.

0	1	2	3
Individual is quite skilled at finding the necessary resources required to aid him/her in his/her managing challenges.	Individual has some skills at finding necessary resources required to aid him/her in a healthy lifestyle, but sometimes requires assistance at identifying or accessing these resources.	Individual has limited skills at finding necessary resources required to aid in achieving a healthy lifestyle and requires temporary assistance both with identifying and accessing these resources.	Individual has no skills at finding the necessary resources to aid in achieving a healthy lifestyle and requires ongoing assistance with both identifying and accessing these resources.

JOB HISTORY

This item describes the individual's experience with paid employment.

0	1	2	3
Individual has significant job history with positive outcomes. Individual is currently employed as a valued employee.	Individual has held jobs for a reasonable period of time and has former employers willing to recommend him/her for future employment.	Individual has some work history; however, it is marked by periodic job loss.	Individual has no positive work history.

III. CULTURE

LANGUAGE			
<i>This item includes both spoken language and sign language.</i>			
0	1	2	3
Individual speaks English well.	Individual speaks some English but potential communication problems exist due to limits on vocabulary or understanding of the nuances of the language.	Individual demonstrates English language barriers, but has access to interpretation resources.	Individual demonstrates English language barriers, but has no access to interpretation resources.

CULTURAL IDENTITY			
<i>Cultural identity refers to the individual's view of his/herself as belonging to a specific cultural group. This cultural group may be defined by a number of factors that include, but are not limited to, race, religion, ethnicity, geography, sexual orientation, gender, age, and lifestyle (e.g., military).</i>			
0	1	2	3
Individual has clear and consistent cultural identity and is connected to others who share his/her cultural identity.	Individual is experiencing some confusion or concern regarding cultural identity.	Individual has significant struggles with his/her own cultural identity. Individual may have cultural identity but is not connected with others who share this culture.	Individual has no cultural identity or is experiencing significant problems due to conflict regarding his/her cultural identity.

CULTURAL PRACTICES			
<i>Cultural practices are activities and traditions that include the celebration of culturally specific holidays. Observances also may include daily activities that are culturally specific (e.g., praying toward Mecca at specific times, eating a specific diet, cultural attire). This item may assess barriers to being able to express their cultural identity, such as lack of accommodations in daily living environments.</i>			
0	1	2	3
Individual and significant others are consistently able to practice rituals consistent with their cultural identity.	Individual and significant others are generally able to practice rituals consistent with their cultural identity; however, they sometimes experience some obstacles to the performance of these rituals.	Individual and significant others experience significant barriers and are sometimes prevented from practicing rituals consistent with their cultural identity.	Individual and significant others are unable to practice rituals consistent with their cultural identity.

CULTURAL STRESS

Culture stress refers to experiences and feelings of discomfort and/or distress arising from friction (real or perceived) between an individual's own cultural identity and the predominant culture in which he/she lives. This can include individual or family challenges around sexual orientation and gender identity and/or challenges related to individual or family acculturation, integrating cultural differences, including immigration, release from restrictive environments, returning from military service, gang affiliation, etc.

0	1	2	3
No evidence of stress between individual's cultural identity and current daily living environments.	Some mild or occasional stress exists as a result of friction between the individual's cultural identity and his/her current daily living environments.	Individual is experiencing cultural stress that is causing problems of functioning in at least one life domain.	Individual is experiencing a high level of cultural stress that is making functioning in any life domain difficult under the present circumstances.

IV. CARE/SUPPORT STRENGTHS AND NEEDS

Care/supportive person refers to a parent(s) or other adult(s) with primary care-taking responsibilities for the individual. This core element would not be applicable to an individual living in an institutionalized setting.

INVOLVEMENT WITH CARE

This item is used to rate the level of involvement care/supportive person(s) has in the planning and provision of mental health related services.

0	1	2	3
<p>This rating indicates someone who is actively involved in the planning and/or implementation of services and is able to be an effective advocate on behalf of the individual.</p>	<p>This rating indicates someone who is consistently involved in the planning and/or implementation of services for the individual, but is not an active advocate on their behalf.</p>	<p>This rating indicates someone who is minimally involved in the care of the individual. Care/supportive person(s) may visit the individual when living in an out-of-home placement, but does not become involved in service planning and implementation.</p>	<p>This rating indicates someone who is uninvolved with the care of the individual. The care/supportive person(s) may want the individual out of home or fails to visit the individual when in residential placement. This includes lack of a supportive person in the individual's life.</p>

KNOWLEDGE

This item is used to rate the care/supportive person's knowledge of the specific strengths of the individual and any problems experienced by the individual and their ability to understand the rationale for the treatment or management of these problems.

0	1	2	3
<p>This rating indicates someone who is fully knowledgeable about the individual's psychological strengths and weaknesses, talents and limitations.</p>	<p>This rating indicates someone who, while being generally knowledgeable about the individual, has some mild deficits in knowledge or understanding of either the person's psychological condition or his/her talents, skills and assets.</p>	<p>This rating indicates someone who does not know or understand the individual well, and that significant deficits exist in the care/supportive person's ability to relate to the individual's problems and strengths.</p>	<p>This rating indicates someone who has little or no understanding of the individual's current condition. The care/supportive person(s) is unable to cope with the individual given his/her status at the time, not because of the needs of the individual but because the care/supportive person(s) does not understand or accept the situation.</p>

RESOURCES			
<i>This item is used to refer to the financial and social assets (extended family) and resources that the care/supportive person(s) can bring to bear in addressing the multiple needs of the individual and family.</i>			
0	1	2	3
Care/supportive person(s) has sufficient resources so that there are few limitations on what can be provided for the individual.	Care/supportive person(s) has the necessary resources to help address the individual's major and basic needs, but those resources might be stretched.	Care/supportive person(s) has limited resources (e.g., a relative living in the same town who is sometimes available to assist with the individual).	Care/supportive person(s) has severely limited resources that are available to assist in the care and treatment of the individual.

PHYSICAL/BEHAVIORAL HEALTH			
<i>Physical and Behavioral Health includes medical, physical, mental health, and substance use challenges faced by the care/supportive person(s).</i>			
0	1	2	3
The care/supportive person(s) has no physical or behavioral health limitations that impact assistance or attendant care.	The care/supportive person(s) has some physical or behavioral health limitations that interfere with provision of assistance or attendant care.	The care/supportive person(s) has significant physical or behavioral health limitations that prevent them from being able to provide some needed assistance or that make attendant care difficult.	The care/supportive person(s) is unable to provide any needed assistance or attendant care.

SAFETY			
<i>This item is used to refer to the safety of the assessed individual. It does not refer to the safety of other family or household members. The presence of an individual (family or stranger) that presents a safety risk to the assessed individual should be rated. This item does not refer to the safety of the physical environment in which the individual lives (e.g., a broken or loose staircase).</i>			
0	1	2	3
This rating indicates that the current placement presents no risk to the safety of the individual in his/her present condition.	This rating indicates that the current placement presents some mild risk of neglect or exposure to drug use, but that no immediate risk is present.	This rating indicates that there is risk to the individual including such things as the risk of abuse or exposure to individuals who could harm the individual.	This rating indicates that the current placement presents a significant risk to the well-being of the individual. Risk of harm is imminent and immediate.

FAMILY STRESS			
<i>This item reflects the degree of stress or burden experienced by the family as a result of the individual's needs as described elsewhere in the assessment.</i>			
0	1	2	3
Care/supportive person is able to manage the stress of the individual's needs.	Care/supportive person has some problems managing the stress of the individual's needs.	Care/supportive person has notable problems managing the stress of the individual's needs. This stress interferes with their capacity to give care.	Care/supportive person is unable to manage the stress associated with the individual's needs. This stress prevents care/supportive person from providing care.

V. BEHAVIORAL HEALTH NEEDS

PSYCHOSIS/THOUGHT DISTURBANCE

This item is used to rate symptoms of psychosis such as hallucinations, delusions, very bizarre behavior, and very strange ways of thinking.

0	1	2	3
This rating indicates an individual with no evidence of thought disturbances. Both thought processes and content are within normal range.	This rating indicates an individual with evidence of mild disruption in thought processes or content. The individual may be somewhat tangential in speech or evidence somewhat illogical thinking. This also includes persons with a history of hallucinations but none currently.	This rating indicates an individual with evidence of moderate disturbance in thought process or content. The individual may be somewhat delusional or have brief or intermittent hallucinations or intermittent negative symptoms. The individual's speech may be at times quite tangential or illogical.	This rating indicates an individual with severe psychotic disorder. The individual frequently is experiencing symptoms of psychosis and frequently has no reality assessment. There is evidence of ongoing delusions or hallucinations or both or pronounced negative symptoms. Command hallucinations would be coded here.

IMPULSE CONTROL

This item measures symptoms of impulse control that might occur in a number of presenting problems, including Intermittent Explosive Disorder or manic episodes.

0	1	2	3
This rating is used to indicate an individual with no evidence of impulse problems. Individual is able to regulate and self-manage behavior and affect.	This rating is used to indicate an individual with evidence of mild problems with impulse control problems. An individual may have some difficulties with sitting still or paying attention or may occasionally engage in impulsive behavior.	This rating is used to indicate an individual with moderate impulse control problems. An individual who meets diagnostic criteria for impulse control disorder would be rated here. Persons who use poor judgment or put themselves in jeopardy would be rated here (e.g., picking fights).	This rating is used to indicate an individual with severe impulse control. Frequent impulsive behavior is observed or noted that carries considerable safety risk (e.g., running into the street and dangerous driving).

DEPRESSION			
<i>Symptoms included in this item are depressed mood, social withdrawal, anxious, sleep disturbances, weight/eating disturbances, and loss of motivation.</i>			
0	1	2	3
This rating is given to an individual with no evidence of depression.	This rating is given to an individual with mild depression. Brief duration of depression, irritability, or impairment of peer, family, vocational or academic function that does not lead to extreme avoidance behavior.	This rating is given to an individual with a moderate level of depression.	This rating is given to an individual with a severe level of depression. This would include a person who stays at home or in bed all day due to depression or whose emotional symptoms prevent any participation in school/work, social settings, or family life. More severe forms of depressive diagnoses would be coded here. This rating is used to indicate a person who is disabled in multiple life domains by his/her depression.

ANXIETY			
<i>This item is used to rate worrying and fearfulness.</i>			
0	1	2	3
This rating is given to an individual with no evidence of problems with anxiety.	This rating is used to rate either a mild phobia or anxiety problem or a level of symptoms that is below the threshold for the other listed disorders.	This could include moderate symptoms, frequent anxiety attacks, obsessive rituals, flashbacks, hyper-vigilance, or school/work avoidance.	This rating is given to an individual with a severe level of anxiety. This would include a person who stays at home or in bed all day due to anxiety or whose anxiety-related symptoms prevent any participation in school/work, social settings, or family life. More severe forms of anxiety disorder diagnoses would be coded here. This rating is used to indicate a person who is disabled in multiple life domains by his/her anxiety.

ANTISOCIAL BEHAVIOR/CONDUCT			
<i>These symptoms include antisocial or conduct problems like aggression to people and animals, reckless disregard for the safety of self or others, destruction of property, deceitfulness, theft, serious violations of rules, and lack of remorse.</i>			
0	1	2	3
This rating indicates an individual with no evidence of antisocial or conduct problems.	This rating indicates an individual with a mild level of antisocial or conduct problems. Some difficulties in school/work and home behavior. Problems are recognizable but not notably deviant. This might include occasional lying or petty theft.	This rating indicates an individual with a moderate level of antisocial or conduct problems. This could include episodes of planned aggression or other antisocial behavior.	This rating indicates an individual with severe antisocial or conduct problems. This could include frequent episodes of unprovoked, planned aggression or other antisocial behavior.
DISCRETIONARY: COMPLETE DANGEROUSNESS MODULE (p #41)			

ADJUSTMENT TO TRAUMA			
<i>This item covers the reactions of individuals to a variety of traumatic experiences. This covers both adjustment disorders and post-traumatic stress disorder.</i>			
0	1	2	3
The individual has not experienced any trauma or has adjusted well to significant traumatic experiences.	The individual has some mild adjustment problems and exhibits some signs of distress.	The individual has marked adjustment problems and is symptomatic in response to a traumatic event (e.g., anger, depression, and anxiety).	The individual has significant post-traumatic stress or acute stress difficulties. Symptoms may include intrusive thoughts, hyper-vigilance, constant anxiety, dissociation, and other common symptoms of post-traumatic stress disorder or acute stress disorder.
DISCRETIONARY: COMPLETE TRAUMA MODULE (p #44)			

ANGER CONTROL			
<i>This item captures the individual's ability to identify and manage their anger when frustrated.</i>			
0	1	2	3
This rating indicates an individual with no evidence of any significant anger control problems.	This rating indicates an individual with some problems with controlling anger. Individual may sometimes become verbally aggressive when frustrated. Peers and family members are aware of and may attempt to avoid stimulating angry outbursts.	This rating indicates an individual with moderate anger control problems. Individual's temper has gotten him/her in significant trouble with peers, family and/or work. This rating may be associated with some physical violence. Others are likely quite aware of anger potential and may be intimidated by the individual.	This rating indicates an individual with severe anger control problems. Individual's temper is likely associated with frequent fighting that is often physical. Others likely fear him/her.

EATING DISTURBANCES			
<i>These symptoms include problems with eating including disturbances in body image, refusal to maintain normal body weight, and recurrent episodes of binge eating. These ratings are consistent with Eating Disorders.</i>			
0	1	2	3
This rating is for an individual with no evidence of eating disturbances.	This rating is for an individual with a mild level of eating disturbance. This could include some preoccupation with weight, calorie intake, or body size or type when individual is of normal weight or below weight. This could also include some binge eating patterns.	This rating is for an individual with a moderate level of eating disturbance.	This rating is for an individual with a more severe form of eating disturbance. This could include significantly low weight where hospitalization should be considered or excessive binge and/or purge behaviors (at least once per day).

SOMATIZATION

These symptoms include the presence of recurrent physical complaints without apparent physical cause, medical problems exacerbated by psychogenic causes, and associated with psychosocial distress and medical help-seeking. Please rate the highest level from the past 30 days.

0	1	2	3
This rating is for an individual with no evidence of somatic symptoms.	This rating indicates an individual with a mild level of somatic problems. This could include occasional headaches, stomach problems (nausea, vomiting), joint, limb or chest pain without medical cause.	This rating indicates an individual with a moderate level of somatic problems. This could include more persistent physical symptoms without a medical cause or the presence of several different physical symptoms (e.g., stomach problems, headaches, backaches).	This rating indicates an individual with severe somatic symptoms causing significant disturbance in school, work, or social functioning. This could include significant and varied symptomatic disturbance without medical cause and/or medical problems exacerbated by psychogenic causes.

SUBSTANCE USE

This item includes use of alcohol and other drugs, the misuse of prescription medications, and the inhalation of any substance.

0	1	2	3
This rating is for an individual who has no notable substance use difficulties at the present time. If the individual is in recovery for greater than 1 year he/she should be coded here.	This rating is for an individual with mild substance use problems that might occasionally present problems of living for the individual (i.e., intoxication, loss of money, and reduced work performance). This rating would be used for someone early in recovery (less than 1 year) who is currently not using for at least 30 days. This rating is also used to reflect a history of substance use problems without evidence of current problems related to use.	This rating is for an individual with a moderate substance use problem that requires treatment. A substance use problem that consistently interferes with the ability to function optimally, but does not completely preclude functioning in an unstructured setting.	This rating is for an individual with a severe substance use problem that presents significant complication to the management (e.g., need for detoxification) of the individual.

REQUIRED: COMPLETE SUBSTANCE USE DISORDER MODULE (p #34)

COGNITION			
<i>This item is used to rate cognitive functioning such as forgetfulness, confusion, and lack of engagement in life activities. Dementia and brain injury could be rated here.</i>			
0	1	2	3
This rating indicates an individual with no evidence of problems with cognitive functioning.	This rating describes an individual with some concerns about cognitive functioning but no clear evidence that cognitive functioning is currently impacting his/her life. Early stages of dementia might be rated here. Old age forgetting could be rated here.	This rating describes an individual whose cognitive functioning is interfering with his/her ability to fully engage in life activities. Dementias might be rated here before they cause problems and become dangerous. Traumatic Brain Injury could be rated here.	This rating describes an individual whose cognitive functioning results in situations or behavior either dangerous or disabling.

MANIA			
<i>Symptoms included in this item are mood disturbance (including elevated/expansive, but also depressive at times), increase in energy, decrease in sleep, pressured speech, racing thoughts, and grandiosity that are characteristic of mania.</i>			
0	1	2	3
This rating is given to an individual with no evidence of mania.	This rating is given to an individual with mild mania. Brief duration of mania, irritability, or impairment of peer, family, vocational or academic function that does not lead to gross manic behavior.	This rating is given to an individual with a moderate level of mania. This level is used to rate individuals who meet the criteria for an affective disorder.	This rating is given to an individual with a severe level of mania. For example, the individual may be wildly over-spending, rarely sleeping, or pursuing a special “mission” that only he or she can accomplish. Functioning in multiple domains, such as school/work, social settings and family are severely compromised. The manic episode rated here could include psychotic symptoms.

VI. RISK BEHAVIORS

DANGER TO SELF			
<i>This item specifically assesses for risk of suicide.</i>			
0	1	2	3
No evidence or history of suicidal behaviors.	History, but no intent, ideation, or feasible plan within the last 30 days.	This individual has expressed suicidal ideation recently (last 30 days, though not today), or has engaged in suicidal behavior in the past 30 days (including today) but does not currently have a plan to complete the suicide attempt. This includes individuals with chronic suicidal ideation.	This individual currently has suicidal ideation and a feasible plan to commit suicide, with or without the specific means to carry the act out.
DISCRETIONARY: COMPLETE <u>DANGER TO SELF</u> MODULE (p #39)			

DANGER TO OTHERS			
<i>This item specifically assesses for risk of harming another.</i>			
0	1	2	3
No evidence or history of aggressive behaviors or significant verbal aggression towards others (includes people and animals).	A history of aggressive behavior or verbal aggression towards others but no aggression during the past 30 days. A history of fire setting (not in the past year) would be rated here.	Occasional or moderate level of aggression or aggressive ideation towards people or animals or fire setting that poses some risk to others during the past 30 days or more recent verbal aggression. This individual has expressed ideation about harming another recently (last 30 days). Individual may or may not have a specific plan, but the behavior being contemplated is feasible.	This individual displays a significant level of aggression or immediate aggressive ideation and articulates a plan to enact the aggressive behavior. Frequent or dangerous (significant harm) level of aggression to others. Individual may or may not currently have the means to carry out an attack. Intentional fire setting that places others at significant risk of harm would be rated here. The individual is an immediate risk to others.
DISCRETIONARY: COMPLETE <u>DANGER TO OTHERS</u> MODULE (p #40)			

SELF-INJURIOUS BEHAVIOR

This item includes repeated physically harmful behavior(s) that generally serves a self-soothing functioning with the individual.

0	1	2	3
No evidence of any forms of intentional self-injury (e.g. cutting, burning, face slapping, head banging).	The individual has a history of intentional self-injury but none evident in the past 30 days.	The individual has engaged in intentional self-injury that does not require medical attention.	The individual has engaged in intentional self-injury that requires medical attention.

RECKLESS BEHAVIOR

This item includes reckless and dangerous behaviors that while not intended to harm self or others, place the individual or others at some jeopardy. Suicidal or self-injurious behavior is NOT rated here. Examples of reckless behavior can include intoxicated driving, unsafe sex, and sharing needles.

0	1	2	3
No evidence of behaviors that place the individual at risk of physical harm.	History of behavior that places individual at risk of physical harm. This includes reckless and risk-taking behavior that may endanger the individual.	Engaged in behavior that places him/her in danger of physical harm. This includes reckless behavior or intentional risk-taking behavior.	Engaged in behavior that places him/her at immediate risk of death. This includes reckless behavior or intentional risk-taking behavior.

EXPLOITATION

This item is used to examine a history and level of current risk for exploitation.

0	1	2	3
This rating indicates an individual with no evidence of recent exploitation and no significant history of exploitation within the past year. The individual may have been robbed or burglarized on one or more occasions in the past, but no pattern of exploitation exists. Individual is not presently at risk for re-exploitation.	This rating indicates an individual with a history of exploitation but who has not been exploited or victimized to any significant degree in the past year. Individual is not presently at risk for re-exploitation.	This rating indicates an individual who has been recently exploited (within the past year) but is not in acute risk of re-exploitation. This might include physical or sexual abuse, significant psychological abuse by family or friend, extortion or violent crime.	This rating indicates an individual who has been recently exploited and is in acute risk of re-exploitation. Examples include working as a prostitute and living in an abusive relationship.

SEXUAL AGGRESSION			
<i>This includes all sexual offenses that could result in charges being made against the individual. Sexual aggression includes the use or threat of physical force or taking advantage of a power differential to engage in non-consenting sexual activity.</i>			
0	1	2	3
No evidence of problems with sexual aggression.	History of sexual aggression but no known sexually aggressive behavior in the past year.	Sexual aggression within the past year, but not at immediate risk of re-offending.	Sexual aggression within the past year with acute risk of re-offending due to attitude, behavior, or circumstances.

CRIMINAL BEHAVIOR			
<i>This item includes both criminal behavior and status offenses that may result from the individual failing to follow required behavioral standards. This category does not include drug usage, but it does include drug sales and other drug related activities. Sexual offenses should be included as criminal behavior. Timeframes should exclude restrictive environments.</i>			
0	1	2	3
No evidence or history of criminal behavior.	A history of criminal behavior but none in the past year.	A moderate level of criminal activity. This rating indicates an individual who has been engaged in criminal activity during the past year, but the criminal activity does not represent a significant physical risk to others in the community. Examples would include vandalism and shoplifting.	A severe level of criminal activity. This rating indicates an individual who has been engaged in violent criminal activity during the past year which represents a significant physical risk to others in the community. Examples would include rape, armed robbery, and assault.
<p>REQUIRED: FORENSIC PROGRAMS - COMPLETE <u>CRIMINAL BEHAVIOR MODULE</u> (p #36) FOR ALL CLIENTS</p> <p>DISCRETIONARY FOR ALL OTHER PROGRAMS (SCORES OF 2 OR 3)</p>			

GAMBLING			
<i>This item includes all forms of gambling—legal and illegal, organized, and social.</i>			
0	1	2	3
Individual has no evidence of any problem gambling.	Individual has either a history or suspicion of problems with gambling; however, currently gambling behavior is not known to impact his/her functioning.	Individual has problems with gambling that impact his/her functioning and/or wellbeing.	Individual has problems with gambling that dramatically impacts his/her life and make functioning difficult or impossible in at least one life domain.

COMMAND HALLUCINATIONS			
<i>This includes hallucinations in which an individual with psychosis believes he/she is being commanded to perform an act that may result in harm to himself/herself or another.</i>			
0	1	2	3
No evidence of hallucinations, either command or otherwise.	History of command hallucinations but not within past year, or commands are not compelling client to act (e.g., easily ignored by client) or which do not involve harm to self or other.	Recent command hallucinations that have threatening content, but which the individual is able to resist acting on.	Recent command hallucinations which individual feels he/she is (or shortly will be) compelled to react. Enacting the commands would result in harm to individual or another.

GRAVE DISABILITY			
<i>This item refers to an individual's inability to provide for his or her basic personal needs (food, shelter, and clothing) due to his or her mental illness.</i>			
0	1	2	3
No evidence of behaviors that indicate the individual has difficulty providing for basic personal needs (e.g., food, shelter, and clothing).	History of difficulty providing for basic physical needs, or currently having minor difficulty providing for needs in one area (food, shelter, and clothing) but not to the extent that harm is likely.	The individual has difficulty providing for basic physical needs. At risk of endangering him or herself (e.g., eating rotten food, unable to feed self, no, or unlivable housing, delusions about food or clothing, or too disorganized to feed or clothe self).	Individual is currently unable to provide for food, clothing and shelter to the extent that he or she has endangered him or herself and there is evidence of physical harm.

VII. PHYSICAL/MEDICAL

PRIMARY CARE PHYSICIAN (PCP) CONNECTED

Primary care physician can include an assigned or selected personal physician or primary care clinic.

0	1	2	3
Individual has a PCP and has been seen by the provider in the past 6 months.	Individual has a PCP but has not been seen by the provider in over 6 months.	Individual has a PCP but does not know the doctor's name nor when last seen.	Individual does not have a PCP.

CHRONIC HEALTH CONDITIONS

Examples: high blood pressure, diabetes, heart condition, and metabolic syndrome.

0	1	2	3
Individual has no chronic health conditions.	Individual has chronic health condition(s) but reports being able to manage effectively.	Individual has chronic health condition(s) but reports difficulty managing alone.	Individual has chronic health condition(s) and reports not being managed.

NON-PSYCHIATRIC MEDICAL HOSPITALIZATION OR EMERGENCY ROOM (ER) VISIT

This item addresses non-psychiatric hospitalizations or emergency room visits in the past year.

0	1	2	3
Individual reports no hospitalization or ER visit in past year.	Individual reports one hospitalization or ER visit in past year.	Individual reports more than one hospitalization or ER visit in past year.	Individual reports a hospitalization or ER visit in past 30 days.

NON-PSYCHIATRIC MEDICAL PRESCRIPTION

This item addresses medication for non-psychiatric medical conditions.

0	1	2	3
Individual has not been prescribed any drugs for a medical condition.	Individual uses over the counter medications for a medical condition(s).	Individual has been prescribed at least one medication for a medical condition.	Individual has been prescribed more than 2 medications for a medical condition.

HEALTH CARE ADHERENCE

This item focuses on the level of the individual's willingness and participation in necessary health care treatment. Health care treatments can include chemotherapy, dialysis, physical therapy, or other interventions or assessments.

N/A	0	1	2	3
Individual is not taking any medications or does not need any general health care intervention.	This rating indicates an individual who takes medications and attends other health care treatments as prescribed and without reminders.	This rating indicates an individual who will take or will participate in prescribed medications or treatments routinely, but who sometimes needs reminders to maintain adherence. Also, a history of inconsistent use or abuse of medications or attendance to health care treatment, but no current problems would be rated here.	This rating indicates an individual who is somewhat non-adherent. This individual may be unconvinced to the value of the health care treatment or this individual may tend to overuse his or her medications. The individual might adhere with prescription or treatment plans for periods of time (1-2 weeks) but generally does not sustain taking medication in prescribed dose or protocol or maintain consistent participation in other health care treatments.	This rating indicates an individual who has refused to take or participate in necessary prescribed medications or treatment during the past 30 day period or an individual who has abused his or her medications to a significant degree (i.e., overdosing or over using medications to a dangerous degree).

VIII. PSYCHIATRIC CRISES AND HOSPITALIZATIONS

This rating includes community, private, and state psychiatric hospitalizations.

NUMBER OF PSYCHIATRIC CRISIS EPISODES WITHOUT HOSPITALIZATION			
<i>This addresses psychiatric crisis interventions that do not result in hospitalization, such as Community Crisis Response Team, Crisis Walk-In Clinics, Diversion, Adult Emergency Services, and Emergency Room visits.</i>			
0	1	2	3
This rating indicates zero number of psychiatric crisis episodes in past 90 days.	This rating indicates one psychiatric crisis episodes in past 90 days.	This rating indicates two psychiatric crisis episodes in past 90 days.	This rating indicates three or more psychiatric crisis episodes in past 90 days.

NUMBER OF HOSPITALIZATIONS IN THE PAST 6 MONTHS			
<i>This item addresses psychiatric hospitalizations in the past 6 months.</i>			
0	1	2	3
This rating indicates zero number of hospitalizations in the past 6 months.	This rating indicates one hospitalization in the past 6 months.	This rating indicates two hospitalizations in the past 6 months.	This rating indicates three or more hospitalizations in the past 6 months.

NUMBER OF HOSPITALIZATIONS LASTING LESS THAN 30 CONSECUTIVE DAYS WITHIN THE PAST TWO YEARS			
<i>This item addresses short-term psychiatric hospitalizations within the past two years.</i>			
0	1	2	3
This rating indicates zero hospitalizations in the past two years lasting less than 30 consecutive days.	This rating indicates one hospitalization in the past two years lasting less than 30 consecutive days.	This rating indicates two hospitalizations in the past two years lasting less than 30 consecutive days.	This rating indicates three or more hospitalizations in the past two years lasting less than 30 consecutive days.

NUMBER OF HOSPITALIZATIONS LASTING MORE THAN 30 CONSECUTIVE DAYS WITHIN THE PAST TWO YEARS			
<i>This item addresses long-term psychiatric hospitalizations within the past two years.</i>			
0	1	2	3
This rating indicates zero hospitalizations in the past two years lasting more than 30 consecutive days.	This rating indicates one hospitalization in the past two years lasting more than 30 consecutive days.	This rating indicates two hospitalizations in the past two years lasting more than 30 consecutive days.	This rating indicates three or more hospitalizations in the past two years lasting more than 30 consecutive days.

MODULES

I. SUBSTANCE USE DISORDER MODULE

REQUIRED MODULE: Complete if Substance Use is rated at a 2 or 3

SEVERITY OF USE			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual has been free from alcohol and/or drug use for at least six months.	Individual is currently free from alcohol and/or drug use, but only in the past 30 days, or individual has been free from alcohol or drug use for more than 30 days, but is living in an environment that makes staying alcohol or drug free difficult.	Individual regularly uses alcohol and/or drugs, but not daily.	Individual uses alcohol and/or drugs on a daily basis.

DURATION OF USE			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual has begun use in the past year.	Individual has been using alcohol and/or drugs for at least one year, but has had periods of at least 30 days where he/she did not have any use.	Individual has been using alcohol or drugs for at least one year (but less than five years), but not daily.	Individual has been using alcohol and/or drugs daily for more than the past year or intermittently for at least five years.

STAGE OF RECOVERY			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual is in maintenance phase of recovery. Individual is free from alcohol and/or drug use and able to recognize and avoid risk factors for future alcohol and/or drug use.	Individual is actively trying to use treatment to remain free from alcohol and/or drug use.	Individual is in contemplation phase, recognizing a problem but not willing to take steps for recovery.	Individual is in denial regarding the existence of any substance use problem.

PEER INFLUENCES			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual's primary peer social network does not engage in alcohol and/or drug use.	Individual has peers in his/her primary peer social network who do not engage in alcohol and/or drug use, but has some peers who do.	Individual predominantly has peers who engage in alcohol and/or drug use.	Individual is a member of a peer group that consistently engages in alcohol and/or drug use.

ENVIRONMENTAL INFLUENCES			
<i>Please rate the environment around the individual's living situation.</i>			
0	1	2	3
No evidence that the individual's environment stimulates or exposes the individual to any alcohol and/or drug use.	Mild problems in the individual's environment that might expose the individual to alcohol and/or drug use.	Moderate problems in the individual's environment that clearly expose the individual to alcohol and/or drug use.	Severe problems in the individual's environment that stimulate the individual to engage in alcohol and/or drug use.

RECOVERY SUPPORT GROUP PARTICIPATION			
<i>Please rate the individual's participation in recovery programs such as AA, NA, or other types of recovery groups or activities that are community based.</i>			
0	1	2	3
No problems with maintaining social connectivity through recovery support groups or activities. Individual attends recovery support groups regularly and has no problems in attending the meetings.	Mild problems with maintaining social connectivity through recovery support groups or activities. Individual may attend meetings irregularly.	Moderate problems with maintaining social connectivity through recovery support groups or activities. Individual has attended recovery support groups in the past but is no longer attending meetings.	Severe problems with maintaining social connectivity through recovery support groups or activities. Individual has never participated in recovery support groups or activities.

II. CRIMINAL BEHAVIOR MODULE

**REQUIRED FOR FORENSICS PROGRAMS: Complete regardless of Criminal Behavior rate
DISCRETIONARY FOR ALL OTHER PROGRAMS**

SERIOUSNESS			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual has engaged only in status violations (e.g. curfew).	Individual has engaged in delinquent behavior.	Individual has engaged in criminal behavior.	Individual has engaged in criminal behavior that places other citizens at risk of significant physical harm.

HISTORY			
<i>Please rate using time frames provided in the anchors.</i>			
0	1	2	3
Current criminal/delinquent behavior is the first known occurrence.	Individual has engaged in multiple criminal/delinquent acts in the past one year.	Individual has engaged in multiple criminal/delinquent acts for more than one year, but has had periods of at least 3 months where he/she did not engage in delinquent behavior.	Individual has engaged in multiple criminal/delinquent acts for more than one year without any period of at least 3 months where he/she did not engage in criminal or delinquent behavior.

ARRESTS			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual has no known arrests in past.	Individual has history of arrests, but no arrests in past 30 days.	Individual has 1 to 2 arrests in last 30 days.	Individual has more than 2 arrests in last 30 days.

PLANNING			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence found of any planning. Criminal/delinquent behavior appears opportunistic or impulsive.	Evidence suggests that individual places him/herself into situations where the likelihood of criminal/delinquent behavior is enhanced.	Evidence indicates some planning of criminal/delinquent behavior.	Considerable evidence indicates significant planning of criminal/delinquent behavior. Behavior is clearly premeditated.

COMMUNITY SAFETY			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual presents no risk to the community. He/she could be unsupervised in the community.	Individual engages in behavior that represents a risk to community property.	Individual engages in behavior that places community residents in some danger of physical harm. This danger may be an indirect effect of the individual's behavior.	Individual engages in behavior that directly places community members in danger of significant physical harm.

LEGAL COMPLIANCE			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual is fully compliant with all responsibilities imposed by the court (e.g. school attendance, treatment, restraining orders) or no court orders are currently in place.	Individual is in general compliance with responsibilities imposed by the court. (e.g. occasionally missed appointments).	Individual is in partial noncompliance with standing court orders (e.g. individual is going to school but not attending court-order treatment).	Individual is in serious and/or complete noncompliance with standing court orders (e.g. parole violations).

PEER INFLUENCES			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual's primary peer social network does not engage in criminal/delinquent behavior.	Individual has peers in his/her primary peer social network who do not engage in criminal/delinquent behavior but has some peers who do.	Individual predominantly has peers who engage in delinquent behavior but individual is not a member of a gang.	Individual is a member of a gang whose membership encourages or requires illegal behavior as an aspect of gang membership.

IMMEDIATE FAMILY CRIMINAL BEHAVIOR INFLUENCES			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence that the individual's immediate family members have ever engaged in criminal/delinquent behavior.	One of the individual's immediate family members has history of criminal/delinquent behavior but individual has not been in contact with this member for at least one year.	One of the individual's immediate family members has history of criminal/delinquent behavior and individual has been in contact with this member in the past year.	More than one of individual's family members has a history of criminal/delinquent behavior.

ENVIRONMENTAL INFLUENCES			
<i>Please rate the environment around the individual's living situation.</i>			
0	1	2	3
No evidence that the individual's environment stimulates or exposes the individual to any criminal/delinquent behavior.	Mild problems in the individual's environment that might expose the individual to criminal/delinquent behavior.	Moderate problems in the individual's environment that clearly expose the individual to criminal/delinquent behavior.	Severe problems in the individual's environment that stimulate the individual to engage in criminal/delinquent behavior.

III. DANGER TO SELF MODULE

DISCRETIONARY MODULE: Complete if Danger to Self is rated as a 2 or 3

IF THIS MODULE IS TRIGGERED, BE SURE TO COMPLETE THE SUBSTANCE USE AND COMMAND HALLUCINATIONS CORE ITEMS, AS BOTH INCREASE RISK.

IDEATION			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence.	History but no recent ideation.	Recent ideation, but not in past 48 hours.	Current or within 48 hours ideation OR command hallucinations that involve self-harm.

INTENT			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence.	History, but no recent intent to act on suicidal urges.	Recent intention to suicidal urges.	Current intention.

PLANNING			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence of a concrete plan.	Vague notions of a plan, but that plan is not realistic.	Individual has a plan to act on suicidal urges or to harm others that is feasible (Complete Safety Plan).	Individual has a plan that is immediately accessible and feasible (Complete Safety Plan).

SUICIDE HISTORY			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No history of suicidal ideation or attempt.	History of significant suicidal ideation but no potentially lethal attempts.	History of a potentially lethal suicide attempt.	History of multiple potentially lethal suicide attempts.

HISTORY OF FAMILY/FRIEND SUICIDE			
0	1	2	3
No evidence that any family or friend has killed him/herself.	Individual has an acquaintance or relative who has killed him/herself.	A close family member or friend has killed him/herself.	Individual was a witness to the suicide death of a close family member or friend.

IV. DANGER TO OTHERS MODULE

DISCRETIONARY MODULE: Complete if Danger to Others is rated as a 2 or 3

IF THIS MODULE IS TRIGGERED, BE SURE TO COMPLETE THE SUBSTANCE USE AND COMMAND HALLUCINATIONS CORE ITEMS, AS BOTH INCREASE RISK.

IDEATION			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence.	History but no recent ideation.	Recent ideation, but not in past 48 hours.	Current or within 48 hours ideation OR command hallucinations that involve homicide or significant aggression.

INTENT			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence.	History, but no recent intent to act on homicidal or aggressive urges.	Recent intention to homicidal or aggressive urges.	Current intention.

PLANNING			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence of a concrete plan.	Vague notions of a plan, but that plan is not realistic.	Individual has a plan to act on homicidal or aggressive urges or to harm others that is feasible (Complete Safety Plan).	Individual has a plan that is immediately accessible and feasible (Complete Safety Plan).

LETHAL AGGRESSION HISTORY			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No history of aggressive ideation or attempt.	History of significant aggressive ideation but no potentially lethal attempts.	History of a potentially lethal aggressive episode.	History of homicide or multiple potentially lethal aggressive episodes.

HISTORY OF FAMILY/FRIEND AGGRESSION			
0	1	2	3
No evidence that any family or friend has an aggression history.	Individual has an acquaintance or relative who has a history of aggression.	A close family member or friend has engaged in significant aggression.	Individual was a witness to severe aggression by a family member or friend.

V. DANGEROUSNESS MODULE**DISCRETIONARY MODULE: Complete if Antisocial Behavior/Conduct is rated at a 2 or 3**

FRUSTRATION MANAGEMENT			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual appears to be able to manage frustration well. No evidence of problems of frustration management.	Individual has some mild problems with frustration. He/she may anger easily when frustrated; however, he/she is able to calm self down following an angry outburst.	Individual has problems managing frustration. His/her anger when frustrated is causing functioning problems in school, at home, or with peers.	Individual becomes explosive and dangerous to others when frustrated. He/she demonstrates little self-control in these situations and others must intervene to restore control.

HOSTILITY			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual appears to not experience or express hostility except in situations where most people would become hostile.	Individual appears hostile but does not express it. Others experience individual as being angry.	Individual expresses hostility regularly.	Individual is almost always hostile either in expression or appearance. Others may experience individual as 'full of rage' or 'seething'.

PARANOID THINKING			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual does not appear to engage in any paranoid thinking.	Individual is suspicious of others but is able to test out these suspicions and adjust their thinking appropriately.	Individual believes that others are 'out to get' him/her. Individual has trouble accepting that these beliefs may not be accurate. Individual at times is suspicious and guarded, but at other times can be open and friendly. Suspicions can be allayed with reassurance.	Individual believes that others plan to cause them harm. Individual is nearly always suspicious and guarded.

SECONDARY GAINS FROM ANGER			
<i>Please rate the highest level in the past 30 days.</i>			
0	1	2	3
Individual either does not engage in angry behavior or, when they do become angry, does not appear to derive any benefits from this behavior.	Individual unintentionally has benefited from angry behavior; however, there is no evidence that individual intentionally uses angry behavior to achieve desired outcomes.	Individual sometimes uses angry behavior to achieve desired outcomes with others.	Individual routinely uses angry behavior to achieve desired outcomes with others. Others in individual's life appear intimidated.

VIOLENT THINKING			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence that individual engages in violent thinking.	Individual has some occasional or minor thoughts about violence.	Individual has violent ideation. Language is often characterized as having violent themes and problem solving often refers to violent outcomes.	Individual has specific homicidal ideation or appears obsessed with thoughts about violence. For example, an individual who spontaneously and frequently draws only violent images may be rated here.

AWARENESS OF VIOLENCE POTENTIAL			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual is completely aware of his/her level of risk of violence. Individual knows and understands risk factors. Individual accepts responsibility for past and future behaviors. Individual is able to anticipate future challenging circumstances. An individual with no violence potential would be rated here.	Individual is generally aware of his/her potential for violence. Individual is knowledgeable about his/her risk factors and is generally able to take responsibility. Individual may be unable to anticipate future circumstances that may challenge him/her.	Individual has some awareness of his/her potential for violence. Individual may have tendency to blame others but is able to accept some responsibility for his/her actions.	Individual has no awareness of his/her potential for violence. Individual may deny past violent acts or explain them in terms of justice or as deserved by the victim.

RESPONSE TO CONSEQUENCES			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual is clearly and predictably responsive to identified consequences. Individual is regularly able to anticipate consequences and adjust behavior.	Individual is generally responsive to identified consequences; however, not all appropriate consequences have been identified or he/she may sometimes fail to anticipate consequences.	Individual responds to consequences on some occasions, but sometimes does not appear to care about consequences for his/her violent behavior.	Individual is unresponsive to consequences for his/her violent behavior.

COMMITMENT TO SELF CONTROL			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual fully committed to controlling his/her violent behavior.	Individual is generally committed to control his/her violent behavior; however, individual may continue to struggle with control in some challenging circumstances.	Individual ambivalent about controlling his/her violent behavior.	Individual not interested in controlling his/her violent behavior at this time.

TREATMENT INVOLVEMENT			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
Individual fully involved in his/her own treatment. Family supports treatment as well.	Individual or family involved in treatment but not both. Individual may be somewhat involved in treatment, while family members are active or individual may be very involved in treatment while family members are unsupportive.	Individual and family are ambivalent about treatment involvement. Individual and/or family may be skeptical about treatment effectiveness or suspicious about clinician intentions.	Individual and family are uninterested in treatment involvement. An individual with treatment needs who is not currently in treatment would be rated here.

VI. TRAUMA MODULE

DISCRETIONARY MODULE: Complete if Adjustment to Trauma is rated at a 2 or 3

SEXUAL ABUSE			
<i>Please rate within the lifetime.</i>			
0	1	2	3
No evidence that individual has experienced sexual abuse.	Individual has experienced one episode of sexual abuse or there is a suspicion that individual has experienced sexual abuse, but there is no confirming evidence.	Individual has experienced repeated sexual abuse.	Individual has experienced severe and repeated sexual abuse. Sexual abuse may have caused physical harm.

PHYSICAL ABUSE			
<i>Please rate within the lifetime.</i>			
0	1	2	3
No evidence that individual has experienced physical abuse.	Individual has experienced one episode of physical abuse or there is a suspicion that individual has experienced physical abuse, but there is no confirming evidence.	Individual has experienced repeated physical abuse.	Individual has experienced severe and repeated physical abuse that causes sufficient physical harm to necessitate hospital treatment.

EMOTIONAL ABUSE			
<i>Please rate within the lifetime.</i>			
0	1	2	3
No evidence that individual has experienced emotional abuse.	Individual has experienced mild emotional abuse.	Individual has experienced emotional abuse over an extended period of time (at least one year).	Individual has experienced severe and repeated emotional abuse over an extended period of time (at least one year).

NEGLECT			
<i>This item describes the degree of severity of neglect (e.g., abandoned, ignored, disregarded, avoided, mistreated, not fed, clothed, sheltered or cared for in an appropriate manner). Consider age and functioning of dependent person when rating.</i>			
0	1	2	3
No evidence that dependent person has experienced neglect.	Dependent person has experienced minor or occasional neglect. Dependent person may have been left at home alone with no supervision or there may be occasional failure to provide adequate supervision of dependent person.	Dependent person has experienced a moderate level of neglect. This may include occasional unintended failure to provide adequate food, shelter, or clothing with corrective action.	Dependent person has experienced a severe level of neglect including prolonged absences by caregiver, without minimal supervision. Caregiver has failed to provide basic necessities of life on a regular basis.

MEDICAL TRAUMA			
<i>Please rate within the lifetime.</i>			
0	1	2	3
No evidence that individual has experienced any medical trauma.	Individual has experienced mild medical trauma including minor surgery (e.g. stitches, bone setting).	Individual has experienced moderate medical trauma including major surgery or injuries requiring hospitalization.	Individual has experienced life threatening medical trauma.

NATURAL DISASTER			
<i>Please rate within the lifetime.</i>			
0	1	2	3
No evidence that individual has experienced any natural disaster.	Individual has been indirectly affected by a natural disaster.	Individual has experienced a natural disaster which has had a notable impact on his/her well-being.	Individual has experienced life threatening natural disaster.

WITNESS TO FAMILY VIOLENCE			
<i>Please rate within the lifetime.</i>			
0	1	2	3
No evidence that individual has witnessed family violence.	Individual has witnessed one episode of family violence.	Individual has witnessed repeated episodes of family violence but no significant injuries (i.e. requiring emergency medical attention) have been witnessed.	Individual has witnessed repeated and severe episodes of family violence. Significant injuries have occurred as a direct result of the violence.

WITNESS TO DOMESTIC VIOLENCE			
<i>Please rate within the lifetime.</i>			
0	1	2	3
No evidence that individual has witnessed domestic violence.	Individual has witnessed physical violence in household on at least one occasion but the violence did not result in injury.	Individual has witnessed repeated domestic violence that has resulted in the injury of at least one family member that required medical treatment.	Individual has witness to murder or rape of a family member.

WITNESS TO COMMUNITY VIOLENCE			
<i>Please rate within the lifetime.</i>			
0	1	2	3
No evidence that individual has witnessed violence in the community.	Individual has witnessed fighting or other forms of violence in the community	Individual has witnessed the significant injury of others in his/her community.	Individual has witnessed the death of another person in his/her community.

WITNESS/VICTIM TO CRIMINAL ACTIVITY			
<i>Please rate within the lifetime.</i>			
0	1	2	3
No evidence that individual has been victimized or witness significant criminal activity.	Individual is a witness of significant criminal activity.	Individual is a direct victim of criminal activity or witnessed the victimization of a family or friend.	Individual is a victim of criminal activity that was life threatening or caused significant physical harm or individual witnessed the death of a loved one.

WAR AFFECTED

This item describes the degree of severity of exposure to war, political violence, or torture. Violence or trauma related to Terrorism is not included here. Please rate within the lifetime.

0	1	2	3
<p>No evidence that individual has been exposed to war, political violence or torture.</p>	<p>Individual did not live in war-affected region or refugee camp, but family was affected by war. Family members directly related to the individual may have been exposed to war, political violence, or torture; family may have been forcibly displaced due to the war, or both. This does not include individuals who have lost parents or children during a war.</p>	<p>Individual is/was affected by war or political violence. He or she may have witnessed others being injured in the war, may have family members who were hurt or killed in the war, and may have lived in an area where bombings or fighting took place. Individual may have lost one family member. Individual may have spent extended amount of time in refugee camp.</p>	<p>Individual has experienced the direct affects of war. Individual may have feared for his or her own life during war. Individual may have lost multiple family members due to a war. They may have been directly injured, tortured, kidnapped or prisoner of war. They may have served as soldiers, guerrillas or other combatants in a war.</p>

TERRORISM AFFECTED

This item describes the degree to which an individual has been affected by terrorism. Terrorism is defined as "the calculated use of violence or the threat of violence to inculcate fear, intended to coerce or to intimidate governments or societies in the pursuit of goals that are generally political, religious, or ideological." Terrorism includes attacks by individuals acting in isolation (e.g. sniper attacks). Please rate within the lifetime.

0	1	2	3
<p>No evidence that individual has been affected by terrorism or terrorist activities.</p>	<p>Individual's community has experienced an act of terrorism, but the individual was not directly impacted by the violence (e.g. individual lives close enough to site of terrorism that they may have visited before or individual recognized the location when seen on TV, but individual's family and neighborhood infrastructure was not directly affected). Exposure has been limited to pictures on television.</p>	<p>Individual has been affected by terrorism within his/her community, but did not directly witness the attack. Individual may live near the area where attack occurred and be accustomed to visiting regularly in the past, infrastructure of individual's daily life may be disrupted due to attack (e.g. utilities, school, or place of work), and individual may see signs of the attack in neighborhood (e.g. destroyed building). Individual may know people who were injured in the attack.</p>	<p>Individual has witnessed the death of another person in a terrorist attack, or has had friends or family members seriously injured as a result of terrorism, or has directly been injured by terrorism leading to significant injury or lasting impact.</p>

AFFECT REGULATION

Please rate the highest level from the past 30 days.

0	1	2	3
<p>Individual has no problems with affect regulation.</p>	<p>Individual has mild to moderate problems with affect regulation.</p>	<p>Individual has severe problems with affect regulation but is able to control affect at times. Problems with affect regulation interfere with individual's functioning in some life domains.</p>	<p>Individual unable to regulate affect.</p>

INTRUSIONS			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence that individual experiences intrusive thoughts of trauma.	Individual experiences some intrusive thoughts of trauma, but they do not affect his/her functioning.	Individual experiences intrusive thoughts that interfere in his/her ability to function in some life domains.	Individual experiences repeated and severe intrusive thoughts of trauma.

ATTACHMENT			
<i>Please rate the highest level from the past 30 days.</i>			
0	1	2	3
No evidence of attachment problems. Parent-individual relationship is characterized by satisfaction of needs, individual's development of a sense of security and trust.	Mild problems with attachment. This could involve either mild problems with separation or mild problems of detachment.	Moderate problems with attachment. Individual is having problems with attachment that require intervention. An individual who meets the criteria for an Attachment Disorder would be rated here.	Severe problems with attachment. An individual who is unable to separate or an individual who appears to have severe problems with forming or maintaining relationships with caregivers would be rated here.

TRAUMATIC GRIEF/SEPARATION			
<i>This item describes the level of traumatic grief due to death or loss or separation from significant partners, caregivers, siblings, or other significant figures.</i>			
0	1	2	3
No evidence that the individual has experienced traumatic grief or separation from significant others or the individual has adjusted well to separation.	Individual is experiencing some level of traumatic grief due to death or loss of a significant person or distress from separation in a manner that is appropriate given the recent nature of loss or separation.	Individual is experiencing a moderate level of traumatic grief or difficulties with separation in a manner that impairs functioning in some but not all areas. This could include withdrawal or isolation from others.	Individual is experiencing significant traumatic grief or separation reactions. Individual exhibits impaired functioning across several areas (e.g. interpersonal relationships, job or vocational setting) for a significant period of time following the loss or separation.

REEXPERIENCING

These symptoms consist of intrusive memories or reminders of traumatic events, including nightmares, flashbacks, intense reliving of the events, and repetitive play with themes of specific traumatic experiences. These symptoms are part of the criteria for PTSD.

0	1	2	3
<p>This rating is given to an individual with no evidence of intrusive symptoms.</p>	<p>This rating is given to an individual with some problems with intrusions, including occasional nightmares about traumatic events.</p>	<p>This rating is given to an individual with moderate difficulties with intrusive symptoms. This individual may have recurrent frightening dreams with or without recognizable content or recurrent distressing thoughts, images, perceptions or memories of traumatic events. This individual may exhibit trauma-specific intense physiological reactions to exposure to traumatic cues.</p>	<p>This rating is given to an individual with severe intrusive symptoms. This individual may exhibit trauma-specific reenactments that include sexually or physically traumatizing others. This individual may also exhibit persistent flashbacks, illusions or hallucinations that make it difficult for the individual to function.</p>

AVOIDANCE

These symptoms include efforts to avoid stimuli associated with traumatic experiences. These symptoms are part of the criteria for PTSD.

0	1	2	3
<p>This rating is given to an individual with no evidence of avoidance symptoms.</p>	<p>This rating is given to an individual who exhibits some avoidance. This individual may exhibit one primary avoidant symptom, including efforts to avoid thoughts, feelings or conversations associated with the trauma.</p>	<p>This rating is given to an individual with moderate symptoms of avoidance. In addition to avoiding thoughts or feelings associated with the trauma, the individual may also avoid activities, places, or people that arouse recollections of the trauma.</p>	<p>This rating is given to an individual who exhibits significant or multiple avoidant symptoms. This individual may avoid thoughts and feelings as well as situations and people associated with the trauma and be unable to recall important aspects of the trauma.</p>

NUMBING			
<i>These symptoms include numbing responses that are part of the criteria for PTSD. These responses were not present before the trauma.</i>			
0	1	2	3
This rating is given to an individual with no evidence of numbing responses.	This rating is given to an individual who exhibits some problems with numbing. This individual may have a restricted range of affect or be unable to express or experience certain emotions (e.g., anger or sadness).	This rating is given to an individual with moderately severe numbing responses. This individual may have a blunted or flat emotional state or have difficulty experiencing intense emotions or feel consistently detached or estranged from others following the traumatic experience.	This rating is given to an individual with significant numbing responses or multiple symptoms of numbing. This individual may have a markedly diminished interest or participation in significant activities and a sense of a foreshortened future.

DISSOCIATION			
<i>Symptoms included in this item are daydreaming, spacing or blanking out, forgetfulness, fragmentation, detachment, and rapid changes in personality often associated with traumatic experiences but not due to the direct effects of substances. This item may be related to dissociative disorders, but can also exist with other primary diagnoses (e.g., PTSD, depression).</i>			
0	1	2	3
No evidence of dissociation.	Individual may experience some mild dissociative problems, including some emotional numbing, avoidance or detachment, and some difficulty with forgetfulness, daydreaming, spacing or blanking out.	At a moderate level of dissociation, an individual clearly experiences episodes of dissociation which can include amnesia for traumatic experiences or inconsistent memory of trauma, persistent or perplexing difficulties with forgetfulness, frequent daydreaming or trance-like behavior. This can also include persistent symptoms of depersonalization, feeling detached from one's self and/or de-realization, a sense of disconnection with surroundings.	When profound dissociation occurs, the individual may experience significant memory difficulties or show significant problems with depersonalization and/or de-realization associated with trauma that impede day-to-day functioning. The individual is often forgetful or confused about things he/she should know about.