Policy Title: 8006V.1 Criteria for Evaluation of Learning Needs, Barriers to Learning, and Level of Functioning
Patient Age Group: (X) N/A ( ) All Ages ( ) Pediatric ( ) Adult

Purpose:

The purpose of this policy is to outline the criteria and procedures for conducting comprehensive assessments of learning needs, barriers to learning, and the level of functioning or functional impairment in clients receiving services at Centro Savila. The policy ensures that all clients are evaluated in a manner that captures their individual challenges and needs, and that the assessment informs personalized treatment planning and therapeutic interventions.

Scope:

This policy applies to all licensed clinicians, intake specialists, case managers, and other clinical staff involved in the assessment and treatment planning process for individuals seeking behavioral health services at Centro Savila.

Policy Overview:

Centro Savila Behavioral Health Services is committed to providing person-centered care that is individualized to meet the unique needs of each client. This policy provides a structured framework to assess:

- **Learning Needs**: Identifying and evaluating the client's capacity to engage with and absorb therapeutic interventions.
- **Barriers to Learning**: Recognizing factors that may impede the client's ability to fully participate in or benefit from therapeutic processes.
- **Level of Functioning or Functional Impairment**: Assessing the client's current mental, emotional, and social functioning to determine the extent of impairment and areas for intervention.

Assessment Criteria and Procedures:

1. **Evaluation of Learning Needs:**
    - **Cognitive and Emotional Readiness**: Clinicians will assess the client's readiness to engage in therapy, which includes evaluating cognitive functioning (e.g.,

attention, memory, problem-solving) and emotional preparedness to process treatment materials or therapeutic techniques.
    - **Learning Preferences**: Clinicians should explore the client's preferred learning styles (e.g., visual, auditory, kinesthetic) to tailor therapeutic interventions accordingly. This may include exploring the client's ability to engage in different formats of therapy (e.g., talk therapy, art therapy, psychoeducation, etc.).
    - **Motivation for Change**: An assessment of the client's intrinsic motivation, goals for therapy, and willingness to engage in therapeutic work is critical. This can be evaluated through structured tools (e.g., Motivational Interviewing techniques) or direct discussion.
    - **Knowledge Gaps**: Clinicians will assess for gaps in the client's knowledge about their mental health or treatment needs, which may impact their ability to engage fully in therapy. Psychoeducation about mental health conditions, treatment options, and self-management may be incorporated into the treatment plan.
2. **Identification of Barriers to Learning:**
    - **Psychosocial Barriers**: Clinicians should evaluate psychosocial barriers such as trauma history, lack of social support, family dynamics, cultural or language differences, and social isolation that may hinder the client's ability to engage in or benefit from therapy.
    - **Cognitive and Emotional Barriers**: Factors such as cognitive impairments (e.g., learning disabilities, executive functioning challenges) or emotional barriers (e.g., depression, anxiety, trauma-related symptoms) that may limit the client's capacity to participate in treatment will be identified.
    - **Physical and Environmental Barriers**: Clinicians should assess for any physical impairments or environmental factors (e.g., housing instability, financial constraints, transportation issues) that may impede the client's ability to attend sessions regularly or access necessary resources.
    - **Motivational Barriers**: Lack of motivation or ambivalence about treatment can be a significant barrier. Clinicians will assess for any psychological or emotional resistance to treatment, such as denial, external locus of control, or previous negative treatment experiences.
    - **Cultural and Linguistic Considerations**: Clinicians should be sensitive to any cultural or linguistic barriers that could impede the client's ability to understand and engage in treatment, and take steps to offer culturally appropriate interventions or language support as needed.
3. **Assessment of Level of Functioning or Functional Impairment:**
    - **Mental and Emotional Functioning**: Clinicians will assess the client's mental and emotional functioning in areas such as mood regulation, impulse control, stress management, and the presence of any psychiatric symptoms (e.g., anxiety, depression, psychosis).
    - **Cognitive Functioning**: The clinician will assess the client's cognitive abilities, including their ability to concentrate, process information, remember details, and problem-solve. This may involve informal observation or more formalized cognitive assessments, as needed.
    - **Social and Interpersonal Functioning**: The client's ability to function socially, including their capacity for building and maintaining relationships, holding a job,

and participating in community activities, will be evaluated. The clinician will consider the impact of mental health or behavioral issues on social relationships, including family dynamics and peer relationships.
    - **Daily Living Skills**: The clinician will assess the client's ability to manage daily activities, such as self-care, hygiene, housing, finances, and transportation. Functional impairments in these areas may indicate the need for additional support or case management services.
    - **Employment and Occupational Functioning**: Clinicians will assess how the client's mental health challenges affect their ability to function in a work environment, including challenges with maintaining employment, job performance, or interpersonal interactions at work.
    - **Risk Assessment**: Clinicians will assess for any immediate safety concerns related to the client's ability to function, such as risk of harm to self or others, substance misuse, or severe impairment in judgment that impacts decision-making or daily functioning.
4. **Tools and Instruments Used for Assessment:**
    - Clinicians will utilize validated assessment tools to evaluate learning needs, barriers to learning, and level of functioning. Examples may include:
        - **Learning Needs**: Motivational interviewing techniques, client self-report questionnaires, and cognitive assessments.
        - **Barriers to Learning**: Structured interviews, questionnaires assessing social support and barriers to treatment engagement, and trauma history assessments.
        - **Functional Impairment**: Global Assessment of Functioning (GAF), WHO Disability Assessment Schedule (WHODAS), and other functional assessment tools.
        - **Clinical Interviews**: In-depth, semi-structured interviews with clients and collateral information from family members or other service providers, when appropriate.
5. **Documentation and Treatment Planning:**
    - All assessments will be documented thoroughly in the client's electronic health record (EHR) or paper chart. Documentation will include a detailed summary of the client's learning needs, barriers to learning, and level of functional impairment, as well as the clinician's observations and assessments.
    - Based on the assessment, the clinician will collaborate with the client to create a treatment plan that addresses identified barriers and supports the client's learning needs. The treatment plan will outline specific goals, interventions, and strategies for addressing functional impairments and maximizing engagement in treatment.
    - Treatment planning should consider both immediate and long-term goals, and be revisited regularly to adjust for any changes in the client's functioning or new barriers to learning.
6. **Review and Monitoring of Progress:**
    - Clinicians will regularly review the client's progress in therapy and monitor changes in their learning needs, barriers to learning, and functional impairment throughout the course of treatment.

- Updates to the treatment plan should be made as needed, with appropriate adjustments to interventions or resources to address emerging issues.

Confidentiality and Record Keeping:

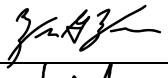
All information gathered during the assessment process, including learning needs, barriers to learning, and functional assessments, is considered confidential and will be maintained in accordance with **HIPAA** regulations and relevant state laws. Documentation will be securely stored in the client's health record, accessible only to authorized personnel.

Policy Review:

This policy will be reviewed annually by the Clinical Leadership Team to ensure its continued relevance, alignment with best practices, and compliance with applicable laws and regulations.

Approved by: William G. Wagner, Executive Director
Date: 11.12.24

Signature:

Item	*Date*	*Signature*
Executive Director	11/15/2024	
Deputy Director	11/14/2024