

## Answer Rationales for QA Knowledge Assessment Survey #10

### The Assessment and the Problem List

#### 1. Assessments should contain enough information to...

- A. Understand the interrelationship between the client's symptoms/behaviors and the client as a whole person
- B. Enable the reader to see the role/influence of social determinants/life circumstances (e.g., conditions in which people are born into, grow, live, learn, and work) and social identity (e.g., culture, religion, spirituality) in the client's life.
- C. See the impact of significant supports, living situation, substance use, etc. on the mental health of the client
- D. Allow the client and staff to collaborate in the development of a mutually agreed upon plan of treatment and recovery based on the formulation
- E. All the Above

Question (Q) 1 Answer: E

#### **Answer Rationales for Question (Q)1**

**Q1 - Option A** - *Understand the interrelationship between the client's symptoms/behaviors and the client as a whole person*

- Per the [Organizational Provider's Manual \(Revision Date 6-26-24\)](#), *"An Assessment is important in the beginning to understand and appreciate who the client is and the interrelationship between the client's symptoms/behaviors and the client as a whole person. The Assessment enables the reader to see the role of culture and ethnicity in the client's life and documents the impact of significant supports, living situation, substance use, etc. on the mental health of the client. The Assessment identifies the client and his/her family's strengths and identifies the stages of change/recovery for the client. The formulation collected in an Assessment allows the client and staff to collaborate in the development of a mutually agreed upon plan of treatment and recovery."*

**Q1 - Option B** – *Enable the reader to see the role of culture and ethnicity in the client's life*

- Per the [Organizational Provider's Manual \(Revision Date 6-26-24\)](#), *"Assessments must contain the required seven (7) uniform Assessment domains (categories of information) as identified below to the extent information is available."*
  - **Domain 1:** *Presenting Problem(s), Current Mental Status, History of Presenting Problem(s), Client-Identified Impairment(s)*
  - **Domain 2:** *Trauma*
  - **Domain 3:** *Behavioral Health History (including Substance Use History), Co-occurring Substance Use (i.e., substance use & mental health)*
  - **Domain 4:** *Medical History, Current Medications, Co-occurring Conditions other than substance use (i.e., medical & mental health)*
  - **Domain 5:** *Social and Life Circumstances, Culture/Religion/Spirituality*
  - **Domain 6:** *Strengths, Risk Behaviors & Protective Factors*
  - **Domain 7:** *Clinical Summary & Recommendations, Diagnostic Impression, Medical Necessity Determination/Level of Care/Access Criteria"*
- Also, see rationale above for Option A

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**Q1 - Option C** – *See the impact of significant supports, living situation, substance use, etc. on the mental health of the client*

- See rationale above for Option A

**Q1 - Option D** – *Allow the client and staff to collaborate in the development of a mutually agreed upon plan of treatment and recovery based on the formulation*

- See rationale above for Option A

**Q1 - Option E – All the Above**

- Answer Options A through D for Question 1 are all included in the Organizational Provider's Manual's description of what the information in the assessment should enable the reader to do and highlight the purpose and function of the assessment. Therefore, Option E – All the Above is the best answer option for Question 1.

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**2.** Which of the following is **not** part of the intended purpose of the Problem List?

- A. Provide a snapshot of a client's problems that represent significant symptoms and needs identified during the assessment and throughout the course of the client's treatment
- B. Replace the need for documentation of the care or treatment plan
- C. Allow the treatment team, or anyone encountering the client, to get a quick global view of the client's issues without having to go through the assessment or other documents in the clinical record
- D. Method of quickly sharing information to coordinate care with other providers and agencies

Question 2 Answer: B

### **Answer Rationales for Question (Q)2**

**Q2 - Option A** – *Provide a global view of issues for the client that the treatment team, or anyone encountering the client, should be aware of without requiring them to go to the assessment or other document*

- Per the [Organizational Provider's Manual \(Revision Date 6-26-24\)](#), "*The Problem List is a snapshot of a client's problems that represents significant symptoms and needs identified during the assessment and throughout the course of the client's treatment. It provides a global view of the client's issues that the treatment team, or anyone coming in contact with the client, should be aware of without requiring them to go to the assessment or other documentation within the clinical record. The Problem List also creates a method of quickly sharing information to coordinate care with other providers and agencies.*"

**Q2 - Option B - Replace the need for documentation of the care or treatment plan**

- It was not intended for the Problem List to replace the need for documentation of a care or treatment plan. Although connected, the Problem List and the Care Plan are separate areas of documentation with different functions. The Problem List briefly outlines the client's

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problems that represent significant symptoms and needs that were identified during the assessment and throughout the course of treatment, and the Care Plan documents the plan for addressing those problems in treatment. The [Organizational Provider's Manual \(Revision Date 6-26-24\)](#) (Org. Manual) has separate sections for the Problem List and the Care Plan (in chapter 1) that describe the purpose and list the requirements for each of those areas of documentation. As stated in the Org. Manual, “*Care planning is an integral part of providing clinical services. Care planning with clients is a standard of practice which helps to organize and guide treatment. Care plans assist in ensuring clients continue to move forward on a path to recovery by helping the treatment team to monitor progress and make treatment adjustments when necessary. Care planning is not a one-time activity and should be done continuously throughout the course of treatment.*”. The Org. Manual stresses that care planning should be done for all services, but there are specific services that require a care plan. Please see the “Care Plans” section in chapter 1 of the Org. Manual for the specific elements that must be documented in the care plan for specific services. Also, see the rationale above for Option A of Question 2.

**Q2 - Option C** - *Allow the treatment team, or anyone encountering the client, to get a quick global view of the client's issues without having to go through the assessment or other documents in the clinical record*

- See rationale above for Option A of this question (Q2)

**Q2 - Option D** - *Method of quickly sharing information to coordinate care with other providers and agencies*

- See rationale above for Option A of this question (Q2)

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**3.** The Problem List is required to include which of the following:

- A. Goals for treatment
- B. Symptoms, conditions, diagnoses, social drivers and/or risk factors identified through the Assessment, diagnostic evaluation, crisis encounters, or other types of service encounters
- C. Problems identified by the therapist only

Question #3 Answer: **B**

### **Answer Rationales for Question (Q)3**

**Q3 - Option A** – *Goals for treatment*

- Goals for treatment are not a required element for the Problem List. According to the [Organizational Provider's Manual \(Revision Date 6-26-24\)](#), “The Problem List must contain:
  - Symptoms, conditions, diagnoses, social drivers and/or risk factors identified through the Assessment, diagnostic evaluation, crisis encounters, or other types of service encounters
  - Diagnoses identified by a practitioner acting within their scope of practice, if any
  - Problems identified by a practitioner acting within their scope of practice, if any”

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- Problems or illnesses identified by the client and/or significant support person, if any
- The name and title of the provider that identified, added, or removed the problem, and the date the problem was identified, added, or removed.”

**Q3 - Option B** – *Symptoms, conditions, diagnoses, social drivers and/or risk factors identified through the Assessment, diagnostic evaluation, crisis encounters, or other types of service encounters*

- Option B is the correct answer option. See rationale for Option A above for this question (3)

**Q3 - Option C** – *Problems identified by the therapist only*

- This option (C) is incorrect as it states in the Org. Manual that “*Any practitioner on the treatment team can add problems to the Problem List as it is a reporting form, not a diagnosing form.*”

4. The Problem List is related to the Assessment in that it provides a snapshot of important information about the client such as symptoms, conditions, diagnoses, social drivers and/or risk factors that were identified through the assessment process.

- A. True
- B. False

Question #4 Answer: A

### **Answer Rationales for Question (Q)4**

**Q4 - Option A** – *True*

- Per the Organizational Provider's Manual (Revision Date 6-26-24), “*The Problem List is a snapshot of a client's problems that represents significant symptoms and needs identified during the assessment and throughout the course of the client's treatment. It provides a global view of the client's issues that the treatment team, or anyone coming in contact with the client, should be aware of without requiring them to go to the assessment or other documentation within the clinical record.*”, and includes that the Problem List needs to contain “*Symptoms, conditions, diagnoses, social drivers and/or risk factors identified through the Assessment, diagnostic evaluation, crisis encounters, or other types of service encounters*”

**Q4 - Option B** – *False*

- See Option A rationale above for this question (4).