## 

I. LIFE DOMAIN FUNCTIONING					
0 = no evidence of need	2 = r	node	rate 1	need	
1 = mild need, history	3 = s	ever	e nee	d	
	N/A	0	1	2	3
Family Relationships		0	O	0	0
Social Functioning		o	O	0	0
Recreational		O	O	o	0
Developmental/Intellectual		o	O	o	o
Employment Functioning	o	o	O	0	0
Legal		o	O	o	o
Physical/Medical		o	O	0	0
Sexual Relations		o	O	o	o
Sleep		o	O	o	o
Living Skills		o	O	o	o
Residential Stability		O	O	o	0
Self-Care		o	O	o	o
Medication Compliance		o	O	0	0
Decision-Making/Judgment		o	O	o	o
Involvement in Recovery/ Motivation		_	_	0	_
for Treatment		O	O	O	O
Transportation		o	O	o	o
Parenting Roles		o	O	o	o
Intimate Relationships		0	o	0	0
Educational Attainment		0	o	0	o
·	•				

II. STRENGTHS  0 = significant strength	2 = r	nild	stren	oth	
1 = moderate strength			engtl	_	
8	N/A		1	2	3
Family/Family Strengths/Support		0	0	0	О
Interpersonal/Social Connectedness		0	o	o	o
Optimism		o	O	o	o
Educational Setting	O	o	O	o	o
Vocational		o	o	o	0
Job History		o	o	o	o
Talents and Interests		o	o	o	o
Spiritual/Religious		0	o	o	0
Cultural Identity		o	O	o	0
Community Connection		o	O	o	0
Natural Supports		0	O	o	0
Relationship Permanence		0	o	o	0
Resilience		0	0	0	0
Resourcefulness		o	o	0	o

III. CULTURE							
0 = no evidence of need	2 = moder	2 = moderate need					
1 = mild need, history	3 = severe	3 = severe need					
	0	1	2	3			
Language	0	o	O	0			
Traditions and Rituals	0	o	O	o			
Cultural Stress	0	o	0	0			

IV. CARE/SUPPORT STRENGTHS & NEEDS										
0 = significant strength	2 = m	2 = mild strength								
1 = moderate strength	3 = n	3 = no strength								
	N/A	0	1	2	3					
Involvement with Care	0	0	О	О	0					
Knowledge	o	o	O	o	o					
Social Resources	o	o	o	o	o					
Physical/Behavioral Health	o	o	o	o	o					
Safety	o	o	O	o	o					
Family Stress	0	0	0	0	0					

V. BEHAVIORAL HEALTH NEEDS										
0 = no evidence of need $2 = moderate need$										
1 = mild need, history	3 = severe need									
	0	1	2	3						
Psychosis(Thought Disorder)	0	O	O	0						
Impulse Control	0	o	o	0						
Depression	0	o	o	0						
Anxiety	0	o	o	0						
Antisocial Behavior	0	o	o	o						
Adjustment to Trauma	0	o	o	0						
Anger Control	0	O	o	0						
Eating Disturbances	0	o	o	0						
Somatization	0	O	o	0						
Substance Use	0	o	o	o						
Cognition	0	o	o	0						
Mania	0	O	O	0						

VI. RISK BEHAVIORS								
0 = no evidence of need	2 = moderate need							
1 = mild need, history	3 = severe need							
	0	1	2	3				
Suicide Risk	0	O	О	0				
Danger to Others	o	O	0	0				
Non-Suicidal Self-Injurious Behavior (Self-Mutilation)	O	o	o	o				
Other Self-Harm (Recklessness)	O	o	o	o				
Exploitation	O	O	0	o				
Sexual Aggression	o	O	o	o				
Criminal Behavior	O	O	0	o				
Fire Setting	O	O	0	o				
Gambling	o	O	o	o				
Command Hallucinations	0	o	o	o				
Grave Disability	0	o	o	o				

III. Culture IV. Care/Support Strengths and Needs V. Behavioral Health Needs VI. Risk Behaviors VII. Physical/Medical VIII. Psychiatric Crises and Hospitalizations

MODULES I. Substance Use Disorder II. Criminal Behavior III. EPSDT-Needs/Risks IV. EPSDT – Caregiver Resource and Needs V. Danger to Self VI. Danger to Others VII. Dangerousness VIII. Trauma

Highlighted ratings trigger modules associated with the item.

**CORE ELEMENTS** I. Life Domain Functioning II. Strengths

## ADULT NEEDS AND STRENGTHS - SAN BERNARDINO (ANSA-SB)

CHECK ONE: O Initial ANSA O Update ANSA O Planned Discharge ANSA O Unplanned Discharge ANSA

Date Assessed: \_\_\_\_\_\_

VII. PHYSICAL/MEDICAL					
0 = no evidence of need	2 = n	node	rate 1	need	
1 = mild need, history	3 = s	ever	e nee	d	
	N/A	0	1	2	3
Primary Care Physician (PCP) Connected	1	0	0	0	0
Chronic Health Conditions		0	o	o	0
Non-Psychiatric Medical					
Hospitalization or Emergency Room		o	O	O	0
(ER) Visit					
Non-Psychiatric Medical Prescription		0	o	0	0
Health Care Adherence	0	0	0	0	0

VIII. PSYCHIATRIC CRISES AND HOSPITALIZATIONS						
0 = no crises episodes or hospitalizations 1 = 1 crisis episode or hospitalization	episode	= 3 or more crises pisodes or ospitalizations				
	0	1	2	3		
Number of psychiatric crisis episodes witho hospitalization	out o	o	o	o		
Number of hospitalizations in the past 6 months	o	o	o	o		
Number of hospitalizations lasting less than 30 consecutive days within the past 2 years	0	o	o	o		
Number of hospitalizations lasting more tha 30 consecutive days within the past 2 years	in O	o	o	o		

## ANSA-SB MODULES

REQUIRED MODULE: Complete if Substance Use is rated at a 2 or 3									
I. Substance Use Disorder	0	1	2	3		0	1	2	3
Severity of Use	0	0	0	0	Peer Influences	0	0	0	0
Duration of Use	O	o	o	o	Environmental Influences	O	o	O	o
Stage of Recovery	0	0	o	0	Recovery Support Group Participation	0	0	0	o

REQUIRED MODULI	REQUIRED MODULE - FORENSICS PROGRAMS: Complete regardless of Criminal Behavior rate													
DISCRETIONARY MODULE FOR ALL OTHER PROGRAMS														
II. Criminal Behavior	0	1	2	3			0	1	2	3				
Seriousness	О	0	O	0		Legal Compliance	0	0	O	0				
History	O	O	O	o		Peer Influences	o	O	O	O				
Arrests	O	o	O	0		Immediate Family Criminal Behavior	0	_	0					
Planning	O	O	O	o		Influences	U	O	O	O				
Community Safety	O	O	o	o		Environmental Influences	O	0	0	0				

	REQUIRED	M	ODU	ILE:	Co	nplete for youth age 20 and under				
III. EPSDT-Needs/Risks	N/A	0	1	2	3		0	1	2	3
Sexual Development		O	O	0	O	Attachment Difficulties	0	O	0	0
Living Situation		O	O	o	o	Oppositional	O	O	0	0
School Behavior	O	o	O	0	o	Runaway	O	o	O	0
School Achievement	O	O	O	o	o	Intentional Misbehavior	O	O	0	0
School Attendance	0	0	0	0	0		0	o	0	0

	REQUIRED MODULE: Complete for youth age 20 and under												
NOT APPLICABLE - No Caregiver Identified 0													
IV. EPSDT – Caregiver	0	1	2	3			0	1	2	3			
Supervision	0	0	0	0		Mental Health	0	O	O	0			
Organization	0	0	0	O		Substance Use	O	O	O	o			
Residential Stability	0	o	o	O		Medical/Physical	o	O	O	o			
Developmental	0	0	0	O									

	DISCRETIONARY M	ODI	UDB	: Co	plete if Suicide Risk is rated at a 2 or 3	3			
V. Danger to Self	0	1	2	3		0	1	2	3
Ideation	0	0	0	0	Suicide History	0	0	0	0
Intent	0	0	O	O	History of Family/Friend Suicide	O	O	0	o
Planning	0	0	0	0					

## ADULT NEEDS AND STRENGTHS - SAN BERNARDINO (ANSA-SB)

CHECK ONE: O Initial ANSA O Update ANSA O Planned Discharge ANSA O Unplanned Discharge ANSA

Date Assessed: \_\_\_\_\_\_ Client's Name: \_\_\_\_\_\_

DISCRET	IONARY MOI	DUL	E: (	Com	ete if Danger to Others is rated at a 2 or 3				
VI. Danger to Others	0	1	2	3		0	1	2	3
Ideation	0	0	0	0	Lethal Aggression History	0	0	0	0
Intent	0	O	O	O	History of Family/Friend Aggression	O	O	0	o
Planning	0	O	O	O					

DISCRETIONARY MODULE: Complete if Antisocial Behavior is rated at a 2 or 3												
VII. Dangerousness	0	1	2	3		0	1	2	3			
Frustration Management	0	0	0	0	Awareness of Violence Potential	0	0	0	0			
Hostility	O	o	O	o	Response to Consequences	O	O	O	o			
Paranoid Thinking	O	o	o	0	Commitment to Self Control	0	o	O	o			
Secondary Gains from Anger	O	o	0	0	Treatment Involvement	0	O	O	o			
Violent Thinking	0	0	0	o								

DISCRETIONARY	MODU	LE:	Con	nple	te if	Adjustment to Trauma is rated at a 2 or	· 3			
VIII. Trauma	0	1	2	3			0	1	2	3
Sexual Abuse	O	0	0	0		War Affected	0	O	0	0
Physical Abuse	O	0	O	o		Terrorism Affected	O	O	0	o
Emotional Abuse	O	o	o	o		Affect Regulation	O	O	0	o
Neglect	O	0	O	0		Intrusions	0	O	0	o
Medical Trauma	O	o	o	o		Attachment	O	O	0	o
Natural Disaster	O	0	O	o		Traumatic Grief/Separation	0	O	0	o
Witness to Family Violence	O	o	0	0		Reexperiencing	O	O	o	o
Witness to Domestic Violence	O	0	O	o		Avoidance	0	O	0	o
Witness to Community Violence	O	o	o	0		Numbing	O	O	o	o
Witness/Victim to Criminal Activity	O	0	0	0		Dissociation	o	O	0	o