



LifeWork, llc

2055 Craigshire Road, Suite 120
St. Louis, MO 63146
p: (314) 737-0020
f: (314) 392-9601

LifeWork Challenge Group Assessment for Outside Clients

LifeWork’s Challenge group is for adults that have completed Stage 1 DBT, are fairly regulated, and want to maintain their skills with peer group support. We accept clients with therapists outside of LifeWork, and we need to gather information to ensure they are a good fit.

CLIENT INFORMATION

Date: _____

Client Name: _____

First Last

Address: _____

Street City State Zip

Phone Number: _____

Home Work Cell

Email: _____ Date of Birth: _____ Age: _____

PRIMARY THERAPIST

Therapist Name: _____

First Last

Office Address: _____

Street City State Zip

Phone Number: _____

Work Cell

Email: _____



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ASSESSMENT QUESTIONS

These questions are designed to be answered by the client and the client's primary therapist together.

Has the client been through a full (6+ months) round of Stage 1 DBT? Yes No

Dates: _____

Agency that DBT Stage 1 was completed: _____

Client's Diagnosis: _____

Does the client agree with their diagnosis? Yes No

In the last year how many psychiatric hospitalizations has the client had? _____

In the last six months how much romantic/sexual/friendship relationship turnover has the client had? _____

In the last two months, which of the following has the client experienced?

- Suicidal Thoughts/Urges
- Suicidal Actions
- Urges to harm others
- Physically harmed others
- Self-harm urges
- Self-harm actions
- Uncontrollable panic attacks
- Out-of-control substance use
- Binging/purging/restricting food
- Intrusive thoughts
- Self-isolation
- Dissociation (zoning out, out-of-body experiences, daydreams that feel like reality, loss of time)
- Avoidance of conflict, tasks, or self-care

If you checked yes to any of the above, please explain more about why the client is appropriate for the challenge group. Additional conversation may be needed.



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Skills that the client is using regularly: _____

How often does the client use skills? _____

In your (therapist's) opinion, is the client ready to attend a group without skills coaching being offered by the group leader? Yes No

In your opinion, is the client ready to be in a peer-led Stage 2 group to maintain their skills use?
 Yes No

Other information that you would like LifeWork to know about this client? _____
