



Advanced Mental Health Assessment and Diagnostic Reasoning Training Course

28 March – 1 April 2027
Johannesburg

Advanced Mental Health Assessment and Diagnostic Reasoning Training Course

Ref: 1514_211832 **Date:** 28 March – 1 April 2027 **Location:** Johannesburg **Fees:** 4500 Euro

Overview

Advanced Mental Health Assessment and Diagnostic Reasoning Training Course is a one-week course for mental health, healthcare, social care, and allied professionals, who leave with a Mental Health Assessment and Diagnostic Reasoning File. The course connects structured interviewing, mental status examination, diagnostic criteria, differential diagnosis, cultural formulation, risk formulation, clinical documentation, and multidisciplinary communication within professional scope. Agile Leaders Training Center presents mental health assessment and diagnostic reasoning as an evidence-informed, person-centered decision process.

Who Should Attend

- Functions responsible for structured mental health assessment
- Teams responsible for diagnostic review and case formulation
- Personnel responsible for psychosocial assessment and referral
- Services responsible for clinical documentation and handover
- Functions responsible for multidisciplinary care decisions

The course assumes participants contribute to assessment or diagnostic decisions within defined professional scope and leaves out independent diagnosis by unauthorized personnel and treatment planning beyond role boundaries.

Departments and Industries

The course supports departments and organizations that conduct, contribute to, document, or act on mental health assessments.

- Mental health and behavioral health services
- Primary care and hospital assessment functions
- Social care and community support organizations
- Occupational health and employee assistance services
- Education and student support departments

Learning Objectives

By the end of this course, participants will be able to:



- Apply a structured mental health interview process
- Use mental status examination and functional assessment methods
- Analyze symptoms against diagnostic requirements and alternatives
- Build cultural and risk formulations from assessment evidence
- Prioritize referral, escalation, and multidisciplinary communication
- Evaluate diagnostic reasoning and clinical documentation quality

Course Agenda

Day 1: Structured Assessment Foundations

- Mental Health Assessment Scope and Role Map
- Person-Centered Interview Planning Template
- Presenting Concern and History-Taking Framework
- Collateral Information and Consent Checklist
- Biopsychosocial Assessment Domain Matrix

Day 2: Mental Status and Function

- Mental Status Examination Observation Guide
- Cognition, Perception, and Thought Record
- Mood, Affect, and Behavior Description Method
- Functional Impact Assessment Grid
- Physical and Substance Factor Review Checklist

Day 3: Diagnostic Reasoning

- ICD-11 CDDR Diagnostic Requirements Navigation
- DSM-5-TR Criteria Evaluation Method
- Differential Diagnosis Comparison Matrix
- Comorbidity and Diagnostic Hierarchy Map
- Evidence Sufficiency and Uncertainty Log

Day 4: Context, Risk, and Documentation

- Cultural Formulation Interview Structure
- Needs-Focused Risk Formulation Template
- Protective Factors and Safety Planning Record
- Clinical Assessment Summary Framework
- Multidisciplinary Handover and Referral Brief



Day 5: Assessment Practice and Integration

- Suggested Exercise: Structured Interview Simulation
- Suggested Exercise: Mental Status Examination Record
- Suggested Exercise: Differential Diagnosis Case Conference
- Suggested Exercise: Cultural and Risk Formulation Review
- Capstone Exercise: Mental Health Assessment and Diagnostic Reasoning File

Practical Exercises

The course uses suggested activities based on fictional hospital, community, social care, occupational health, and education scenarios.

- Suggested activity: conduct a structured interview and separate reported experience, observed findings, interpretation, and missing evidence.
- Suggested activity: compare plausible diagnostic alternatives using symptoms, duration, function, context, exclusions, and uncertainty.
- Suggested activity: develop a needs-focused risk formulation without predictive scoring or global risk labels.
- Suggested activity: prepare a scope-aware assessment summary, referral decision, and multidisciplinary handover.

FAQs

Who suits advanced mental health assessment and diagnostic reasoning training, and what does it assume?

Professionals who conduct or contribute to assessment, formulation, documentation, referral, or multidisciplinary decisions suit the training; it assumes relevant practice responsibility and requires participants to work within their authorization to diagnose.

How does mental health assessment and diagnostic reasoning differ from general mental health awareness training?

Mental health assessment and diagnostic reasoning organize evidence, examine function and context, compare diagnostic alternatives, formulate risk, and document decisions, while awareness training primarily supports recognition and general response.

How should diagnostic criteria be used in mental health assessment?

Diagnostic criteria should structure evaluation by trained professionals alongside history, mental status, function, physical and substance factors, cultural context, exclusions, collateral information, and clinical judgment rather than operate as a standalone checklist.



What role does cultural formulation play in mental health diagnosis?

Cultural formulation examines the person's explanation of distress, identity, context, supports, barriers, and relationship with services so diagnostic reasoning does not mistake cultural difference or social adversity for disorder.

How should risk be documented during mental health assessment?

Risk should be documented as a formulation of current needs, vulnerabilities, triggers, protective factors, possible scenarios, safety actions, uncertainties, and review responsibilities rather than as a predictive low, medium, or high label.

Conclusion

Participants leave with a Mental Health Assessment and Diagnostic Reasoning File containing interview, examination, differential diagnosis, cultural formulation, risk, documentation, and referral tools. The file creates a traceable path from evidence to professional decisions. It helps teams communicate uncertainty, respect scope boundaries, and coordinate person-centered action.