V-CODES

OCCUPATIONAL PROBLEM/ACADEMIC PROBLEM

DSM-IV-TR Diagnostic Code:
   V62.2 Occupational Problem
   V62.3 Academic Problem

The above diagnostic codes will be used when the focus of clinical attention is an occupational and/or academic problem not due to a mental disorder, or, if due to a mental disorder, is sufficiently severe to warrant independent clinical attention. The above codes should be used as the primary diagnosis, coded on Axis I, and the participant can be effectively treated using brief, problem-solving therapy.

The following guidelines are to be considered and rendered within the context of the participant’s cultural, ethnic, and spiritual values in order to maximize the accuracy of the diagnosis, the effectiveness of the treatment, and the best possible outcomes for the participant and the family.

Diagnostic Guidelines:

1. Establish diagnostic accuracy as defined in DSM-IV-TR. The distinguishing feature of this V-code is that the “problem is the focus of clinical attention that is not due to a mental disorder or, if it is due to a mental disorder, is sufficiently severe to warrant independent clinical attention. Typically, this V-code category is time limited in terms of treatment. If more lengthy treatment is needed, there is probably a primary mental health diagnosis that is not clearly evident.

   a. Occupational Problems:
      • Current work performance deficiencies or behavior aberrations
      • Sleep and appetite difficulties related to current disciplinary stress or job stress
      • Concerns regarding lack of or ineffective communication with manager or co-workers
      • Productivity loss stemming from fear and doubt about job security
      • Unusually short-tempered and angry with manager, coworkers, and company or physical and/or verbal aggression towards others or property
      • Concerns regarding lack of career development
      • Worry and fear about disclosing situation to spouse and family
      • Concerns about potential loss of income and status
      • Uncertainty and frustration about the solution to situation
b. Academic Problems:

- Lacks necessary credit requirements for high school diploma
- Sleep and appetite difficulties related to current academic deficiencies
- Failure to take classes or attempt to pass GED test
- Fear and doubt about academic achievement
- Unusually short-tempered and angry with authority and/or peers
- Fear about disclosing situation to parents and/or family members
- Lack of necessary reading and writing skills to complete required reports for his/her employment position
- Functional illiteracy which limits any promotional activity
- Employment termination due to a lack of necessary math, reading, writing, and/or reasoning skills
- No marketable job skills

2. Consider co-morbid problems:

- Depression/anxiety disorder – prolonged stress associated with job/academic performance may increase risk for depression or anxiety disorder
- Substance abuse – participant history of substance abuse may aggravate his/her performance issues or the participant may resort to substance use/abuse as a mechanism to relieve stress
- Medical problems – the participant may develop medical problems associated with occupational/academic stress and the absence of healthy lifestyle practices
- Attention Deficit Hyperactive Disorder (ADHD) and/or Learning Disorders (LD)- a diagnosis of ADHD or LD may produce or exacerbate academic/occupational problems

3. All five Axes should be part of the diagnostic assessment and attention paid to issues of safety and the availability of appropriate support systems.

**Treatment Guidelines:**

1. Goal of treatment is to change behaviors to eliminate further negative consequences and compliance with performance standards.

2. Occupational/academic counseling based on accurate self-perception either of competencies and/or desires and assistance in locating employment/educational opportunities in a new position within the employer/academic organization or outside the company/academic organization.
3. Develop increased awareness of critical factors that determine success and develop skills and behaviors that are conducive to that success.
4. Develop a balanced outlook on work, school, identity, and leisure activities.
5. Establish positive open communication with key authority figures and ask for constructive feedback on a regular basis to prevent poor performance evaluation.
6. Actively try to anticipate performance expectations and/or organizational requirements.
7. Develop a plan with the participant for meeting desired goals.
8. Therapeutic strategies include:

   A. Individual Intervention

      - Encourage the participant to verbalize a clear and concrete understanding of current performance deficiencies or behavior aberrations. List self-perceptions of performance deficiencies and compare them to documented reports.
      - Explore whether the individual has experienced previous deficiencies or disciplinary problems. Gather a complete work/academic history, including current and past successes, frustrations, and challenges. Draw parallels between current situation and difficulties in the past.
      - Elicit from individual any steps of the disciplinary process that have occurred and what she/he has done to resolve the issue.
      - Assess the current problem and determine root cause, be it technical competence, interpersonal conflict with authority or colleague, quantity of work, substance abuse, etc. Review availability of training opportunities, both internal and external, that may address technical performance deficiencies.
      - Assess the individual intelligence, aptitude, and motivation to address deficiencies. Reinforce a commitment to obtaining further education and/or skill training.
      - Direct the participant toward community or corporate resources for obtaining further academic or job skill training.
      - Assign participant the task of making preliminary contact with vocational and/or educational training agencies and report back the experience of the contact.

   B. Participant/Family Interventions

      - Verbalize agreement to disclose information regarding the actions with key social support people.
      - Assess duration and strength of individual’s relationship with significant other(s) to determine whether to encourage discussion of the deficiencies/disciplinary situation before resolution.
• Discuss the need to intervene and discuss the situation with the appropriate academic official, manager, or human resource representative if there is a need for advocacy.
• Explore any unrealistic needs for which the participant is seeking satisfaction in the workplace or school (e.g. substitute for lack of family, closeness, excessive praise or recognition, social life substitute). Assist the participant in developing realistic plans to meet emotional and social needs outside of the workplace or school.
• Assist the participant in avoiding the development of, or continuation of destructive blaming and damning cognition/ statements to assist the employee with his/her own behavior.
• Assess participant’s strengths and how they may be used in this situation to develop new or different methods of coping with the situation.
• Assist the participant in developing healthily coping strategies through the use of role play, assertiveness techniques, communication training and relaxation exercises.
• Monitor the participant’s punctuality and attendance, encouraging personal responsibility and assessing for possible substance abuse problem.
• Follow up- with the participant to determine whether the deficiencies are progressively being resolved and if additional support is needed.

References:

