



Probation Service Definition

ADMINISTRATIVE OFFICE OF THE COURTS & PROBATION

SERVICE NAME	Co-Occurring Evaluation <input type="checkbox"/> Adult <input checked="" type="checkbox"/> Juvenile
Category	Evaluation
Setting	Professional office environment, clinic, mental health substance use center, substance use treatment center, private practice, teleservice or other environment appropriate to the provision of evaluation/assessment services.
Facility License	As required by the Department of Health and Human Services (DHHS)-Division of Public Health
Service Description	<p>A Co-Occurring Evaluation is a clinical, strengths-based evaluation of a youth experiencing co-occurring substance use and mental health symptoms. The Co-Occurring Evaluation is a process of gathering information to assess youth functioning and needs based on identification of the presenting problem, evaluation of mental status, evaluation of substance use, formulation of a diagnostic impression (as applicable) and recommendation for treatment services/strategies.</p> <p>The Co-Occurring Evaluation will include a mental health diagnostic impression (as applicable), a substance use diagnostic impression (as applicable), history of mental health symptoms, trauma history/symptoms, criminogenic risk, risk of harm to self and/or others, the youth’s perception of the situation and collateral information. Based on the evaluation, recommendations are provided and justified for appropriate behavioral health services and treatment.</p> <p>The results of the Simple Screening Instrument (SSI) as completed by probation should be included in the written narrative report.</p> <p>The Co-Occurring Evaluation may include a recommendation for further psychological testing, if supported. Specializations can include evaluating for eating disorders and trauma.</p>
Service Expectations	<ul style="list-style-type: none"> A culturally sensitive evaluation completed by an appropriately licensed behavioral health professional that includes, at minimum: a mental health diagnostic impression (as applicable), a substance use diagnostic impression (as applicable), clinical impressions and recommendations for behavioral health services. Referral

	<p>to appropriate mental health, substance use or co-occurring services based on the youth’s need. A Co-Occurring Evaluation will include but is not limited to these areas listed below; see behavioral health evaluation worksheets for more detail:</p> <ul style="list-style-type: none"> • Demographics • Presenting problem/primary complaint, including external leverage to seek the evaluation, when it was first recommended and what led the client to schedule the evaluation • Medical history • Work/school/military history • Alcohol/drug history summary, including frequency and amount, substance(s) of choice, history of use, patterns of use, consequences of use, periods of abstinence, tolerance level, withdrawal history/potential, influence of living situation on use, other compulsive behaviors (gambling, etc.), history of intravenous use, previous evaluations/recommendations and past treatment episodes • Legal history, including history of charges/convictions, drug testing results and results of the SSI and SRARF completed by Probation • Family/social/peer history • Psychiatric/behavioral history, including past diagnoses, treatment episodes, medication and or psychiatric hospitalizations • Collateral information from at least two (2) sources (legal guardian will complete a release of information), preferred collateral contacts from recent past should include provider(s), family, school personnel, friends and probation/problem solving court staff. The youth’s attorney is not included as collateral. • Other diagnostic/screening tools used and results • ASAM multidimensional assessment indicating severity in each of the six dimensions and explaining the severity ranking • Initial diagnostic interview including a mental status exam and outlining general appearance, motor level, speech patterns, affect, thought content, thought processes, perception, global evaluation of intellect and insight • Clinical impression, including summary of the evaluation interview, mental health and/or substance use diagnostic impressions (as appropriate), strengths and problems identified • Recommendations, including identifying the primary/ideal level of care, barriers to the recommendations/available level of care, client/family response to the recommendations, identification of
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	<p>who needs to be involved in the client’s treatment, treatment plan that includes transitioning to lower levels of care/discharge planning, a means to evaluate the client’s progress during treatment and measure outcomes at discharge, recommended linkages with community resources and any areas for further evaluation.</p> <ul style="list-style-type: none"> • If clinically indicated, the therapist upon permission from the legal guardian shall communicate with current/former providers as appropriate to coordinate services. • When there is a clinical recommendation for an out of home treatment program (therapeutic group home or psychiatric residential treatment facility) the clinician will complete the application for treatment. • Services must be trauma informed, culturally sensitive, age and developmentally appropriate and incorporate evidence-based practices when appropriate. <p>Approved Reporting Format: The Co-Occurring Evaluation written report must be completed in the Probation-approved reporting format only as detailed on the appropriate evaluation worksheet.</p> <p>Structured Interview Tool Required for SU Evaluation: CASI -- The Comprehensive Addiction Severity Index for Adolescents (CASI) is required to be used as a face-to-face structured interview guide, to be scored and utilized to provide information for the bio psychosocial assessment/substance use disorder evaluation and the multidimensional risk profile.</p>
Service Frequency	Interview sessions scheduled as needed with youth and family to complete the CO evaluation.
Length of Stay	Evaluation must be completed and sent to the probation/problem solving court officer within the timeframe set by the court, including statutorily 21 or 30-day evaluations. Timeframes are per Nebraska Revised Statue 43-281. Adjudication of jurisdiction; temporary placement for evaluation; restrictions on placement; copy of report or evaluation. For a juvenile in detention, the court shall order that such evaluation be completed and the juvenile returned to the court within twenty-one days after the evaluation. For a juvenile who is not in detention, the evaluation shall be completed and returned to the court within thirty days.
Staffing	<ul style="list-style-type: none"> • Physician • Physician Assistant (PA) • Advanced Practice Registered Nurse – Nurse Practitioner (APRN-NP) • Licensed Psychologist • Provisionally Licensed Psychologist

	<ul style="list-style-type: none"> • Licensed Independent Mental Health Practitioner (LIMHP) • Licensed Mental Health Practitioner (LMHP) • Provisionally Licensed Mental Health Practitioner (PLMHP) • All providers must hold a current, valid Nebraska license through the Nebraska Department of Health and Human Services (DHHS) – Division of Public Health and must act within their scope of practice. • All providers must be trained in trauma-informed care, recovery principles and crisis management <p>AND have completed the Standardized Model requirements and the state approved CASI training.</p>
Staff to Client Ratio	1 therapist to 1 youth.
Hours of Operation	Providers are expected to be flexible in scheduling to accommodate the service needs, which may include evening and/or weekend availability.
Service Desired Outcomes	The Co-Occurring Evaluation will identify any mental health and/or substance use diagnostic impressions and provide treatment recommendations along with the clinical justification for the recommended services.
Unit and Rate	Per evaluation; see rate sheet

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Service Interpretive Guideline]