



Probation Service Definition

ADMINISTRATIVE OFFICE OF THE COURTS & PROBATION

SERVICE NAME	Co-Occurring Evaluation <input checked="" type="checkbox"/> Adult <input type="checkbox"/> Juvenile
Category	Evaluation
Setting	Professional office environment, clinic, mental health substance use treatment center, private practice, teleservice or other setting appropriate to the provision of evaluation/assessment services.
Facility License	As required by the Nebraska 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 an individual experiencing co-occurring substance use and mental health symptoms. The Co-Occurring Evaluation is a process of gathering information to assess client 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 individual’s perception of the situation and collateral information. Based on the evaluation, recommendations are provided and justified for appropriate behavioral health services and treatment. The results of the Simple Screening Instrument (SSI) should be included in the written narrative report.</p>
Service Expectations	<p>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 to appropriate mental health, substance use or co-occurring services based on individual need.</p> <p>A Co-Occurring Evaluation will include these areas during the clinical interview and in the narrative report; see the corresponding Behavioral Health Evaluation Worksheet for complete details:</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

	<ul style="list-style-type: none"> • Medical history, including history of illnesses/injuries/conditions, chronic conditions and medications taken • Work/school/military history, including vocational/training programs, academic/vocational needs and concerns, employment history, current employment status and other sources of income • 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 offenses against the client, historical and current legal status • Family dynamics, including demographic information, historical information and treatment history • Social history and environmental influences • Psychiatric/behavioral health history, including past diagnoses, treatment episodes, medication and/or psychiatric hospitalizations • Collateral information from at least two (2) sources, including unsuccessful attempts to obtain collateral information • Every attempt should be made to discuss the recommendations and available services with the officer as part of gathering collateral information; early communication and documentation reduces barriers to clients accessing recommended services • The results of the Simple Screening Instrument (SSI) and the Standardized Risk Assessment Reporting Format for Substance Abusing Offenders (SRARF) completed by the probation/problem-solving court officer should be included in the written narrative report. • Other diagnostic/screening tools used and results • Recommendations for individualized treatment, potential services, modalities, resources, and interventions must be based on the ASAM national criteria multidimensional risk profile. The provider is responsible for referring to the ASAM criteria for the full matrix when applying the risk profile for recommendations. For each dimension, report intensity and justification. • Mental status exam 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
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	<p>of who needs to be involved in the client’s treatment, treatment plan that includes transitioning to less intensive 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"> • Services must be trauma-informed, culturally and linguistically appropriate, age and developmentally appropriate and incorporate evidence-based practices when appropriate <p>Structured Interview Tool Required: The Addiction Severity Index (ASI) is required to be used as a face-to-face structured interview guide, to be scored and utilized to provide information for the Co-Occurring Evaluation and the multidimensional risk profile.</p> <p>Approved Reporting Format: The Co-Occurring Evaluation written report must be provided in the Probation-approved reporting format as detailed on the appropriate evaluation worksheet.</p>
Service Frequency	The evaluation interview will take one to two (1 to 2) hours and will usually occur one time.
Length of Service	<p>The Co-Occurring Evaluation is completed prior to initiation of services and at new episodes of care.</p> <p>Full evaluation, collateral information, and written narrative summary/evaluation report completed within thirty (30) working days of initial contact with the individual. Court-ordered evaluations must be completed and sent to the probation/problem-solving court staff member within the timeframe set by the Court.</p>
Staffing	<ul style="list-style-type: none"> • Physician • Physician Assistant (PA) • Advanced Practice Registered Nurse – Nurse Practitioner (APRN-NP) • Licensed Psychologist • Provisionally Licensed Psychologist • 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 • All providers must be trained in the Standardized Model and must have passed state-approved training on the Addiction Severity Index (ASI)

Staff to Client Ratio	1 clinician : 1 client
Hours of Operation	Providers are expected to be flexible in scheduling to accommodate service needs, which may include evening and/or weekend availability.
Service Desired Outcomes	Upon completion of the Co-Occurring Evaluation, the individual will have been assessed for both substance use disorders and mental health diagnoses, an assessment of risk of dangerousness to self and/or others, and recommendation for the appropriate service level with referrals to appropriate service providers.
Unit and Rate	See rate sheet