



Probation Service Definition

ADMINISTRATIVE OFFICE OF THE COURTS & PROBATION

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| SERVICE NAME | Mental Health Evaluation (Pre-Treatment/Biopsychosocial Assessment) <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 | A Mental Health Evaluation is a clinical, strengths-based evaluation of an individual experiencing mental health symptoms. The Mental Health Evaluation is a process of gathering information to assess client functioning and needs based on identification of the presenting problem, evaluation of mental status, formulation of a diagnostic impression (as applicable) and recommendation for treatment services/strategies. The Mental Health Evaluation will include a mental health 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. |
| Service Expectations | <p>A culturally sensitive evaluation is completed by an appropriately licensed behavioral health professional and includes the following 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 and goals described by client and collateral contacts • Medical history, including development, prenatal/birth/developmental milestones, history of illnesses/injuries/conditions, chronic conditions, medications taken, sexual development, menstrual history, pregnancies and births or fathered children • Academic, intellectual and vocational history, including IQ, learning disabilities/behavioral disorders, interventions and outcomes • Substance use history, including personal use, family history and treatment history • Legal history, including offenses against the client, historical and current legal status • Legal issues, including incarceration, probation, violence to person or property • Family dynamics, including demographic information, historical information and treatment history |

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| | <ul style="list-style-type: none"> • Social history and environmental influences • Psychiatric/behavioral health history, including past diagnoses, treatment episodes, medication and or psychiatric hospitalizations • Victim issues, including neglect and emotional, verbal, physical or sexual assault or abuse • Collateral information from at least two (2) sources, including unsuccessful attempts to obtain collateral information • Mental status exam and diagnosis, including appearance, motor level, speech, affect, thought content, thought processes, perception, major themes discussed by the client, global evaluation of intellect, insight and a mini-mental status exam • Diagnostic impression and findings (if applicable), including amenability to treatment, internal motivation and justification for diagnosis/diagnoses or lack thereof • Personal assets and liabilities, including strengths and current barriers to success • Recommendations, including treatment needs/needed interventions, barriers to the recommendations, client response to the recommendations, identification of 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 • Services must be trauma-informed, culturally and linguistically appropriate, age and developmentally appropriate and incorporate evidence-based practices when appropriate. <p>Approved Reporting Format: The Mental Health 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 | 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. |
| 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) |

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| | <ul style="list-style-type: none"> • 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 |
| 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 | The evaluation will identify any mental health diagnoses and provide recommendations for currently needed behavioral health services to treat/stabilize the presenting mental health symptoms. |
| Unit and Rate | See rate sheet |