



Probation Service Definition

ADMINISTRATIVE OFFICE OF THE COURTS & PROBATION

SERVICE NAME	Substance Use Addendum – ASAM Level 0.5 <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 Substance Use Addendum is used to clarify/update the treatment needs and recommendations and/or gather information about the timeframe when an individual was not receiving treatment, such as the time between completing an evaluation and beginning recommended services, if enough time has passed that the clinical information needs to be updated; if there are known changes to the client’s circumstances that could impact the diagnostic impression and/or treatment recommendations; or if the client is beginning services with a provider who did not complete the initial Substance Use Evaluation. A Substance Use Addendum is not needed if a client is transitioning between levels of care with the same agency/provider.
Service Expectations	<p>A Substance Use Addendum is completed by an appropriately licensed behavioral health professional and includes the following components/updates 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"> • Identification of the source of the initial Substance Use Evaluation, including the date and clinician completing the evaluation, along with initial treatment recommendations • Summarize the following from the initial Substance Use Evaluation and provide any updated information: • Demographics • Presenting Problem/Primary Complaint • Medical History • Work/School/Military History • Alcohol/Drug History and Summary • Legal/Criminal History • Family/Social/Peer History • Psychiatric/Behavioral Health History • Collateral Information, including unsuccessful attempts to obtain collateral information

	<ul style="list-style-type: none"> • 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 • Any updated 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. • Clinical Impression, including diagnostic impression and findings (if applicable), amenability to treatment, internal motivation, justification for diagnosis/diagnoses or lack thereof and relationship between substance use and criminogenic risk • Recommendations, including treatment needs/needed interventions, barriers to the recommended interventions, client response to the recommendations, identification 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>Approved Reporting Format: The Substance Use Addendum written report must be provided in the Probation-approved reporting format as detailed on the appropriate evaluation worksheet.</p>
Service Frequency	A Substance Use Addendum may be completed if determined clinically necessary to update the information in the Substance Use Evaluation.
Length of Service	Full Addendum, 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) • Licensed Mental Health Practitioner (LMHP) • Provisionally Licensed Mental Health Practitioner (PLMHP)

	<ul style="list-style-type: none"> • Licensed Alcohol and Drug Counselor (LADC) • Provisionally Licensed Alcohol and Drug Counselor (PLADC) • 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	The Addendum will identify/update any substance use diagnoses and provide recommendations for currently needed behavioral health services to treat/stabilize the presenting symptoms.
Unit and Rate	See rate sheet