



Probation Service Definition

ADMINISTRATIVE OFFICE OF THE COURTS & PROBATION

SERVICE NAME	Sex Offense-Specific 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 Sex Offense-Specific Evaluation is a clinical, strengths-based evaluation of an individual who has engaged in illegal and/or sexually-abusive/assaultive behaviors and who has been charged with and/or convicted of a sexual offense.</p> <p>The Sex Offense-Specific 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.</p>
Service Expectations	<p>The Sex Offense-Specific Evaluation will include a mental health diagnostic impression (as applicable), history of mental health symptoms, sexual history and current sexual behavior, trauma history/symptoms, criminogenic risk, risk of harm to self and/or others (including risk for sexual re-offense), the individual’s perception of the situation and collateral information. Based on the evaluation, identified risk and protective factors are incorporated into a comprehensive clinical impression and recommendations for appropriate behavioral health services are provided and justified.</p> <p>A Sex Offense-Specific Evaluation is a culturally sensitive evaluation completed by an appropriately licensed behavioral health professional that includes, at minimum, the following:</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 • Legal history, including offenses against the client, history and current legal status

	<ul style="list-style-type: none"> • Legal history, history of charges/convictions, probation, detention/incarceration, current legal status/charges and victim information • 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 communications and documentation reduces barriers to clients accessing recommended services • Medical history, including development, prenatal/birth/developmental milestones, history of illness/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 • 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, past treatment episodes and relationship of substance use and criminal justice involvement/criminogenic risk • Family/social/peer history, including past and current dynamics, demographic information and treatment history • Psychiatric/behavioral health history, including past diagnoses, treatment episodes, medication and or psychiatric hospitalizations • Sexual history and current sexual behavior • Diagnostic/screening/risk assessment tools used and results • Additional psychological testing, including scores, results and interpretation • 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 impression (as appropriate), strengths and problems identified • Recommendations, including identifying the primary/ideal level of care, clinical rationale for the recommended service(s), barriers to completing recommended interventions/available level of care, client/family response to the recommendations, identification of who needs to be involved in the client's
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	<p>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> <p>Approved Reporting Format: The Sex Offense-Specific Evaluation written report must be completed in the Probation-approved reporting format as detailed on the appropriate evaluation worksheet.</p>
Service Frequency	The evaluation will usually occur one time; time may vary depending on the clinician’s preferred interview/information gathering process and the assessment tools utilized.
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) ○ 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 ○ Providers must also have one of the following trainings and provide their certificate of completion: <ul style="list-style-type: none"> ○ Vermont Assessment for Sex Offender Risk- 2 (VASOR-2) ○ Sex Offender Treatment Intervention Progress Scale (SOTIPS) ○ Static 99R ○ STABLE 2007 ○ ACUTE 2007 ○ Psychopathy Checklist – Revised (PCL-R) ○ Sex Offense Risk Appraisal Guide (SORAG) ○ Violence Risk Scale for Sex Offenders ○ Risk for Sexual Violence Protocol (RSVP)

	<ul style="list-style-type: none"> • Providers for Sex Offense Services must also demonstrate: <ul style="list-style-type: none"> ○ A minimum of 24 hours of documented offense-specific evaluation/treatment education/training involving evidence-based practices within the last five (5) years OR consistent and continued experience providing evaluation/treatment services to this population for at least five (5) years OR a combination of education/training and experience, as approved by the Administrative Office of the Courts and Probation. ○ Education/training must be related to the specific population the provider is intending to serve (i.e., adult and/or juvenile). ○ Documentation must be in the form of a training completion certificate or letter from the training provider and must include the number of continuing education units (i.e., CEUs) or hours of education/training. ○ Experience providing evaluation/treatment services must be documented and clearly illustrate hours providing services specific to this population.
	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 Sex Offense-Specific Evaluation will identify any mental health and/or substance use diagnostic impressions, maladaptive sexual behaviors, risk for sexual re-offense and provide treatment recommendations specifically targeting dynamic risk factors along with the clinical justification for the recommended services.
Unit and Rate	See rate sheet