

C. L. "BUTCH" OTTER -- Governor RICHARD M. ARMSTRONG -- Director

ROSS EDMUNDS -- Administrator DIVISION OF BEHAVIORAL HEALTH 450 West State Street, 3rd Floor P.O. Box 83720 Boise, Idaho 83720-0036 PHONE 208-334-6997

DATE:

May 30, 2013

TO:

DUI Evaluator Network

FROM:

Idaho Department of Health and Welfare

Division of Behavioral Health

SUBJECT:

DUI Evaluation Training

Significant changes to Idaho's DUI evaluation system will take effect July 1, 2013. Programs and facilities approved under IDAPA 16.07.20 will be providing DUI evaluations to the court. Idaho Criminal Misdemeanor Rule 9.4 has been amended to include new requirements for evaluations, including the use of a standard report form, consideration of the defendant's driver license record, and use a criminogenic risk/need screening to develop recommendations. Further, MCR 9.4 will allow the court to return noncompliant DUI evaluation reports to the evaluator for correction.

To support these changes, providers are invited to attend a webinar that will provide an overview of MCR 9.4, provide instruction on completing the DUI evaluation report form, and train providers to administer required criminogenic risk/need screening tools. The webinar will be offered on the following dates:

- June 6, 2013 from 9:00 A.M. to 12:00 P.M.
- June 13, 2013 from 1:00 P.M. to 4:00 P.M.
- June 14, 2013 from 9:00 A.M to 12:00 P.M.

To login to the webinar please click on the following link or type it into your browser:

https://attendee.gotowebinar.com/rt/6693621531883598592

^{*}Please note that all times are MST.

To access audio:

Dial: 866-210-1669

Enter passcode: 1547741

Any questions regarding this matter should be directed to either Kerry Hong at (208) 947-7520 or khong@idcourts.net or Michael Bartlett at (208) 332-7243 or bartletm@dhw.idaho.gov.

In the Supreme Court of the State of Idaho

RULE 9.4)	ORDER
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The Court having reviewed a recommendation from the Misdemeanor/Infraction Rules Advisory Committee to amend Misdemeanor Criminal Rule 9.4, and the Court having fully considered the same;

NOW, THEREFORE, IT IS HEREBY ORDERED that the Misdemeanor Criminal Rules as they appear in the volume published by the Idaho Code Commission be, and they are hereby, amended as follows:

1. That Misdemeanor Criminal Rule 9.4 be, and the same is hereby, amended as follows:

Rule 9.4. Alcohol-drug evaluation report.

The alcohol-drug evaluation report received by the court pursuant to Section 18-8005(911), Idaho Code, shall remain confidential in the same manner and to the same extent as a presentence investigation report under the Idaho Criminal Rules; provided the defendant shall always be entitled to retain his copy of the report. The report of an individual alcohol-drug evaluation submitted to a sentencing court under Section 18-8005(911), Idaho Code, shall consist of the following components and be presented in the following a standardized format approved by the Idaho Supreme Court:

(a) **Face Sheet.** All alcohol-drug evaluation reports shall have a one (1) page typed summary face sheet attached to the report which shall be in substantially the following form:

[Court and case title]

Case No.

Sentencing Date/Time:	Sentencing Judge:		
Defendant:	SSN/DL#; DOB:		
Aliases:	Sex: F M		
Date of Evaluation:	Marital Status: Telephone:		

List Prior Alcohol or Drug Related Arrests or charges:

List Results of Evidentiary Tests in this case:
Check Life Areas Affected:
Family Employment/Education
Social Health
Financial Legal
Evaluator's Concise Impressions and Recommendations for Treatment:
DUI Evaluator's Name: Address: Phone:
(b) Evaluation Report. The report of the alcohol-drug evaluation shall be attached to the face sheet and shall contain the following information in the following order: (1) Final disposition of any drug or alcohol related offenses or charges including any offenses or charges where drugs or alcohol were a factor. (2) Any information of the defendant's blood alcohol content or refusals for any drug or alcohol related incidents within the last five (5) years. (3) Any information of the defendant's driver license record. (34) Previous alcohol or substance abuse education or treatment and whether the program was completed. (45) Identification of primary drugs substances of abuse or dependency to include listings of primary, secondary or other drugs substances if appropriate and indications of defendant's history of I.V. drug use. (56) Defendant's version of the current incident. (67) Defendant's self assessment of substance use. (78) Evaluator's description of the defendant's use of alcohol/and/or drugs and the extent to which they have contributed to problems within the defendant's major life areas, including: (I) Family (II) Social (III) Financial (IV) Job—School Employment/Education (V) Legal Health
(VI) Health Legal (89) A listing of the screening tools utilized in the evaluation together with the scores. The use of at least three (3) screening tools approved by the Department of Health and Welfare is mandatory- and shall include:

A. A GAIN SS;

B. A criminogenic risk needs screening tool; and

C. Any other approved alcohol-drug screening tool.

The results and explanation of the screening tools administered by the evaluator must be included. (910) Evaluator's impressions and recommendations for education further assessment and/or appropriate ASAM level of care for treatment, including specific reasons for recommendations and the factors considered.

(1011) Recommendations as to the most appropriate treatment program together with the estimated costs.

(41<u>12</u>) Recommendations for suitable alternative treatment programs together with the estimated costs.

 $(12\underline{13})$ Identification of any source used to verify any information provided in the evaluation.

(14) In the event an evaluator submits an evaluation that is not in compliance with this rule, the court may return the evaluation with instructions to prepare an evaluation in compliance with the rule at no additional cost to the defendant. If the evaluator fails to submit an evaluation in compliance with this rule after such an instruction, the court may decline any future evaluations from the evaluator.

IT IS FURTHER ORDERED, that this order and these amendments shall be effective the 1st day of July, 2013.

IT IS FURTHER ORDERED, that the above designation of the striking of words from the Rules by lining through them, and the designation of the addition of new portions of the Rules by underlining such new portion is for the purposes of information only as amended, and NO OTHER AMENDMENTS ARE INTENDED. The lining through and underlining shall not be considered a part of the permanent Misdemeanor Criminal Rules.

IT IS FURTHER ORDERED, that the Clerk of the Court shall cause notice of this Order to be published in one issue of *The Advocate*.

DATED this 25 day of January, 2013.

By Order of the Supreme Court

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Roger S. Burdick, Chief Justice

ATTEST: Stephen Keingn Clerk

I, Stephen W. Kenyon, Clerk of the Supreme Court of the State of Idaho, do hereby certify that the above is a true and correct copy of the Order entered in the above entitled cause and now on record in my office.

WITNESS my hand and the Seal of this Court 1-23-13

STEPHEN W. KENYON

_Clerk

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Approved DUI Evaluation Screening Instruments

Effective July 1, 2013

Idaho Misdemeanor Criminal Rule 9.4 requires the use of at least three (3) screening instruments approved by the Department of Health and Welfare. The GAIN SS and a criminogenic risk needs screening tool are required screening instruments for all evaluations and represent two (2) of the required three (3) screening instruments. Evaluators are responsible for the costs of obtaining, training, administration, and interpretation of screening instruments. The Department can assist with sources to obtain instruments when noted below. Reports or any other printed materials produced by these instruments may be included in the evaluation. However, the materials **cannot replace or substitute the Face Sheet or Evaluation Report** in the required format. The approved instruments in no particular order are:

1. Addiction Severity Index (ASI)

Source: http://www.tresearch.org/ASI.htm.

Notes: For assistance with the Addiction Severity Index please contact ASI Helpdesk or call the ASI Help line: 1-

800-238-2433

2. Michigan Alcoholism Screening Test (MAST)

Source: http://www.measurementexperts.org/instrument/instrument_reviews.asp?detail=23

3. CAGE

Source: http://pubs.niaaa.nih.gov/publications/inscage.htm

Notes: This is a simple and brief screening instrument with alcoholism as the primary domain to predict alcohol dependence/abuse problems. This tool is free of charge to use with simple scoring

instructions.

4. DSM-IV

Source: http://allpsych.com/disorders/dsm.html

5. Mortimer-Filkins Questionnaire with Interview

Source: Currently researching online sources, etc.

6. Substance Abuse Life Circumstances Evaluation (SALCE)

Source: http://www.adeincorp.com/Pricing.htm

Notes: This tool requires a small start-up cost and evaluators are charged a fee for each evaluation

completed using the software.

7. Substance Use Disorders Diagnostic Schedule (SUDDS)

Source: http://www.evinceassessment.com/product_sudds.html

Phone: 1-888-889-8866

8. Driver Risk Inventory - II

Source: http://www.bdsltd.com/

Behavior Data Systems PO Box 44256 Phoenix, AZ 85064-4256 Ph. 602-234-3506

9. Research Institute on Addictions Self-Inventory (RIASI)

Source: Please email Michael Bartlett @ <u>bartletm@dhw.idaho.gov</u> for copies of the tool and training manual.

Notes: Strong measure of the need for further assessment and measuring severity of alcohol dependence/abuse issues. Can be completed and scored in 15 minutes. The tool is available in both English and Spanish.

10. Global Appraisal of Individual Needs, Short Screener (GAIN SS)

Source: http://www.gaincc.org/GAINSS

11. Substance Abuse Subtle Screening Inventory (SASSI)

Source: http://www.sassi.com/sassi/index.shtml

Phone: 800-726-0526

Revised 5/8/2013

Criminogenic Risk Need Screening Tools

1. LSI-R Screening Version (LSI-R SV)

Source: http://www.mhs.com/product.aspx?gr=saf&prod=lsi-rs&id=overview

Notes: 8 item, interview driven brief screening tool for risk to recidivate. This tool requires training and certification to administer. It can be completed in 15 minutes and costs approximately \$3.00 per test.

2. Proxy Risk Triage Screener

Source: http://www.j-satresources.com/Toolkit/Adult/0d79bac6-6818-4ac3-bec9-5e51890358a6

Notes: 3 item risk to recidivate screener. No cost for the instrument or any formal training or certification required. This screener can be completed in 5 minutes.

DUI Evaluation Reporting Form

This form is required as the standardized reporting format for DUI evaluations. Each reporting component must be completed fully as required by M.C.R. 9.4. If the reporting component is not applicable, indicate in the provided space with, "N/A".

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Court and case title:			Case	Number:		
Sentencing Date/Time:		Sentencing Judge:				
Defendant:		SSN/DL#:				
Address:						
Aliases:			DOB:		 .	
Date of Evaluation:				M F		
Marital Status:				hone:		
Repository/ISP Bureau of Crin residence history or any other	ninal Identification name based cl r factor), the evaluator shall make	neck. If evaluator reasonable effort	has reason to be ts to verify crimin ate in the table be	ieve the defendant has al history in that jurisdi	by the evaluator through the Idaho Su a criminal history outside of Idaho (b iction. If more space is needed, please the defendant's criminal history as Ap BAC/Refusal	ased on defendant's e attach additional
<u>pute</u>	Loudion	/ HTCSS/ GHAIR	<u>-</u>		, , , , , , , , , , , , , , , , , , , 	
		 				
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	Tests. Evaluations must indicate y of the incident report as Append			it results for present ca	se verified by the evaluator through t	he law enforcement
Urinalysis:			····-			
Areas of life affected:			l			
Family:			Employment/	Educational:		
Social:			Health:			
Financial:	***************************************		Legal:			
interview and recommend	dations for treatment. Please ioning and are designed to ide	note that risk/	– need screening	s are not a compreh	on the Risk/Needs Matrix and recensive survey of mitigating and a laressed by programing in order to High/Medium Lower Risk	ggravating factors
DUI Evaluator's Name:			Address:			
			Telephone:			

Evaluation Report

(1)	where drugs or al through the idaho evaluator has rea residence history	cohol were a factor. The doposition of the control of the court Data Reposition to believe the defendation or any other factor), the expension of the court of th	oi related offenses or charge lefendant's Idaho criminal hository/ISP Bureau of Crimin nt has a criminal history ou valuator shall make reasona lease attach additional info	nistory must be verified by nal Identification name bas Itside of Idaho (based on de able efforts to verify crimin	the evaluator ed check. If efendant's al history in
(2)	List the defendan	t's blood alcohol content o	r refusals for any drug or al	cohol related incidents.	
(3)	List any informati	on of the defendant's drive	er license record.		
(4)	·		ucation or treatment and w	hether the program was co Complete/Incomplete	mpleted.
Progra	IFTI	Start Date	End Date	Complete/mcomplete	

(5) Identification of primary substances of abuse or dependency to include listings of primary, secondary or other drugs if appropriate and indications of defendant's history of I.V. drug use.

Drug	Abuse/Dependency	Method of Use	Date of Last Use
Primary:			
Secondary:			
Other:			
Other:			

(6)	Defendant's version of the current incident.

(7)	Defendant's self-assessment of substance use.
: : :	

problems within the defendant's major life areas, including (Evaluator may attach a separate page (needed):
Family (Indicate whether any of the defendant's immediate family member abuses or is dependent on
alcohol or drugs):
Social (Indicate whether any if the defendant's associations abuse or are dependent on alcohol or drugs.
Further, indicate if defendant's friends or associates are engaged in criminal conduct):
Financial (Include monthly net income):
Employment/Education (Indicate current place of employment and any educational/training programs
currently enrolled. Evaluator shall verify employment/enrollment claims made by the defendant):
Health (Including and behavioral health concerns):
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Legal (Indicate if the defendant is under any current court ordered supervision or has any pending
Legal (Indicate if the defendant is under any current court ordered supervision or has any pending charges in another court; defendant's opinions on current or past legal involvement should be noted):

Evaluator's description of the defendant's use of alcohol/drugs and the extent to which they have contributed to

(8)

approved by the Depar	tment of Health and Welfare is mand	ether with the scores. The use of screening t datory and shall include a GAIN SS, a crimino rug screening tool. The results and explana
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Evaluator's impressions	and recommendations for treatmen	nt needs, including specific reasons for
recommendations and	the factors considered (attach additi	onal page(s) as needed).
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Treatment Program	Estimated Cost	Estimated Time to Complete
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Recommendations for s	uitable alternative treatment progra	nms together with the estimated costs.
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