

# Core Function #4 Assessment

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## **IC & RC defines ASSESSMENT as:**

**The procedures by which a counselor/program identifies and evaluates an individual's strengths, weaknesses, problems, and needs for the development of the treatment plan.**

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TAP 21 includes the core function of Assessment in Domain I –  
CLINICAL EVALUATION

Tap 21 Definition of Clinical Evaluation: Assessment is the ongoing process through which the counselor collaborates with the client and others to gather and interpret information necessary for planning treatment and evaluating client progress.

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Although the *ASSESSMENT* process typically follows *ORIENTATION* and comes before *TREATMENT PLANNING*, the assessment process truly begins with the first contact during screening and is ongoing throughout the entire treatment experience.

Once the full formal assessment is complete, and the clients strengths, weaknesses, problems, and needs are identified and evaluated, the counselor then develops a treatment plan.

Why conduct an assessment of a client? So that an accurate diagnosis can be established which leads to the “prescription” of appropriate treatment. Providing a valid assessment is the basis for a sound treatment program and can be reasonably compared to a physician making a valid diagnosis.

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Agencies are required to document in each case how the ASSESSMENT is conducted. All tests, notes, and written and/or online assessments become part of the client's paper and/or electronic record.

Each agency usually details the areas that must be assessed. A bio-psycho-social assessment is often a term used to describe this main assessment.

The counselor should assess a client in all "major" life areas:  
*(substance abuse history, psychological history and current functioning, educational history, vocational history, financial history, legal history, social history, spirituality, and physical health history including current medications and treatment history)*

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Most of this "history" is gathered using interviewing techniques and completion of various prepared forms/ tools.

The counselor must determine which assessment tool/ form is most appropriate for the client's individual situation.

Here are some examples of forms commonly used:

- SASSI online *(Substance Abuse Subtle Screening Inventory)*
  - MAST *(Michigan Alcohol Screening Test)*
    - ASI *(Addiction Severity Index)*
  - COWS *(Clinical Opiate Withdrawal Scale)*
- CIWA-Ar *(Clinical Institute Withdrawal Assessment of Alcohol Scale, Revised)*
  - PAWSS *(Prediction of Alcohol Withdrawal Severity Scale)*
    - Herdman Assessment Form
    - Private Agencies Created Form

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All of these forms shown on the previous slide can be accessed and printed out below this ASSESSMENT presentation in our online school.

SASSI assessments are accessible online at [sassi.com](http://sassi.com) . A certified or licensed professional may purchase electronic access or paper copies of the SASSI assessment tool from the website.

SASSI assessments are approximately \$12.50 for each electronic assessment. The counselor is assigned login credentials and will input each clients information into the computer as each individual assessment occurs. Using your computer, the counselor asks each question exactly as worded to the client, and inputs their answers. The program will automatically generate a report, making it much easier for the counselor to formulate written professional assessment results and a full evaluation report.

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### From the Client's Point of View

Most clients expect that an assessment will occur as part of the program. They typically expect professional staff to ask them a lot of diagnostic questions. They will likely feel uncomfortable with questions not relating to substance abuse such as their family, relationship, or sexual history. Being skillful in Motivational Interviewing techniques greatly facilitates the counselor gaining meaningful assessment data.

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## From the Counselor's Point of View

In the ASSESSMENT process, empathy for the client's perspective is critical for establishing rapport, engagement, and a therapeutic relationship. Clients will all behave somewhat differently. Some will be open and honest; others defensive and in denial. Some clients will be in such distress that their only thoughts are related to making their pain stop. Others in less distress will wish the counseling to begin, not being aware of the need for a complete assessment of their life. It is the competent counselor's responsibility to explain the need for assessment, what will be done in conducting the assessment, and what the counselor as well as the client can learn as a result of the assessment. The initial result of the assessment will be a treatment "prescription" (i.e. the treatment plan). Only if a client is presenting in a crisis should the assessment process be deferred.

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ASSESSMENT includes both interview techniques for both the client and significant others, and written questionnaires and tests. The assessment should not be a "pen and paper" exercise alone. Sometimes time can be saved by having a client independently complete various questionnaires or tests ahead of time. A counselor is trained to understand and evaluate a client's difficulty in being truthful and forthright. In the actual interview, the counselor is more likely to detect the client's denial system and rationalization and be able to roll with client resistance.

Accurate assessment takes time. An entire assessment is not likely to be completed in one 50 minute session. Sometimes, it can take 2 or 3 sessions, and then repeated again as changes are made to the treatment plan (or prescription) as new info is obtained and evaluated.

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Some counselors begin CLIENT EDUCATION with ASSESSMENT, while other counselors begin the COUNSELING process during the ASSESSMENT process.

A counselor should display appropriate empathy along with the communication skills to facilitate the establishment of rapport. However, **education** and **counseling** are more appropriately performed after the counselor evaluates the client comprehensively and has a focus or plan for treatment.

Remember, providing **education** and doing **counseling** before a complete **assessment** is much like a medical doctor giving out educational material or prescribing medication prior to making the final diagnosis.

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### Global Criteria:

12. Explain to the client the rationale for the use of assessment techniques in order to facilitate understanding.

*To be competent in this criterion, a counselor would need to:*

- *Understand and communicate the rationale for the various aspects of the assessment to the client.*

*In the explanation, the counselor must answer clearly:*

- \*What is assessment?*
- \*How are we going to go about doing the assessment?*
- \*How long will it take?*
- \*What will happen after we do the assessment?*
- \*Who will have access to the assessment results?*

*Understanding and implementing this criterion "sets the stage" for all aspects of the assessment process.*

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### Global Criteria:

13. Gather relevant history from the client including but not limited to alcohol and other drug abuse using appropriate interview techniques.

*To be competent in this criterion, a counselor would need to:*

- *Be skillful in basic interview techniques and in using the clinical interview as a procedure to identify a client's strengths, weaknesses, problems, and needs.*

*The counselor interviews and gathers information from the client about alcohol and drug use and then also gathers info about other bio-psycho-social aspects of the client with specific attention to how alcohol or drug use has impacted those areas of the client's life.*

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### Global Criteria:

14. Identify methods and procedures for obtaining corroborative information from significant secondary sources regarding the client's alcohol and other drug abuse and psychosocial history.

*To be competent in this criterion, a counselor would need to:*

- *be aware of the benefits of obtaining corroborative info and the methods or means for how info is obtained from important secondary sources.*

*The counselor needs to be aware of client confidentiality rights and knowing the procedure for obtaining the info that protects the client's rights.*

*Other collateral info that is frequently available are copies of police reports, copies of CPS case reports, court reports, and possible discharge summaries from other treatment agencies. The type of collateral info will vary depending on the referral source.*

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## Global Criteria:

### 15. Identify and select appropriate assessment tools.

*To be competent in this criterion, a counselor would need to:*

- *be skillful in the selection and use of various assessment tools in order to assess a client.*

*Examples of tools shared previously are:*

- ASI
- HAF
- MAST
- SASSI
- COWS
- PAWSS
- CIWA-Ar

*A competent alcohol and drug abuse counselor needs to have an understanding of assessment tools used to evaluate a client. The counselor should be trained on each tool. A counselor should also have skill in evaluating the results and formulating a report that accurately reflects the results. Following the comprehensive assessment, the counselor is responsible for using assessment results to develop a treatment plan and/or make professional recommendations.*

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## Global Criteria:

### 16. Develop a diagnostic evaluation of the client's substance abuse and any coexisting conditions based on the results of all assessments in order to provide an integrated approach to treatment planning based on the client's strengths, weaknesses, and identified problems and needs.

*To be competent in this criterion, a counselor would need to:*

- *be able to "make sense" of the gathered assessment information.*

*The counselor evaluates the info and relates the info directly or indirectly to the client's presenting problem or problems. The counselor must also be able to relate the client's alcohol or drug abuse problem to any other coexisting conditions.*

*A written report usually consists of a summary of pertinent findings that would show how an individual meets the criteria of DSM-5 or ICD-10 for a particular substance use disorder diagnosis. This becomes the rationale for the diagnosis that leads to the level of care recommendation.*

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### In Conclusion:

The diagnostic evaluation is the starting point for the development of the client's treatment plan. Within the assessment report a counselor specifies a client's strengths and weaknesses in a comprehensive manner so that any member of the treatment team or future referral source would have a clear picture of the client. Detailing the client's problems and needs is necessary in order to design intervention and treatment activities focused on the client's problem or problems.

The final written evaluation report is the single most picture of a counselor's competence. If the report is inconsistent and the conclusions do not make sense, the reputation of the counselor and the agency is negative.