

Assessment and Diagnosis

Client Name _____ Insurance# _____

Date: _____ site: _____

Client age _____ male ___ female ___ other _____

Persons and resources utilized in this assessment: _____

Presenting problem

How are these problems evidenced at?

Home

Cafas score: _____

School

Cafas score _____

Community life

Cafas score _____

How are these problems evidenced in the client's?

Mood & Emotional Stability

Cafas score

Thinking

Cafas score _____

Behavior Toward Others

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Substance use

Cafas score _____

Other life stressors

Cafas score/caregiver _____

Previous attempts to solve problems and their results:

____ therapy _____
____ medication _____
____ by client _____
____ other _____

Desired results of treatment _____

Stage of Change:

by Client

Caregiver

Stage of Change:	by Client	Caregiver
I do not need to make any changes		
I have thought about making some changes		
I am thinking about making changes		
I am making changes		
I have made changes and things are going well		

Risk assessment

Suicidal behavior: yes ____ no ____ Access to weapons: yes ____ no ____

Homicidal behavior: yes ____ no ____ Potentially aggressive pets: yes ____ no ____

Anger management issues: yes ____ no ____ Illegal activities in home: yes ____ no ____

Self-abuse: yes ____ no ____ Family violence: yes ____ no ____

Is client currently at risk of harm toward self or others: yes ____ : _____ or no ____

If yes include an explanation and a safety plan. _____

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Trauma History:

____ physical abuse ____ physical neglect ____ sexual abuse ____ emotional abuse
____ witnessed abuse ____ other traumatic experiences: _____
____ abuse of primary care giver ____ murder of _____ ____ suicide of _____

Strengths and Protective Factors:

____ routines and age appropriate rules such as with food, bed time, curfew etc.
____ secure attachments with primary caregiver, positive peers, pets
____ community supports such as mentors, coaches, religious leaders
____ skills such as reading level and language development
____ care giver consistency and stability
____ extended family support

Diagnosis:

I _____

II _____

III _____

IV _____

V GAF: current _____ highest in past year _____

GARF current _____ highest in past year _____

Recommendations for treatment:

CAFAS total score: _____

Level of care recommendations based on the CAFAS score:

____ 0-30 to qualified health professional (non-SED)
____ 40-70 outpatient services
____ 80-100 outpatient care with additional intensive/supportive services
____ 110-130 intensive, community based services, some may require acute residential
____ 140 + Very intensive services: residential/in-patient

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Case Management criteria 907 KAR 15:040E, 907KAR 15:050E, and 907KAR 15:060E:

Type I: for individuals with Serious Emotional Disability (SED) or Serious Mental Illness (SMI)

The client must have one of the following conditions:

- A. _____ a serious mental illness (SMI) with DSM diagnosis or exhibits significant symptoms for 2 years; or
- B. _____ been hospitalized for mental illness more than once with in the past 2 years and be impaired to function both socially or occupationally or both; or
- C. _____ a severe emotional disability (SED) that was based on the DSM and presents substantial limitation that have persisted for 1 year in at least 2 of the following areas:
 - 1. _____ Self-care
 - 2. _____ Interpersonal relationships
 - 3. _____ Family life
 - 4. _____ Self-direction and education
 - 5. _____ The individual has been removed from the home by DCBS and has been unable to maintain in a stable setting due to a behavioral or emotional disturbance
- D. _____ been judged by a mental health professional to be
 - 1. _____ a high risk for being substantially limited in at least 2 of the areas listed above for 1 year without professional intervention and have
 - 2. _____ not be between the ages of 22 and 64 years while receiving services in an institution for mental diseases; or an inmate in a public institution;

And need assistance with access to:

- A. _____ Housing
- B. _____ Vocational medical social educational or other community services or supports and
 - 1. _____ Have been involved with at least one child welfare agency or criminal justice agency or
 - 2. _____ In the custody of DCBS, or
 - 3. _____ At risk of impatient mental health treatment
 - 4. _____ At risk of out of home placement

Type II: for individuals with co-occurring Mental Health or Substance Use Disorders (SUD) and chronic complex physical health issues

The client must have one of the following conditions:

- A. _____ a serious mental illness (SMI) with DSM diagnosis or exhibits significant symptoms for 2 years; or
- B. _____ been hospitalized for mental illness more than once with in the past 2 years and be impaired to function both socially or occupationally or both; or

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- C. _____ a severe emotional disability (SED) that was based on the DSM and presents substantial limitation that have persisted for 1 year in at least 2 of the following areas:
6. _____ Self-care
 7. _____ Interpersonal relationships
 8. _____ Family life
 9. _____ Self-direction and education
 10. _____ The individual has been removed from the home by DCBS and has been unable to maintain in a stable setting due to a behavioral or emotional disturbance
- D. _____ been judged by a mental health professional to be
1. _____ a high risk for being substantially limited in at least 2 of the areas listed above for 1 year without professional intervention and have
 2. _____ a chronic complex physical health issue;
 3. _____ not be between the ages of 22 and 64 years while receiving services in an institution for mental diseases; or an inmate in a public institution;

And need assistance with access to:

- A. _____ Housing
- B. _____ Vocational medical social educational or other community services or supports and
- a. _____ Have been involved with at least one child welfare agency or criminal justice agency or
 - b. _____ In the custody of DCBS, or
 - c. _____ At risk of inpatient mental health treatment
 - d. _____ At risk of out of home placement

Type III: for individuals with Substance Use Disorder (SUD)

The client must have one of the following conditions:

- A. _____ shall have a Substance Use Disorder (SUD) or a co-occurring SUD and a DSM diagnosis; and
- B. _____ have lack of access to recovery supports; or need assistance with access to housing, vocational, medical, social, educational, or other community services and supports; or involvement with one or more child welfare or criminal justice agencies but not be an inmate of a public institution;
- C. _____ not be between the ages of 22 and 64 years while receiving services in an institution for mental diseases;
- D. _____ or not be an inmate of a public institution;

This client _____ meet the criteria for targeted case management services under the 907 KAR 15:040E, 15:060 E, and 15:060E

Signature and credentials of provider _____ Date _____

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(SED) Seriously Emotionally Disabled Criteria KRS 200.501 to 200.509

A child (0 to 18 years) with a severe emotional disability means a child with a clinically significant disorder of thought, mood, perception, orientation, memory or behavior that is listed in the current edition of the American Psychiatric Associations Diagnostic and Statistical Manual of Mental Disorders and that:

- a. _____ presents substantial limitation that have persisted for a least one (1) year or
- b. _____ are judged by a mental health professional to be a high risk of continuing for one (1) year without professional intervention in at least two (2) of the following (5) areas:
1. _____ self-care, defined as the ability to provide, sustain, and protect his or herself at a level appropriate to his or her age
 2. _____ interpersonal relationships, defined as the ability to build and maintain satisfactory relationships with peers and adults
 3. _____ family life , defined as the capacity to live in a family or family type environment
 4. _____ self-direction, defined as the child's ability to control his or her behavior and to make decision in a manner appropriate to his or her age
 5. _____ education, defined as the ability to learn social and intellectual skills from teachers in available educational settings, or
- c. _____ Is a Kentucky resident and is receiving residential treatment for emotional disability through the interstate compact; or
- d. _____ The Department for Community Based Services has removed the child from the child's home and has been unable to maintain the child in a stable setting due to
1. _____ behavioral or emotional disturbance; or
 2. _____ is a person under twenty-one (21) years of age meeting the criteria of paragraph (a) of this subsection and who was receiving services prior to age eighteen (18) that must be continued for therapeutic benefit.

_____ Yes, This client does meets the KRS criteria for a severe emotional disability.

_____ No, This client does not meet the KRS criteria for a severe emotional disability.

Signature and credentials of the provider _____ Date _____

Client Name _____ **#** _____

Phone/Text/Email Contact Log

Date _____ Time _____ am to pm _____ am pm _____

Type of contact _____ Purpose of contact _____

Person Contacted _____ Role _____

Content

Date _____ Time _____ am _____ pm _____ to _____ am _____ pm _____

Type of contact _____ Purpose of contact _____

Person Contacted _____ Role _____

Content

Date _____ Time _____ am _____ pm _____ to _____ am _____ pm _____

Type of contact _____ Purpose of contact _____

Person Contacted _____ Role _____

Content

Date _____ Time _____ am _____ pm _____ to _____ am _____ pm _____

Type of contact _____ Purpose of contact _____

Person Contacted _____ Role _____

Content

Date _____ Time _____ am _____ pm _____ to _____ am _____ pm _____

Type of contact _____ Purpose of contact _____

Person Contacted _____ Role _____

Content

Provider Signature and Credentials _____ Date _____