Assessment and Diagnosis Insurance#_____ **Client Name** _____ Date: ______ site: _____ clinician: _____ 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? **Emotional Stability** Cafas score ____ **Thoughts** Cafas score _____ **Health and routines**

Assessment and Diagnosis			
Client Name	e e e e e e e e e e e e e e e e e e e		
Substance use			
Cofog googs			
Cafas score Other life stressors			
other me stressors			
Cafas score/caregiver			
Previous attempts to solve problems and their			
therapy			
medication by client			
other			
Desired results of treatment			
C. C. C. C.		l Clina	G
Stage of Change: I do not need to make any changes		by Client	Caregiver
T Abi-bi ab t bi ab			
I am making changes			
I have made changes and things are going we	 ell		
	· 		
Risk assessment			
C-2-2-11-11-1			
Suicidal behavior: yesno Acc	cess to weapons: yes _	no	
Homicidal behavior: yesno	Potentially aggr	ressive pets: yes _	no
· —— ——	. 66	1 ,	
Anger management issues: yesno	Illegal activities	s in home: yes	no
Calf abuses was	TO *1		
Self-abuse: yesno	Family	violence: yes	no
Other high risk behavior toward self or other	s: yes:		or no
If yes include an explanation and a safety	plan with this asse	ssment	

Assessment and Diagnosis Client Name	Insurance#
Trauma History:	
physical abuse pl	hysical neglect sexual abuse emotional abuse her traumatic experiences: suicide of
Strengths and Protective Factors:	
routines and age appropr	iate rules such as with food, bed time, curfew etc.
secure attachments with p	rimary caregiver, positive peers, pets
community supports sucl	h as mentors, coaches, religious leaders
skills such as reading leve	el and language development
care giver consistency ar	nd stability
extended family support	
Diagnosis:	
I	
П	
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 of	on the CAFAS score:
0-30 to qualified health pr	ofessional (non-SED)
40-70 outpatient services	
80-100 outpatient care w	ith additional intensive/supportive services
110-130 intensive, comm	unity based services, some may require acute residential
140 + Very intensive serv	vices: residential/in-patient

Assessment and Diagnosis Insurance# Client Name Does this client meet the criteria for SED? yes _____ no____ Does this client meet the criteria for case management services? yes _____ no ____ Provider summary and recommendations for care: Recommendations for referrals: ____ medication therapy _____ ____ case management services _____ substance abuse _____ group therapy _____ _____ self-help groups ______ _____ psychological testing_____ ____ art therapy_____

	ent and Diagnosis ame Insurance#
Case Mana	agement criteria 907 KAR 15:040E, 907KAR 15:050E, and 907KAR 15:060E:
Type I: fo	or individuals with Serious Emotional Disability (SED) or Serious Mental Illness
The client	must have one of the following conditions:
	a serious mental illness (SMI) with DSM diagnosis or exhibits significant symptoms for 2 years; or been hospitalized for mental illness more than once with in the past 2 years and be
C.	impaired to function both socially or occupationally or both; or 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: Self-care
	2 Interpersonal relationships 3 Family life 4 Self-direction and education
D.	 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 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 no	eed assistance with access to:
	HousingVocational medical social educational or other community services or supports and 1Have been involved with at least one child welfare agency or criminal justice agency or
	 In the custody of DCBS, or At risk of impatient mental health treatment At risk of out of home placement
	or individuals with co-occurring Mental Health or Substance Use Disorders I chronic complex physical health issues
The cli	ent must have one of the following conditions:
	a serious mental illness (SMI) with DSM diagnosis or exhibits significant symptoms for 2 years; or 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

	ent and Diagnosis ame Insurance#
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 relationships8 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
	2a 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
	Vocational medical social educational or other community services or supports and
	aHave been involved with at least one child welfare agency or criminal justice
	agency or
	bIn the custody of DCBS, or
	cAt risk of impatient mental health treatment
	d At risk of out of home placement
Type III:	for individuals with Substance Use Disorder (SUD)
The clien	t 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
D	for mental diseases;
D.	or not be an inmate of a public institution;
This client: E, and 15:0	meets the criteria for targeted case management services under the 907 KAR 15:040E, 15:060 60E

Signature and credentials of provider______Date____

	and Diagnosis e Insurance#
(SED) Seriously	y Emotionally Disabled Criteria KRS 200.501 to 200.509
disorder of thoug	years) with a severe emotional disability means a child with a clinically significant ght, mood, perception, orientation, memory or behavior that is listed in the current edition Psychiatric Associations Diagnostic and Statistical Manual of Mental Disorders and that:
a presents	s substantial limitation that have persisted for a least one (1) year or
	ged by a mental health professional to be a high risk of continuing for one (1) year without ervention in at least two (2) of the following (5) areas:
	self-care, defined as the ability to provide, sustain, and protect his or herself at a level late to his or her age
relations 31 4s	interpersonal relationships, defined as the ability to build and maintain satisfactory ships with peers and adults family life, defined as the capacity to live in a family or family type environment self-direction, defined as the child's ability to control his or her behavior and to make
5	education, defined as the ability to learn social and intellectual skills from teachers in e educational settings, or
c Is a Kehe interstate cor	entucky resident and is receiving residential treatment for emotional disability through mpact; or
	Department for Community Based Services has removed the child from the child's home able to maintain the child in a stable setting due to
1	_ behavioral or emotional disturbance; or
	_ is a person under twenty-one (21) years of age meeting the criteria of paragraph (a) of and who was receiving services prior to age eighteen (18) that must be continued for fit.
Yes, Th	his client does meets the KRS criteria for a severe emotional disability.
No, Thi	s client does not meet the KRS criteria for a severe emotional disability.

Signature and credentials of the provider ______Date _____