

DUI EVALUATIONS

~ RICHARD J. KRAJEWSKI, MA, LCPC

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Welcome and housekeeping

CONTACT INFORMATION:

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- Only one person speaking at a time – no sidebars
- Be respectful and professional.
- Phones on vibrate / Mute your screens.
- Stay on point.
- Breaks.
- Enjoy academic freedom and feel free to ask me anything.
- **HAVE FUN!!!**

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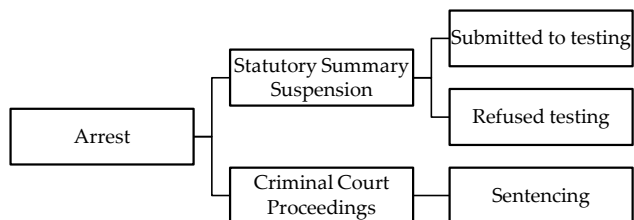
MORNING AGENDA:

- The client's legal situation
- The purpose of DUI Evaluations
- Using the eDSRS—What makes a good evaluation?



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The DUI arrest starts two processes...



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Public property arrests result in a *Notice of Summary Suspension* (also called "Law Enforcement Sworn Report")

Suspension periods:

- 1st or subsequent DUI > 5 years:
 - 6 months with testing.
 - 12 months if refused.
- If 2nd DUI within 5 years of 1st:
 - 12 months with testing.
 - 3 years if refused.

LAW ENFORCEMENT SWORN REPORT

Circuit Court, DuPage County, 18th Municipal District

Case Number: 6595

11-401 Citation No. [redacted] 11-401 Citation No. [redacted]

Name: [redacted] Driver's License Number: [redacted]

CDL holder: ☐ ☒ ☐

City & State: Big Lake, IL 60511

Arrest Date: 12/22/2022

Refusal or Test Date: 12/22/2022

Signature: [redacted] ID Number: 245

Law Enforcement Agency: 161771

Police Officer: SEND TO COURT OF VENUE

August 2018 - DRD DC 33.29

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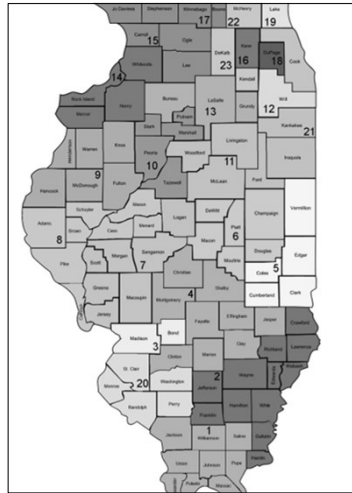
August 2018 - DRD DC 33.29

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Illinois Judicial Circuits

Control of the initial evaluation:

- Cook County - CCSS
- DuPage County – DPC Probation
- Lake County - NICASA
- McHenry County – depends...
- Everywhere else in Illinois – any DHS *intervention* licensed agency.



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The purpose of a DUI evaluation...

"...is to conduct an initial screening to obtain significant and relevant information from a DUI offender about the nature and extent of their AOD use in order to identify the offender's risk to public safety, and recommend an initial intervention to the offender, the Circuit Court of Venue, or the Secretary of State."

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DUI evaluations **are not** an ASAM assessment.

- DUI evaluations determine **RISK**. You are examining the extent of the client's AOD use and determining risk to self, risk to public safety, and risk to recidivate.
- ASAM assessments are more comprehensive and determine the SUD diagnosis and appropriate **LEVEL OF CARE**.

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Please consider another kind of risk factor...

Client Credibility as a risk factor.

- When depends on the Stakeholder (i.e. Evaluator, SOS, Court)
 - During the eval:
 - What they say and how they say it.
 - Taking responsibility or blaming?
 - Open to disclosure?
 - Perceptual defensiveness?
 - Deliberately deceptive?

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The evaluation from a Judicial point of view...



Helps determine the type and length of judicial supervision and risk to the community.

- > Court Supervision
- > Conditional Discharge
- > Conviction & Probation
- > Jail / Prison



Determine initial education and/or intervention needs.



Determine the need for comprehensive assessment.

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Primary objectives of screening & assessment

- 1) To provide an opportunity for clients to disclose their AOD use history, or "Tell their story."
- 2) To give an opportunity to other sources to tell the story of how they interpret the client's AOD history.
- 3) To determine the level of defensiveness based on the discrepancy between the client's self-report and the other reports.
- 4) Estimate the true or valid condition of the client relative to their past and recent AOD use, level of mental health problems, and motivation for change and treatment.

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Best practices: Counseling 101

Establishing rapport and trust with the client will help them feel they can be honest during this process. Treating the client with respect and dignity, even when their use has caused severe difficulties for themselves and their family, is essential. Emphasizing you are asking these, sometimes hard, questions is to help them, rather than judge them. This will result in a more accurate assessment.



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Best Practices: *Motivational Interviewing*

- Non-verbal skills (body language, eye contact)
- Ask open-ended questions
- Use reflective listening (including summary statements)
- Expressing empathy, when appropriate.
- Resolving discrepancies (ask for clarity)
- Elicit change talk (identify incentives or barriers to change)
- Roll with resistant (avoid power struggles)
- Provide affirmations, when appropriate
- Maintain professional boundaries

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SUPR required documentation

(a must have in every DUI evaluation file!)

- Fee schedule
- Informed Consent
- Client's Rights Statement
- Consent for Service
- Referral List Verification
- * Law Enforcement Sworn Report *
(BAC, chemical test results or Refusal)
- Court Purpose Driving Abstract
- Proof of income – if you are seeking reimbursement from the DDDPF because client is indigent
- Documentation worksheets – CYA
- Objective test results
- Case notes
- Signatures, credentials, and dates.

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Other documentation

(not SUPR required, but super useful)

- All traffic tickets from arrest. Why?
- Any Court orders – know your Circuit standards...
 - Pre-trial “Conditions of Bond”
 - “No alcohol” orders
 - U.A.s, including Ethyl Glucuronide (EtG)
 - Secure Continuous Remote Alcohol Monitoring (SCRAM)
 - Tracking Realtime Accountability & Compliance (TRAC)

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Three phases of a DUI evaluation:

I. **The Interview** – a comprehensive chronological history of AOD use from first use to present, including alcohol, Rx and non-Rx drugs, intoxicating compounds and illegal drugs.

II. The Objective Test

- ~~Mortimer/Filkins~~
- Drivers Risk Inventory
- Adult Substance Use & Driving Survey – Revised for Illinois

III. **Collateral Interview** (*strongly encouraged, but not required for a DUI eval*).

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Risk classifications: the “minimums” and the correct language.

LANGUAGE IS IMPORTANT.

WHAT IT IS...

- Minimal Risk (10)
- Moderate Risk (10/12)
- Significant Risk (10/20)
- High Risk (75)

WHAT IT ISN'T...

- Level I – Minimal Risk
- Level II – Moderate Risk
- Level II – Significant Risk
- Level III – High Risk

What's the difference?

Why do you need to know it?

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Which Risk classification is most common?

Minimum


Moderate


Significant

High

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The electronic DUI Service Reporting System (eDSRS)





Electronic DUI Service Reporting System – SUPR website

Turn to page 4 of the eDSRS manual, OR use the documentation work sheets

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DHS
Department of Health Services

Unified Health Systems

User ID:

Password:

Illinois Statutes and DHS policy prohibit unauthorized access or disclosure of DHS client, employee or any other confidential information. Any unauthorized use of DHS computers or disclosure of confidential client or employee information may be cause for disciplinary action, including termination of employment and/or criminal prosecution.

Do not attempt to login unless you are an authorized user.

By logging into the Unified Health System, using your assigned user ID, you acknowledge that you are an authorized user and agree to abide by all rules and regulations of the Unified Health System. It is your responsibility to ensure that your user ID and password are kept private. Do NOT share your login information with anyone. No representative of DHS will ever ask for your password.

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DHS
Department of Health Services

Unified Health Systems

eDSRS Version: 2.2.0
User: duitst01

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DUI Service Reporting System

User Name: Credentials

Evaluations (Active)			
Arrest Date/Time %	Offender Name %	County %	Evaluator %
No Active Evaluations found...			

Evaluations (Completed)				
Arrest Date/Time %	Offender Name %	County %	Evaluator %	Unlock %
No Completed Evaluations found...				
Displaying Completed Evaluations for preceding: 76 Week <input type="button" value="Display"/>				

Risk Educations (Active)			
Arrest Date %	Offender Name %	County %	Evaluator %
No Active Risk Education entries found...			

Risk Educations (Completed)				
Arrest Date %	Offender Name %	County %	Evaluator %	Unlock %
No Completed Risk Education entries found...				
Displaying Completed Risk Educations for preceding: 76 Week <input type="button" value="Display"/>				

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Offender Search

Basic Search Criteria

Name
 Last Name: Search Type:
 First Name:

Driver's License Number
 License Number:

Additional Search Criteria

Date of Birth: Match By:
 Gender:

City: State:
 Zip Code: County:

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Unified Health Systems
 eDSRS Version: 5.0.0
 User: richard.krajewski@dupageco.org

HOME Offender Search Provider Reports Billing Resources Help Logout
 DUI Service Reporting System

Basic Search Criteria

Name
 Last Name: Search Type:
 First Name:

Driver's License Number
 License Number:

Additional Search Criteria

Date of Birth: Match By:
 Gender:

City: State:
 Zip Code: County:

Search Results
 No Results Found.

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Offender Search

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Add Offender Required Fields

Legal Name
 Last Name: * [Example] Suffix: [v]
 First Name: * [Training] Middle Init: [v]

Driver's License Number(s)
 IL Driver's License Status
☒ Driver's License available ☐ Out of state record does not exist at this time
☐ Undocumented Immigrant ☐ Other (Alternate License and Description below)

IL License Number or State ID: * [] Twin Indicator: ☐

Other License Number: [] State: [v]

Address
 Street Address: * []
 City: * [] State: * [Illinois] Zip Code: * [] - []
 Country: * [v] Country: * [United States]

Phone Numbers
 Home Phone: [] Work Phone: [] Ext: [] Cellular Phone: []

Additional Demographics
 Date of Birth: * [] Gender: * [v] Marital Status: * [v]
 Race: *
☐ American Indian/Alaskan Native ☐ Native Hawaiian or Other Pacific Islander
☐ Asian ☐ White
☐ Black or African American ☐ Unknown
 Hispanic Origin: * [v] Primary Language: * [v]
 Religion: * [v] Interpreter Services: * [v]
 Education Level: * [v]
 Employment Status: * [v]
 Physical or Mental Disability: * [v]
 Occupation: * [v] Citizenship: * [v]
☐ Annual Income NOT Disclosed! Annual Income: * [v]
 Number of Dependents (Including Self): * [v]

Emergency Contact
 Last Name: * [v] First Name: * [v]
 Phone: [v]

Save Clear Cancel

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HOME Offender Search Offender(Orientation) Organization Reports Billing Resources Help Logout

Legal Name
 Last Name: Orientation
 First Name: eDSRS Middle Init:
 Edit

Address
 Street Address: 123 E. Main St.
 City: Somewhere State: Illinois
 Zip Code: 60000 County: DuPage
 Edit

Phones
 Home Phone:
 Work Phone: Ext:
 Cellular Phone: (630) 555-5555
 Edit

Demographics
 IL License # or State ID: 012345678910
 Other License #:
 Birth Date: 07/30/1972 Gender: Male
 Race(s)
 White
 Hispanic Origin: Not Hispanic
 Primary Language: English
 Education Level: Master's degree or higher
 Employment Status: Employed full time (unsubsidized)
 Annual Income: 100000
 Number of Dependents (Including Self): 2
 View Full Demographics

Evaluation
 Arrest Date/Time County Status Unlock
 No Evaluations found...
 Site: [v] New

Risk Education
 Arrest Date County Disposition Unlock
 No Risk Education entries found...
 No Sites licensed for Risk Educations!

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Referral Source * * Required Fields

Beginning Date of Evaluation: (mm/dd/ccyy) *

Date of Arrest: (mm/dd/ccyy) * Day of Arrest:

Time of Arrest: (hh:mm am/pm) * :

County of Arrest: *

Blood-Alcohol Concentration (BAC) at Time of Arrest: * (Enter "RT" if Refused Test or "NA" for Not Applicable)

Was Blood and/or Urine Testing performed? If yes, please provide results. * ☐ Yes ☐ No

Specify up to five mood altering substances (alcohol/drugs) consumed which led to this DUI arrest (in order of most to least).

1. (Most consumed)

2.

3.

4.

5. (Least consumed)

Arrest Substance Narrative

Specify the amount and time frame in which the alcohol and/or drugs were consumed which led to this DUI arrest.

(500 characters max)
You have characters left.

Does the Blood-Alcohol Concentration (BAC) for the current arrest correlate with the offender's reported consumption? If no, please explain.

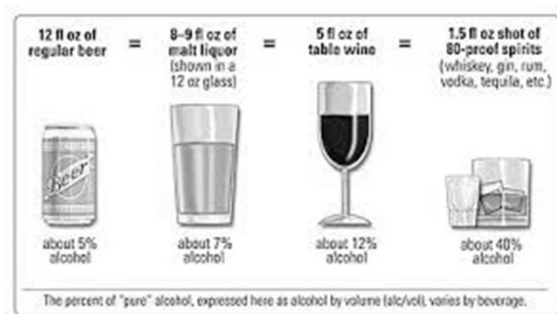
* ☐ Yes ☐ No ☐ Not Applicable

Save Cancel

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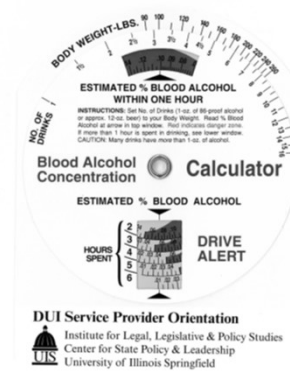
What is a standard drink?

- Alcohol is common in our culture. It's important to define when drinking is excessive or considered risky. Using standard drink definitions can help you gain a more objective assessment of the amounts your client is drinking.
- NIAAA defines a standard drink as:



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Using the BAC wheel



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Is it Social, Moderate, Heavy, or Binge use?

SOCIAL DRINKING

- Social drinking is defined as 1-2x/week, 1-2 standard drinks per occasion.

MODERATE DRINKING

- Moderate drinking is defined as up to 1 standard drink per day for women, and up to 2 standard drinks per day for men.

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NIAAA defines the following:

HEAVY OR RISKY DRINKING

- For women: 8 or more drinks/week
- For Men: 15 or more drinks/week
- Any use under age 21
- Any use while pregnant

Due to the fact that health risks increase significantly at these amounts.

BINGE DRINKING

Large quantities over a short time. This puts people at a higher risk of negative consequences.

- 4 or more drinks in 1 sitting for women
- 5 or more drinks in 1 sitting for men

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The screenshot shows the 'Evaluation' form within the 'Unified Health Systems' application. The form has a header bar with the 'UHS' logo and navigation links: HOME, Offender Search, Offender(Orientation), Organization, Reports, Billing, Resources, Help, and Logout. The form itself is titled 'Evaluation' and contains several input fields, each with a status icon on the right:


Evaluation	
Current DUI Arrest Information	✓
Alcohol and Drug Related Legal and Driving History	*
Significant Alcohol/Drug Use History	*
Objective Test Information	*
Criteria For Substance Use Disorder	*
Offender Behavior	*
Classification/Minimal Required Intervention	*
Disposition	*

Below the form fields, there are two status indicators:

- ✓ Required fields have been entered
- * Required fields have not been entered

A note is displayed: "Note: Your session will be terminated if no activity is detected between your PC and the Web Server for a period exceeding 30 minutes. If an Evaluation segment requires lengthy narratives which require more than 30 minutes to complete, we suggest that the segment initially be saved with minimal data." At the bottom of the form, there are two buttons: 'Preview Evaluation Form' and 'Cancel'.

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HOMEOffender SearchOffender(Orientation)Organization ▼Reports ▼Billing ▼Resources ▼Help ▼Logout


Does the offender have any alcohol and drug related driving information to be reported, any discrepancies between information reported by the offender and information on the driving record?

☐ Yes ☒ No

CAUTION: DO NOT INCLUDE INFORMATION REPORTED IN THE FIRST SEGMENT -- CURRENT DUI ARREST INFORMATION -- IN THIS PRIOR HISTORY SECTION.

SaveCancel

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HOMEOffender SearchOffender(Orientation)Organization ▼Reports ▼Billing ▼Resources ▼Help ▼Logout

Does the offender have any alcohol and drug related driving information to be reported, any discrepancies between information reported by the offender and information on the driving record?

☒ Yes ☐ No

CAUTION: DO NOT INCLUDE INFORMATION REPORTED IN THE FIRST SEGMENT -- CURRENT DUI ARREST INFORMATION -- IN THIS PRIOR HISTORY SECTION.

DUI Dispositions Prior to Current Date of Arrest

Prior DUI dispositions including boating and snowmobiling. (List chronologically, from first arrest to most recent, and include out-of-state arrests):

Date of Arrest	Date of Conviction or Court Supervision	Blood Alcohol Concentration (Enter 'RT' if Refused Test, 'NA' if Not Applicable, or 'UK' if Unknown)
(mm/dd/yyyy)	(mm/dd/yyyy)	
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

(Additional dispositions should be listed in an addendum to the Uniform Report)

Statutory Summary/Implied Consent Suspensions Prior to Current Date of Arrest


Prior statutory summary or implied consent suspension (may have same arrest date of DUIs listed above):

Date of Arrest	Effective Date of Suspension	Blood Alcohol Concentration (Enter 'RT' if Refused Test, 'NA' if Not Applicable, or 'UK' if Unknown)
(mm/dd/yyyy)	(mm/dd/yyyy)	
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

(Additional dispositions should be listed in an addendum to the Uniform Report)

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Evaluation

Current DUI Arrest Information	✓
Alcohol and Drug Related Legal and Driving History	✓
Significant Alcohol/Drug Use History	*
Objective Test Information	*
Criteria For Substance Use Disorder	*
Offender Behavior	*
Classification/Minimal Required Intervention	*
Disposition	*

✓ Required fields have been entered
 * Required fields have not been entered

Note: Your session will be terminated if no activity is detected between your PC and the Web Server for a period exceeding 30 minutes. If an Evaluation segment requires lengthy narratives which require more than 30 minutes to complete, we suggest that the segment initially be saved with minimal data.

[Preview Evaluation Form](#)
[Cancel](#)

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UHS

Unified Health Systems

HOME

Offender Search

Offender(Orientation)

Organization ▾

Reports ▾

Billing ▾

Resources ▾

Help ▾

Logout

Chronological History

* Required Fields

Provide a complete and accurate chronological history of the offender's alcohol and drug use from the onset of use up to and including his/her last alcohol/drug-related arrest and from the last alcohol/drug-related arrest through the date of this evaluation and/or current abstinent date. Report alcohol/drug use by frequency, type, amount, and duration of said patterns with a clear and complete explanation for any variance in said patterns. This must include frequency of intoxications and any drug use, amounts needed to become intoxicated. List the dates and locations of all prior attempts the offender has made to limit consumption or achieve abstinence as a means to avoid any further consequences of substance use. List the dates and locations of all services the offender has received where substance use was a primary or contributing factor for attendance. These can include, but are not limited to medical care, mental health services, relationship or pastoral counseling, Employee Assistance Programs (EAP), and Student Assistance Programs (SAP). List the dates and locations of all previous substance abuse treatment and intervention services. Indicate if mixed drinks are single shot, doubles, or free poured; indicate if beers are 12-ounce, 16-ounce, 24-ounce, 32-ounce or 40-ounce containers; and indicate the glass size in ounces if consuming wine or mixed drinks. Report offender's first intoxication and whether offender exhibited vivid recall of this event. Report when offender first exhibited alcohol and drug related problems.

Alcohol/Drug	Age of First Use	Age of First Intoxication	Age of Regular Use	Year of Last Use
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>

Chronological History Narrative: *

(3000 characters max)

You have characters left.

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Context is crucial in your write-ups

- Especially in #4.1 Chronological History, but what do I mean by *Context*?

It's not enough to just identify ages, substance(s) used, frequency and amounts consumed. You should provide *context* by clarifying with the client what was triggering or sustaining their use, as well as what triggered or sustained any periods of no use. Examining a client's AOD use from a developmental perspective, in the form of a bio-psycho-social narrative, will give you better insight into the client's risk and needs.

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<p>Current Medications</p> <p>Review any prescription or over-the-counter medication the offender is currently taking that has the potential for abuse. List the medication, what it is used for, and how long it has been taken. Report whether the offender has ever abused medication and whether he/she has ever illegally obtained prescription medication.</p> <p><input type="radio"/> Applicable <input type="radio"/> Not Applicable</p>
<p>Family Member Addictions</p> <p>Specify any immediate family member(s) with a history of alcoholism, alcohol abuse, drug addiction/abuse, or any other problems related to any substance abuse. State whether the family member is in frequent contact with the offender and whether he/she is still using any substance.</p> <p><input type="radio"/> Applicable <input type="radio"/> Not Applicable</p>
<p>Peer Group Addictions</p> <p>Specify any immediate peer group member(s) with a history of alcoholism, alcohol abuse, drug addiction/abuse, or any other problems related to any substance abuse. State whether the peer group member is in frequent contact with the offender and whether he/she is still using any substance.</p> <p><input type="radio"/> Applicable <input type="radio"/> Not Applicable</p>
<p>Substance Use</p> <p>List all dates, locations, and charges for which the offender has been arrested where substance use, possession, or delivery was a primary or contributing factor (including out-of-state dispositions): (500 characters max) You have characters left.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
<p>Significant Other Interview</p> <p>Identify the significant other and summarize the information obtained in the interview.</p> <p><input type="radio"/> Applicable <input type="radio"/> Not Applicable</p>
<p>Treatment Services</p> <p>Provide the names, locations, and dates of any treatment services reported by the offender.</p> <p><input type="radio"/> Applicable <input type="radio"/> Not Applicable</p>
<p>Support Groups</p> <p>Provide the names of any self help or sobriety based support group participation reported by the offender and the dates of involvement</p> <p><input type="radio"/> Applicable <input type="radio"/> Not Applicable</p>

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<p>Impairments</p> <p>Has substance use negatively impacted the client's major life areas?</p>	
Family	<input type="radio"/> Applicable <input type="radio"/> Not Applicable
Marriage or significant other relationships	<input type="radio"/> Applicable <input type="radio"/> Not Applicable
Legal status	<input type="radio"/> Applicable <input type="radio"/> Not Applicable
Socially	<input type="radio"/> Applicable <input type="radio"/> Not Applicable
Vocational/Work	<input type="radio"/> Applicable <input type="radio"/> Not Applicable
Economic status	<input type="radio"/> Applicable <input type="radio"/> Not Applicable
Physically/Health	<input type="radio"/> Applicable <input type="radio"/> Not Applicable
<input type="button" value="Save"/> <input type="button" value="Cancel"/>	

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HOME Offender Search Offender(Orientation) Organization Reports Billing Resources Help Logout

Evaluation

Current DUI Arrest Information	✓
Alcohol and Drug Related Legal and Driving History	✓
Significant Alcohol/Drug Use History	✓
Objective Test Information	*
Criteria For Substance Use Disorder	*
Offender Behavior	*
Classification/Minimal Required Intervention	*
Disposition	*

✓ Required fields have been entered
 * Required fields have not been entered

Note: Your session will be terminated if no activity is detected between your PC and the Web Server for a period exceeding 30 minutes. If an Evaluation segment requires lengthy narratives which require more than 30 minutes to complete, we suggest that the segment initially be saved with minimal data.

Preview Evaluation Form Cancel

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**** Results from at least one test is required. ****

Mortimer/Filkins Score: Category:

Adult Substance Use and Driving Survey (ASUDS) Score:

Driver Risk Inventory (DRI) Scales and Risk Ranges

Validity Scale:

Alcohol Scale:

Driver Risk Scale:

Drugs Scale:

Stress Coping Abilities Scales:

Save Cancel

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4422

Evaluation	
Current DUI Arrest Information	✓
Alcohol and Drug Related Legal and Driving History	✓
Significant Alcohol/Drug Use History	✓
Objective Test Information	✓
Criteria For Substance Use Disorder	✓
Offender Behavior	*
Classification/Minimal Required Intervention	*
Disposition	*

✓ Required fields have been entered
 * Required fields have not been entered

Note: Your session will be terminated if no activity is detected between your PC and the Web Server for a period exceeding 30 minutes. If an Evaluation segment requires lengthy narratives which require more than 30 minutes to complete, we suggest that the segment initially be saved with minimal data.

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* Required Fields

Offender Behavior Responses
 Were the offender's behavior and responses consistent, reliable, and non-evasive? *
 (800 characters max)
 You have characters left.

Offender Behavior Disorders
 Identify indications or any significant physical, emotional/mental health, or psychiatric disorders.
 (800 characters max)
 You have characters left.

Offender Behavior Assistance
 Identify any special assistance provided to the offender in order to complete the evaluation.
 (800 characters max)
 You have characters left.

Offender Evaluation Location
 Where was the offender interview conducted? *
☐ Licensed Site ☐ Non-Licensed Site

Second Opinion Evaluation
 Is this a second opinion evaluation? *
☐ Yes ☐ No
 If yes, please explain why offender is seeking a second opinion.

Modality Evaluation
 What modality was this DUI Evaluation completed? *
☐ Telehealth ☐ Face to Face
 If Telehealth, Please explain the complete method and materials that were used to complete this Telehealth DUI Evaluation.

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Remember: *Client credibility is a risk factor.*

- Every effort should be made to resolve any discrepancies.
- Where and how?
 - #2.11 BAC/lab result consistency
 - #3.5 Court Purpose Driving Abstract
 - #7.1 Offender Behavior Responses (Interview & Test)
 - #7.5 Second Opinion Evals (2nd opinion or eval shopping?)

What should you be looking for?
 - #8.2 Correlations between client self-report and other reports.

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Evaluation	
Current DUI Arrest Information	✓
Alcohol and Drug Related Legal and Driving History	✓
Significant Alcohol/Drug Use History	✓
Objective Test Information	✓
Criteria For Substance Use Disorder	✓
Offender Behavior	✓
Classification/Minimal Required Intervention	✱
Disposition	✱

✓ Required fields have been entered
 ✱ Required fields have not been entered

Note: Your session will be terminated if no activity is detected between your PC and the Web Server for a period exceeding 30 minutes. If an Evaluation segment requires lengthy narratives which require more than 30 minutes to complete, we suggest that the segment initially be saved with minimal data.

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Classification: Moderate Risk

* Required Fields

Discuss how corroborative information from both the interview and objective test either correlates or does not correlate with the information obtained from the DUI/alcohol/drug offender.

*

(500 characters max)

You have characters left.

Minimal Required Intervention:

MODERATE RISK: Completion of a minimum of 10 hours of DUI risk education; a minimum of 12 hours of early intervention provided over a minimum of four weeks with no more than three hours per day in any seven consecutive days; subsequent completion of any and all necessary treatment; and, after discharge, active on-going participation in all activities specified in the continuing care plan, if so recommended following completion of the early intervention.

The offender was referred as follows:


(250 characters max)

You have characters left.

Save

Cancel

49



Unified Health Systems

HOMEOffender SearchOffender(Orientation)Organization ▼Reports ▼Billing ▼Resources ▼Help ▼Logout

Evaluation

Current DUI Arrest Information

✓

Alcohol and Drug Related Legal and Driving History

✓

Significant Alcohol/Drug Use History

✓

Objective Test Information

✓

Criteria For Substance Use Disorder

✓

Offender Behavior

✓

Classification/Minimal Required Intervention

✓

Disposition

*

✓ Required fields have been entered

* Required fields have not been entered

Note: Your session will be terminated if no activity is detected between your PC and the Web Server for a period exceeding 30 minutes. If an Evaluation segment requires lengthy narratives which require more than 30 minutes to complete, we suggest that the segment initially be saved with minimal data.

Preview Evaluation Form

Cancel

50

25

Unified Health Systems

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Evaluation

Current DUI Arrest Information ✓

Alcohol and Drug Related Legal and Driving History ✓

Significant Alcohol/Drug Use History ✓

Objective Test Information ✓

Criteria For Substance Use Disorder ✓

Offender Behavior ✓

Classification/Minimal Required Intervention ✓

Disposition *

✓ Required fields have been entered
* Required fields have not been entered

Note: Your session will be terminated if no activity is detected between your PC and the Web Server for a period exceeding 30 minutes. If an Evaluation segment requires lengthy narratives which require more than 30 minutes to complete, we suggest that the segment initially be saved with minimal data.

Preview Evaluation Form Cancel

UniformReport.pdf - Google Chrome

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UniformReport.pdf 1 / 12 58%

State of Illinois
Department of Human Services
Alcohol and Drug Evaluation
Uniform Report

PART I. OFFENDER INFORMATION

Offender Name: eDSRS Orientation
IL Driver's License Number or State ID: 0123-4567-8910
Other Valid Driver's License Number/State:
Home Address: 123 E. Main St.
County of Residence: Somewhere, IL 60000
City/Town: DuPage
Citizenship: USA Citizen
Telephone Number(s): (630) 555-5555 Cell
Date of Birth: 07/30/1972 Age: 49
Gender: Male
Race(s): White
Hispanic Origin: Not Hispanic
Primary Language: English Interpreter Services: Services not needed
Marital Status: Married
Education Level: Master's degree or higher
Employment Status: Employed full time (unsubsidized)
Occupation: Hand worker
Annual Household Income: \$10000 Number of Dependents: 2
Physical or Mental Disability: None Religious Affiliation: Nonreligious
Emergency Contact Person: Training Orientation - relationship
Contact Telephone Number: (630) 555-1234

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Unified Health Systems

HOME Offender Search Offender(Orientation) Organization Reports Billing Resources Help Logout

Disposition * Required Fields

* ☐ Active/In Progress
☐ Completed
☐ Not Completed
☐ Entered in Error

Number of Appointments: *

Hours for Interviews: *

Hours for Paperwork: *

Save Cancel

52

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Evaluation

Current DUI Arrest Information ✓

Alcohol and Drug Related Legal and Driving History ✓

Significant Alcohol/Drug Use History ✓

Objective Test Information ✓

Criteria For Substance Use Disorder ✓

Offender Behavior ✓

Classification/Minimal Required Intervention ✓

Disposition ✓

✓ Required fields have been entered
* Required fields have not been entered

Note: Your session will be terminated if no activity is detected between your PC and the Web Server for a period exceeding 30 minutes. If an Evaluation segment requires lengthy narratives which require more than 30 minutes to complete, we suggest that the segment initially be saved with minimal data.

Print/View Evaluation (Completed) Cancel

UniformReport.pdf - Google Chrome

dui2.dhs.illinois.gov/duisecure/dui/dynamic/evaluation/disposition/UniformReport.pdf?FormName=IL444_2030&Ev...

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State of Illinois
Department of Human Services
Alcohol and Drug Evaluation
Uniform Report

PART I. OFFENDER INFORMATION

Offender Name: dSRS Orientation
H. Driver's License Number or State ID: 0123-4567-8910
Other Valid Driver's License Number/State:
Home Address: 123 E. Main St. Somewhere, IL 60000
County of Residence: DuPage
Citizenship: USA Citizen
Telephone Number(s): (630) 555-5555 Cell
Date of Birth: 07/30/1972 Age: 49
Gender: Male
Race(s): White
Hispanic Origin: Not Hispanic
Primary Language: English Interpreter Services: Services not needed
Marital Status: Married
Education Level: Master's degree or higher
Employment Status: Employed full time (unsubsidized)
Occupation: Hard worker
Annual Household Income: \$100000 Number of Dependents: 2
Physical or Mental Disability: None Religious Affiliation: Nonreligious
Emergency Contact Person: Training Orientation - relationship
Contact Telephone Number: (630) 555-1234

IMPORTANT NOTICE: The Illinois Department of Human Services, Division of Addiction Law Enforcement and Recovery...

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When completing the DUI evaluation...

Always review
the evaluation
with the client.

Explain the risk
classification.

Obtain the
client's
signature.

What do you
do if the client
refuses to sign?

56

58

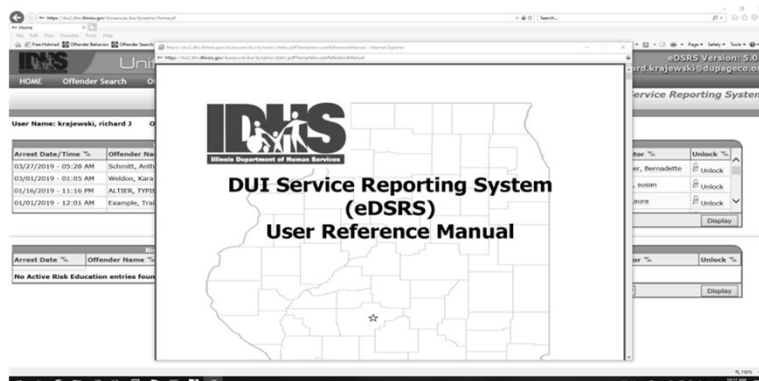
29

Important emails and websites

- SUPR Help Desk: DoIT.SUPRHelp@illinois.gov
- eDSRS Help Email: DoIT.UhsInfo@illinois.gov
- eDSRS Password Reset: DoIT.DHS.MISSecurity@illinois.gov
- Secure eDSRS Website: <https://dui2.dhs.illinois.gov/duisecure/dui>
- eDSRS Registration: <https://dui2.dhs.illinois.gov/duipublic/duireg>

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Questions?



60

MORNING SESSION SUMMARY

- ✓The client's legal situation
- ✓Purpose of DUI Evaluations
- ✓Using the eDSRS—What makes a good evaluation?

61

Lunch Break
12pm-1pm



62

AFTERNOON AGENDA: DUI ASSESSMENT TOOLS

- ~~Mortimer Filkins~~
- Driver's Risk Inventory (DRI-2)
- Adult Substance Use & Driving Survey – Revised for Illinois (ASUDS – RI)



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Driver's Risk Inventory (DRI-2)

Behavior Data Systems

BDS@BDSLTD.com

1.800.231.2401

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DRI-2 features

- Normed on all (BDS-recorded) DUI offenders
- BDS reviews data collected on an annual basis and updates as needed
 - Plus, a yearly Summary Report specific to your agency!
- Includes gender specific norms
- Identifies attempts to fake or under report problems/concerns
- Measures substance use involvement and risk to public safety
- It is a valid instrument

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Administering the DRI-2

- 113 questions – 3 sections
 - Section 1: True / False
 - Section 2: Multiple choice
 - Section 3: Self-rating scale 1-4
- Computer generated scoring – BDS's secure on-line site
 - Self-administered (computer or pencil/paper)
 - Interview-style (pencil/paper)
- The test instructions help put the client at ease while providing structure and clarifying expectations

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The DRI has six scales:

- 1) Truthfulness Scale
- 2) Alcohol Scale
- 3) Drug Scale
- 4) Driver Risk Scale
- 5) Stress Management Scale
- 6) Substance Use Disorder Scale

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DRI-2 Scales

- Truthfulness Scale – measures how truthful the client was and identifies self-protective, recalcitrant and guarded people who minimize or even conceal information. Even the DRI measures client credibility!!
- Alcohol Scale – measures the client's alcohol use and proneness to alcohol-related problems (beer, wine, hard liquor, malt liquor).
- Drug Scale - measures the client's drug use and proneness to drug-related problems (illegal/illicit substances, Rx and non-Rx medications).

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DRI-2 Scales (continued)

- Driver Risk Scale – measures a client’s driving risk, independent from their involvement with alcohol/drugs. Helps identify the irresponsible/aggressive driver.
- Stress Management Scale – measures the client’s ability to handle or cope with stress. Severely impaired coping abilities are indicative of other identifiable emotional/mental health problems.
- Substance Use Disorder Scale – based solely on how many of the 11 DSM-5 criteria are endorsed.

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DRI-2 Scale Narratives and Significant Items

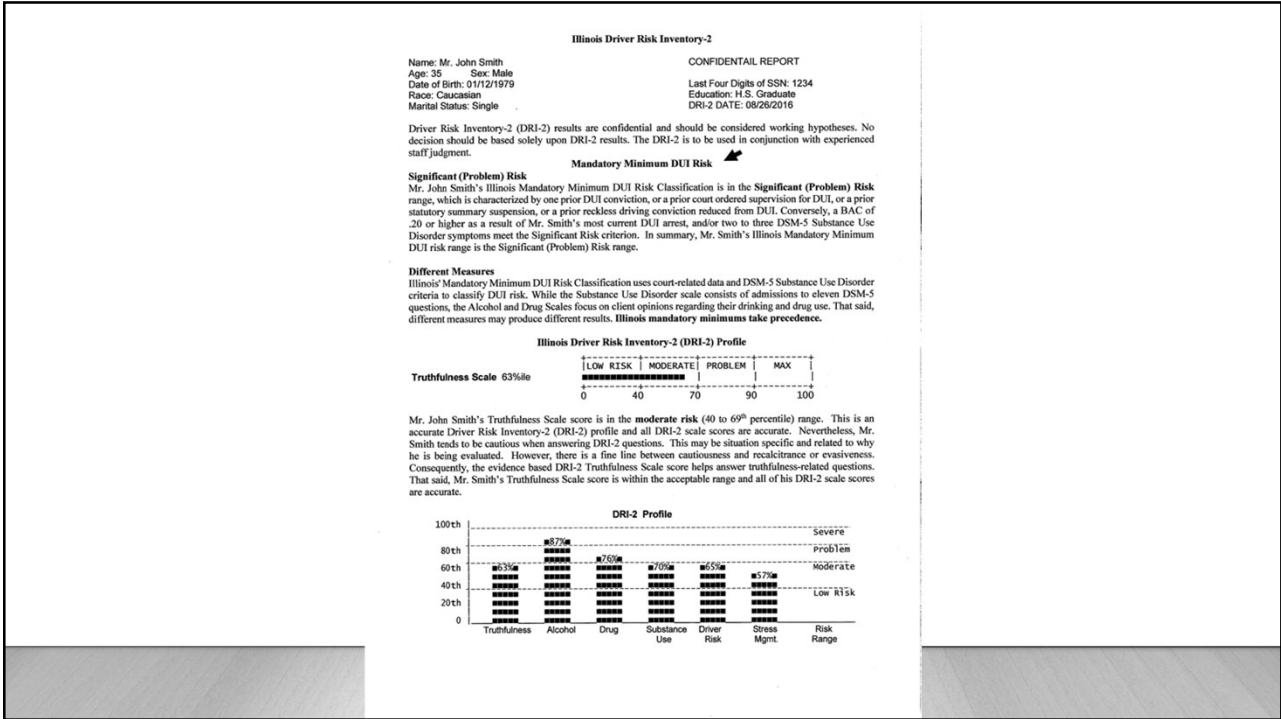
- Each scale has a narrative that explains when problems exist and what each scale score means. When problems exist, risk-related recommendations are offered.
- Significant items are the self-reported responses that represent areas that should be further explored.

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DRI-2

The Truthfulness Scale's Special Score

- When the Truthfulness Scale is at or above the 95th percentile (Severe Risk), all other scale scores (alcohol, drug, driver risk, and stress/coping) automatically go to the 99th percentile.
- This is done to alert the evaluator to a very high Truthfulness Scale score, which means the test results are inaccurate.
- If the client invalidates their test, a RETEST is recommended.
 - ** Carefully review the DRI instructions again **



NAME: Mr. John Smith

-2-

IL DRI-2 REPORT

ADDITIONAL INFORMATION PROVIDED BY CLIENT

Date of Present DUI Arrest	08/29/2017	Driver's License Suspended/Revoked?	No
Reason for Arrest	Alcohol	Arrest Reduced to Careless/Reckless Driving?	No
Additional DUI Offenses Pending?	No	Lifetime alcohol-related (not DUI) arrests	1
BAC at Time of Current Arrest	.014	Lifetime drug-related (not DUI) arrests	0
Refused Breath/Blood Test in Current DUI?	No	Lifetime At-Fault Motor Vehicle Accidents	0
Lifetime DUI Arrests	2	Lifetime Traffic Violations (Tickets)	3

Scale Score Paragraphs

All seven Illinois DRI-2 scale-related paragraphs explain when problems exist and what each attained scale score means. It should be understood that the **Illinois Mandatory Minimum DUI risk range has priority and takes precedence**. Nevertheless, when problems exist, risk-related recommendations are offered.

Substance Use Disorder: PROBLEM
In the DSM-5, alcohol and drug use are combined under the caption "Substance Use Disorder." That said, DSM-5 postulates eleven (11) substance use severity criteria. A client's (offender's) substance use severity is then determined by the number of the eleven severity criteria the client admits too. Mr. Smith admits to **four** or **five** of the eleven severity criteria, which is classified **problem** substance use. The DSM-5 **problem** classification is equivalent to a Driver Risk Inventory-2 (DRI-2) **problem risk** (70 to 89th percentile) Alcohol Scale or Drug Scale score. Mr. Smith's DSM-5 Substance Use Disorder score is in the **problem risk** range (four or five admissions).

Alcohol Scale: PROBLEM
Mr. John Smith's Alcohol Scale score is in the **problem** (70 to 89th percentile) range. An established pattern of alcohol (beer, wine or liquor) abuse is indicated. Recommendations: A minimum level of treatment, consideration should be given to outpatient chemical dependency treatment for people with drinking problems. Participation in self-help or mutual-help (e.g., AA or RR) meetings might augment, but not replace treatment. Without treatment, Mr. Smith's drinking problem will likely worsen. Should Mr. Smith relapse, his optimum level of care would likely increase to "intensive outpatient treatment." Mr. Smith would benefit from help with his drinking problem.

Drug Scale: PROBLEM
Mr. John Smith's Drug Scale score is in the **problem** (70 to 89th percentile) range. Problem risk scorers have drug (prescription and/or nonprescription) involvement that warrants intervention and/or treatment. Review Mr. Smith's answer to the "recovering" question (#84). If recovering, how long? Recommendations: consider outpatient (individual or group) counseling augmented (not replaced) by Narcotics Anonymous (NA) or Cocaine Anonymous (CA) meetings. Review other DRI-2 scale scores for co-occurring disorders. Should Mr. Smith relapse, his optimum level of care would likely increase to "intensive outpatient treatment."

Driver Risk: MODERATE
Mr. John Smith's Driver Risk Scale score is in the **moderate risk** (40 to 69th percentile) range. Some indicators of inattentive driving are present, but an established pattern of irresponsible driving is not present. Mr. Smith may only be a driving risk after using alcohol (beer, wine or liquor) or drugs (prescription and/or nonprescription). Prudent assessors will check out the other Driver Risk Inventory-2 (DRI-2) scales that can directly contribute to Mr. Smith's driving risk, e.g., Truthfulness Scale, Alcohol Scale, Drug Scale, Substance Use Scale and the Stress Management Scale. Any elevated (70th percentile and higher) scale scores would contribute to driver risk. On its own merits, Mr. Smith's Driver Risk Scale indicates he is a safe driver.

NAME: Mr. John Smith

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IL DRI-2 REPORT

Stress Management Scale: MODERATE

SCORE: 57%

Mr. John Smith's Stress Management Scale score is in the **moderate** (40 to 69th percentile) range. Stress management issues are becoming apparent. If left unattended these potential issues or concerns could worsen. Recommendations: a "brief intervention" might be considered. Brief interventions range from 15 to 30 minutes of direct face-to-face staff-client (offender) discussion, they can be a valuable intervention for clients with early stage stress-related problems. There are also many good self-help stress management books that help readers recognize their stress, reframe it and positively manage it. They also discuss stress reduction techniques like relaxing body parts, deep breathing exercises, meditation, etc. Another alternative is enrollment in a stress management class. Stress-related issues are emerging.

Significant Items. The following self-report responses represent areas that may help in understanding the respondent's situation and status.

Alcohol	Drug
2. Concerned about my drinking.	17. Family member said get help.
6. Drinking has caused serious problems.	22. Been treated for drug prblm.
9. Often drinks more than intended.	31. Had drug abuse problem.
11. Feels guilty about drinking.	
Substance Use Disorder	Driver Risk
65. Almost all activities substance-related.	3. I usually drive fast.
69. Persistent cravings and strong urges.	7. I am quick tempered.
71. Continue using despite knowing causes prblms.	14. Use cell phone while driving.
77. Cannot reduce or cut down.	

Comments/Recommendations:

Use back of this page, if necessary

STAFF MEMBER SIGNATURE

DATE

IL DRI-2 RESPONSES

1 - 50 TFFFFFFFFFFF FTFTFTFT FTFTFTFT FTFTFTFT

51 - 100 FFFFFFFF TFFFFFTT FT4444114 444444444 141141414

101 - 113 1144141141 144

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DRI-2 summarized

PROS

- Valid and reliable
- Updated as needed
- Computerized scoring with narrative explanations
- Provides just what you need
- Spanish & Polish translations available
- Customer service is amazing

CONS

- Upfront cost
- The Spanish translation is poor

ANY QUESTIONS?

75

How are we feeling so far? Need a break??



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The Adult Substance Use & Driving Survey - Revised for Illinois (ASUDS-RI)

DR. KENNETH WANBERG & DR. DAVID TIMKEN

THE CENTER FOR ADDICTION RESEARCH AND EVALUATION (CARE)

77

The overall goal of this ASUDS-RI training...

...is to provide an introduction in the use of the ASUDS-RI in *differential screening* and assessment of impaired driving offenders within the framework of the *Convergent Validation Model*.

78

Differential Screening

Multidimensional (AOD) screening tool that measures the extent to which individuals are involved in various kinds of drugs and the extent of negative consequences or symptoms resulting from this involvement.

79

Convergent Validation Model

Uses the client's *self-report* and *other reports* as valid representations of where the client is at the time of assessment. You can never know the "true" condition, only estimate it. We estimate and *converge* on the "true" condition by comparing the self-report with the other report.

80

Self Report and Other Reports

- Both sources of data are a valid representation of the client at the time of assessment.
- You are assessing the client's willingness to self-disclose.
- You want to view any distortions as *Perceptual Defensiveness*.
- A change in that view or increase in self-disclosure can mean treatment is working.

81

Perceptual Defensiveness

- *"Reality is as the client perceives it. We approach the world through the process of interpretation. We construct our own realities and form views of ourselves."*



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From the Convergent Validation perspective

- Self-report data is the baseline measure of the client's willingness to self-disclose at the time of assessment.
- Self-report should not be reported as invalid, but rather indicative of the discrepancy between sources of data.
- Reframe the view of lying, minimizing or denial as perceptual defensiveness.
- Getting the best estimate of the "true" condition depends on building trust and rapport with the client, being up-front as to how the information will be used and communicating a positive regard for the client's self-disclosure.

83

Guidelines when using a self-report Psychometric Test



Methods of test administration should be standardized.



Reading level of the client should be checked. How?



The screening instrument should not be used for comprehensive assessment – it is not ASAM, it is not a SUD diagnosis.



When using computerized scoring, you should have a knowledge of the test itself and not rely just on the computerized interpretation.



Clients should always receive feedback from their assessment results compared to the normative group.

84

ASUDS-RI

OVERVIEW AND DESCRIPTION OF SCALES

85

Basic terms you should know before we talk about
the ASUDS-RI scales

“Norms” or “Normative group”

“Raw scores”

“Percentile ranks”

86

General rules for the ASUDS-RI:

Always make test instructions clear and include the following:

- Answer each question honestly as possible as how you see yourself.
- Give only one answer to each question unless otherwise specified.
- Your results will be treated as *confidential*
- Your results will be used to develop the services most appropriate for you.
- Your results will be shared with you.

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ASUDS-RI overview

- The ASUDS is a self-report, differential screening instrument for impaired driving offenders ages 16 and older.
- Self-administered (computer or pen/paper)
- Interview administered (when necessary)
- All computerized scoring.

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ASUDS-RI general description

- Comprised of 113 self-report items.
- 13 basic scales and six supplemental scales
 - Basic scales #1-11 are normed on the IL impaired driving offender.
 - Basic scales #12-13 are normed on a clinical sample of AOD clients in IOP or residential treatment.
 - Supplemental scales A, B, C are normed on the clinical sample.
 - Supplemental scales D, E, F are normed on the IL impaired driver.

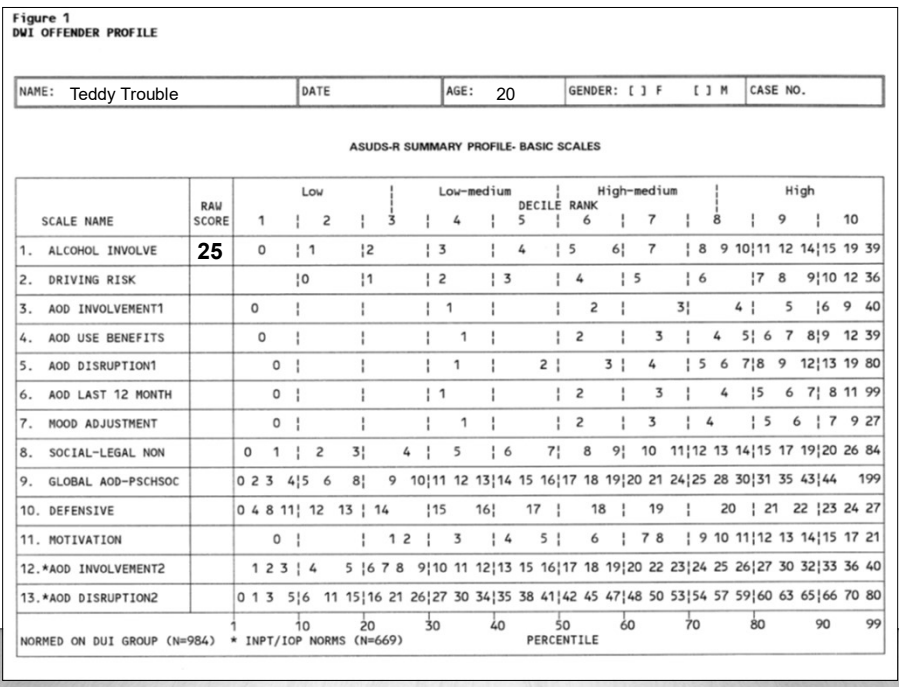
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Table 1
ASUDS-RI Scoring Procedures for Basic Scales (*AOD=Alcohol and Other Drugs)

ASUDS SCALE	ITEMS IN EACH SCALE	SCORING WEIGHTS
1. ALCOHOL INVOLVEMENT	1-13	a = 0, b = 1, c = 2, d = 3
2. DRIVING RISK	14 to 25	a = 0, b = 1, c = 2, d = 3
3. AOD* INVOLVEMENT	26-35	a = 0, b = 1, c = 2, d = 3, e = 4
4. AOD USE BENEFITS	1-3, 8, 13, 37-44	a = 0, b = 1, c = 2, d = 3
5. AOD DISRUPTION1	45-64	a = 0, b = 1, c = 2, d = 3, e = 4
6. AOD 12 MONTHS	26-35, 45-64 (12 month col.)	a = 0, b = 1, c = 2, d = 3, e = 4
7. MOOD ADJUSTMENT	65-73	a = 0, b = 1, c = 2, d = 3
8. SOCIAL-LEGAL NON-CON	81-106	a = 0, b = 1, c = 2, d = 3, e = 4
9. GLOBAL AOD PSYCHOSOCIAL	Sum scales: 3, 5, 7, 8	Total raw score
10. DEFENSIVE	9, 74 to 80, 84	a = 3, b = 2, c = 1, d = 0
11. MOTIVATION	107-113	a = 0, b = 1, c = 2, d = 3
12. INVOLVEMENT2*	26-35	a = 0, b = 1, c = 2, d = 3, e = 4
13. DISRUPTION2*	45-64	a = 0, b = 1, c = 2, d = 3, e = 4

* These scales are normed on a clinical sample of AOD clients in an intensive outpatient program or in an AOD residential treatment program

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ADULT SUBSTANCE USE AND DRIVING SURVEY - REVISED FOR ILLINOIS (ASUDS-RI)
Authors: Kenneth W. Wanberg and David S. Timken

CLIENT INFORMATION

Name: Teddy Trouble DOB: 12/01/1988 Age: 20 Gender: Male Ethnicity: Anglo-American White Marital Status: Never married	Assess Date: 04/09/2019 Client ID: 0001 Evaluator: jpk Agency Name: Don't Drive DUI	Arrest BAC: 149 Failed Blood/Urine Tests: No Prior DWI/DUI Convictions: 0 Prior DWI/DUI Education: No No. AOD Treatment Sessions: 8 No. AOD Inpatient Days: 0
---	--	--

DRUG AND ALCOHOL USE HISTORY

Drug Category	Times in Past 12 Months	Times Last 12 Months	Age Last Use	Drug Category	Times in Past 12 Months	Times Last 12 Months	Age Last Use
Alcohol Drink	More than 50 times	11-25 times	20	Heroin	Never Used	Never Used	N/A
Marijuana	More than 50 times	26-50 times	20	Other Opiate	Never Used	Never Used	N/A
Cocaine	Never Used	Never Used	N/A	Sedatives	Never Used	Never Used	N/A
Amphetamines	Never Used	Never Used	N/A	Tranquilizers	Never Used	Never Used	N/A
Hallucinogens	One to 10 times	Never Used	18	Cigarettes	Up to a pack a day		
Inhalants	Never Used	Never Used	N/A				

CRITICAL ITEMS

- Drove a few times when had too much to drink
- Passed out often when drinking
- Not recall what did when drinking twice
- Blackout 1-3 times
- Physically violent 4-6 times
- Passed out 1-3 times
- Committed a crime 4-6 times
- Charged with impaired driving 1-2 times
- Arrested and charged with crime 1-2 times
- Convicted of a crime 1-2 times
- Violent behavior sometimes
- Have problems sleeping a lot of the time
- For sure, want to make changes in use of alcohol or other drugs
- Most likely want to stop using or continue not to use alcohol

SUGGESTED SERVICE LEVEL BENEFITS OR GUIDELINES

Level	Suggested Service Level Benefit	Weighted
4	Client could benefit from a basic alcohol-drug / DUI risk education program plus an extended-enhanced alcohol/drug treatment program followed with an aftercare plan.	13

Sum of Scales 1, 2, 3, 5 + 484

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Client Signature: _____ Date: _____

Scale 1: Alcohol Involvement (items 1-13)

- Measures the extent of involvement in alcohol use, but not necessarily, alcohol abuse.
- Measures a low level of alcohol use patterns and problems, but many items can be endorsed by the average drinker with no alcohol use problems.
- It is a subtle measure of alcohol involvement that is a reliable and valid measure of the client's involvement in alcohol use, and to some extent, abuse. Key concept: "Proneness"
- Average drinkers often have raw scores in the 1-10 range. Defensive DWI clients will resist providing affirmative responses to items that the average drinker will endorse.
- Used to determine the degree of defensiveness of a client. Includes an item that directly assesses defensiveness (see #9).

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Scale 2: Driving Risk (items 14-25)

- These are general everyday driving situations.
- Most DUI clients are reluctant to endorse these items because of perceived threat to loss of license.
- Their scores will likely increase if retested later because their responses are perceived to no longer be a threat to loss of license.
- Those with a raw score of 10 or higher are being open about their driving habits and attitudes, but also represent a risk.

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Scale 3: AOD Involvement-1 (items 26-35)

- Provides a measure of the *lifetime* involvement in the 10 major drug categories
- There are 3 parts to each question 26-35...
 - Lifetime
 - Last 12 months (calculated, represented on scale 6)
 - Age of last use
- Many multiple drug users may have not used some of the drugs recently, thus age of last use is an important variable.
- See scale 12 Involvement-2 for clinical population comparison.

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Scale 4: AOD Use Benefits (items 1-3, 8, 13, 37-44)

- Measures the degree to which the client reports using alcohol or other drugs for social and psychological benefits.
- Provides a good indication whether the client is using alcohol or other drugs to manage depression, anxiety, to feel good, or to be more sociable.

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Scale 5: AOD Disruption-1 (items 45-64)

- Two parts to each question: lifetime (scale 5) and last 12 months (scale 6).
- Abroad measure of problems and negative consequences due to AOD use.
- Focus is on measuring the disruptive signs and symptoms in relationship to drugs in general, not any specific drug or drug category.
- High scores indicate loss of control over behavior, disruption of psychological and physiological functioning, and disruption of social role responsibilities.
- See scale 13 Disruption-2 for clinical comparison, and subscale A, B and C for distribution breakdown.

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Scale 6: AOD Involvement – Last 12 Months (items 26-35, 45-64)

- Combines the extent of Involvement1 (scale 3) and Disruption1 (scale 5) from AOD use in past 12 months
 “past” meaning 12 months before the last DUI arrest. Why?
- Because AFTER arrest, many clients go into shape-up mode: significantly reducing or even stopping use.

100

Scale 7: Mood Adjustment (items 65-73)

- Measures a single dimension of psychological and emotional adjustment.
- High scores indicate depression, worry, anxiety, irritability, anger, feelings of not wanting to live, inability to control emotions and acting out behavior.
- About 20% will report significant to serious psychological problems, which will indicate a need further mental health assessment.

101

Scale 8: Social-Legal Non-conforming (items 81-106)

- Broad measure of rebellious, antisocial behavior & attitudes, and involvement in illegal or criminal conduct.
- Has both static and dynamic items:
 - Static items measure involvement in criminal conduct.
 - Dynamic items measure aggressive behavior, rebellious attitudes and association with antisocial peers.
- Moderate to high scores indicate anti-social patterns and character pathology, but also indicates openness to self-disclosure and low defensiveness.
- Item 84 (“...has been charged with DUI”) is a good check for overall ADUDS-RI response veracity.

102

Scale 9: Global AOD-Psychosocial (Sum of Scales 3, 5, 7, 8)

- “An effective way to determine the overall or global problems or disruption is to look at all the salient (*or projecting*) psychosocial areas that are part of problem behavior. These include AOD involvement, disruption, social-legal non-conforming problems/behaviors, and mental health problems.”
- Provides a global or overall measure of the degree to which client is indicating life-functioning problems in the areas of substance use, mood adjustment and community compliance.

103

Scale 10: Defensiveness (items 9, 74-80, 84)

- Measures the degree to which client is able to self-disclose.
- Comprised of statements to which almost all individuals can give a yes answer, even though it may be at a “hardly at all” level of response.
- It is a measure of social desirability.
- WOW! The ASUDS measures client credibility too!!

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Scale 11: Motivation (items 107-113)

- Reliable measure of degree to which client is motivated to seek help, to make changes, and to stop or to continue not to use alcohol or other drugs.
- Low score on Motivation, Defensiveness, and Disruption could indicate client's AOD and other problems are truly in the lower risk range, and that higher level treatment services are not needed.

105

Scale 12: Involvement-2 Scale 13: Disruption-2

- Items here are the same as in AOD Involvement-1 and Disruption-1.
- Involvement-2 and Disruption-2 are normed on a sample of clients treated in IOP or residential care facilities for alcohol and other drug problems.
- Provides the evaluator with an option of comparing the client's raw score with a DUI normative group and with a group that have relatively severe AOD abuse problems.

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ASUDS: Supplemental Scales

Table 2
ASUDS-RI Scoring Procedures for Supplemental Scales

ASUDS SCALE	ITEMS IN EACH SCALE	SCORING WEIGHTS
A. BEHAVIORAL DISRUPTION*	45-50	a=0,b=1,c=2,d=3, e=4
B. PSYCHPHYS DISRUPTION*	51-60	a=0,b=1,c=2,d=3,e=4
C. SOCIAL ROLE DISRUPTION*	61-64	a=0,b=1,c=2,d=3,e=4
D. SOCIAL NON-CONFORM	81-92	a=0,b=1,c=2,d=3
E. LEGAL NON-CONFORM	93-106	a=0,b=1,c=2,d=3,e=4
F. SOCIAL-LEGAL 12 MONTHS	89-106	a=0,b=1,c=2,d=3,e=4

* These scales are normed on a clinical sample of AOD clients in an intensive outpatient program or in an AOD residential treatment program

Scale A: Behavioral Control Disruption (items 45-50)

- Important to remember that this scale was normed on the clinical sample.
- Measures behavioral control-loss and disruptions while under AOD influence.
- High scores (decile ranges 8-10) may indicate client is at risk of harm to self or others when using and can get out of control.

Scale B: Psychophysical Disruption (items 51-60)

- Also normed on the clinical sample.
- Measures degree to which client has experienced psychophysical symptoms associated with acute intoxication or withdrawal.
- Can be life threatening, and high scores indicate past AOD disorders.

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Scale C: Social Role Disruption (items 61-64)

- Final scale in this group normed on the clinical sample.
- Indicates degree to which the individual's AOD use has disrupted normal and expected social roles (i.e. job, obeying law, family responsibilities...).
- High scores can be associated with depression and discouragement.
- High scores suggest need for life-management skills and training in areas of employment and family skills.

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Scale D: Social Non-conforming (items 81-92)

- When in the Community: Measures past and current rebelliousness and even antisocial behavior and attitudes.
- Those with moderate to high scores are open to self-disclosure.
- However, individuals with significant antisocial features and character pathology are often resistant to treatment.

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Scale E: Legal Non-conforming (items 93-106)

- Most of these items are static variables.
- Measures degree of involvement in the adult criminal justice system: Hx of arrests, convictions, time on probation/parole, and time spent in jail or prison.
- Most DUI clients, about 70%, will have a low raw score on this scale (4 or less).
- Very few clients will score in the high range.
- 10th decile range scores on both scales D and E indicate significant problems and history of both antisocial and anti-legal problems and may suggest a lifestyle pattern of social-legal non-conformity.

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Scale F: Social-Legal Non-conforming 12 Months (items 89-106, last 12 months)

- Measures recent legal problems.
- Over 70% of IL sample of DUI offenders will have a very low raw score (4 or less). Raw scores above 5 suggest client has had noteworthy if not significant involvement in social-legal non-conformity in the 12 months prior to their evaluation.
- Only 10 percent of Illinois DUI sample had a raw score of 8 or more.
- Some clients are willing to report recent involvement in the judicial system, but most DUI clients are quite guarded.

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The “Suggested Service Level Guidelines”

- Is derived from the raw scores from (1)Alcohol Involvement, (2)Driving Risk, (3)AOD Involvement1, (5)Disruption1, and variable #84 (which is the best predictor of recidivism).
- These scales measure the problem behavior related to DUI conduct.
- The weighted outcomes as defined in the User’s guide are then generated:
 - 1 (minimal)
 - 2 (moderate)
 - 3 (significant)
 - 4 (high)

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The “Critical Items” and “Assessment Summary”

- These are the bullet point narratives of the client’s profile.
- Each *Critical Item* may require additional follow-up and can be included in the Uniform Report.
- Each *Assessment Summary* bullet can be included in different sections of the Uniform Report to provide extra information, identify correlations, enhance referral services, identify other risks and/or needs, and most of all to support your conclusions and recommendations.

Don’t forget, the client signs and dates the ASUDS results!

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ASUDS-RI summarized

PROS

- Proven validity and reliability.
- Computerized scoring, Critical Items and Assessment Summary are all relevant in the Uniform Report.
- Encouraged reassessment during Tx.
- FREE!

CONS

- Computer navigation could be better
- Spanish version only available on paper.
- Must save results separately (how?)

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Some final thoughts...

- Offender assessment is client-centered and society-centered. The safety and welfare of the client, others and the community are the number one priorities when determining risk.
- The first step in restorative justice is confronting the behavior and the AOD use history. You can only address change when you know and understand how the client views themselves and their use.
- Although the assessment tools provide useful guidelines for intervention, final service and treatment referral decisions are never made solely on the results of a self-report instrument. All sources of data are used in making these decisions.

Any Questions?

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OMG! Now what?

Advanced DUI Training "Shadow Day"

1-day experiential training, offering:

- review of 2060 policy/procedure
- Full interview observation, ASUDS administration and eDSRS write-up
- Audit expectations, and more!
- Up to 6 CEUs available - \$60

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THANK YOU FOR PARTICIPATING!

MORNING OVERVIEW SUMMARY

- ✓ The client's legal situation
- ✓ Purpose of DUI Evaluations
- ✓ Using the eDSRS—What makes a good evaluation?

AFTERNOON OVERVIEW SUMMARY

- ✓ ~~Mortimer-Filkins~~
- ✓ Driver's Risk Inventory (DRI-2)
- ✓ Adult Substance Use & Driving Survey – Revised for Illinois (ASUDS-RI)