ADE Incorporated

NEEDS Assessment
Administration and Interpretation

Jim Haggerty B.S. C.A.C
ADE Incorporated
ADE Incorporated

Located In Clarkston, Michigan

Has been providing computer assisted substance abuse assessments for DUI offenders since 1983

Continue to set the standard with new web-based, client interactive and client tracking software
THE NEEDS HELPS TO CREATE A STANDARDIZED ASSESSMENT PROCESS

- Provides a standardized assessment tool for gathering important information
- The NEEDS asks the same questions in the same order for every respondent
- The NEEDS software decision rules interpret the survey responses the same way every time
THE NEEDS PROVIDES A COMPREHENSIVE REPORT BASED ON SELF-REPORTED INFORMATION

- The NEEDS Report reflects what the respondent is telling you about him/her self.

- The NEEDS Report provides a wealth of good information, make use of what it offers.
The role of the NEEDS Assessment in the ADSAC Process

For the purposes of conduction ADSAC assessments, the NEEDS appears most appropriate for strengthening clinical decisions to place an offender in Intervention Categories 3, 4 or 5.

A strength of the NEEDS is the Test Taking Attitude (TTA) scale. If the truthfulness scale in the DRI II or DQ is elevated in an evaluation containing elevated alcohol or drug scales, then the NEEDS is a good choice.
The role of the NEEDS Assessment in the ADSAC Process

If a substance abuse or dependence disorder is suspected, the NEEDS can increase the confidence in the clinical decision, and assist in the identification of attempts to under-report problems and concerns initially captured by DRI II or the DQ.

The NEEDS can also identify issues that tend to impact alcohol and other drug using behaviors, broadening the usefulness of the instrument.
THE NEEDS EVALUATION

INTERPRETATION

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NEEDS ASSESSMENT INSTRUMENT

- The NEEDS consists of 130 questions
- All but one (#120) require one answer, most are Yes or No
- 46 Questions are directly related to Substance Use
- NEEDS can identify the probability of the existence of a SA or CD disorder
- Further identifies areas that may influence future alcohol/drug usage
WHAT IS THE NEEDS DESIGNED TO DO?

- Provide a standard, objective, and consistent method of gathering information
- Provide enough valid information about all relevant aspects of a respondent’s life to determine the first level of appropriate intervention
- Provide valid direction for conducting a personal interview
HOW IS THE NEEDS USED?

- NEEDS Summary score can be used to refer individuals to treatment
- NEEDS results are used as the basis for a personal interview
- NEEDS provides the necessary elements for a psycho-social history
- NEEDS provides the basis for development of treatment goals and objectives
- NEEDS may be used to reinforce or substantiate the personal interview results
WHAT IS THE NEEDS MODEL?

- NEEDS addresses the same standard assessment issues on which any assessor would focus and report.
- NEEDS looks for a pattern of respondent’s answers rather than looking at a single answer, as in an interview.
- The NEEDS decision rules are continuously evaluated and refined based on 25 years and well over 2,000,000 evaluations.
- Each measure of the NEEDS helps refine the respondent’s profile. The measures should support the final conclusions of the assessment.
- The NEEDS will become an extension of the interviewers personal style and technique.
GUIDELINES FOR USING THE NEEDS REPORT

The underlying question the NEEDS evaluation raises is “how likely is it that the person can and will change his/her behavior?” This question is addressed by:

- Evaluating the person’s attitude and how it may contribute to inappropriate decisions and impact efforts to change.

- Looking at patterns of past behaviors as an indicator of future behaviors.

- Does this behavior appear to be a function of stress arising out of specific circumstances? Issues such as SA, emotional, physical or other concerns may make behavior change unlikely.

- Does a person know how to change these behaviors, delay gratification, etc?
GUIDELINES FOR USING THE NEEDS REPORT

The NEEDS also addresses criminal history.

- This information is used to determine the level of risk a person may be to himself/others
- If a person is unable or won’t change behavior, there will be a need for increased supervision
- The NEEDS suggests levels of supervision based on how existing need deficiencies as past patterns of behavior will prevent the person from supervising their own behavior and making appropriate changes.
OVERVIEW OF NEEDS REPORTS

RESPONDENT ATTITUDE
BASIC PROBLEM SOLVING AND READING ABILITY
EMOTIONAL STABILITY ASSESSMENT
SUBSTANCE ABUSE ASSESSMENT
EMPLOYMENT ASSESSMENT
RELATIONSHIP AND SUPPORT SYSTEM
PHYSICAL HEALTH
EDUCATION
CRIMINAL HISTORY
NEEDS ASSESSMENT SUMMARY
SELECTED SUBSTANCE ABUSE RESPONSES
CUSTOM INFORMATION FOR CUSTOMER USE
NEEDS REPORT MEASURE OF INSTABILITY

SCORES RANGE FROM 0 - 25+. THE MORE INSTABILITY, THE HIGHER THE SCORE.*

SCORES:

0 - 5  NON-PROBLEMATIC.
6 - 10  BEGINNING OR POTENTIAL PROBLEM
11 - 15 PROBLEM NEEDING INTERVENTION
16 - 20 OR PROBLEM BEING ADDRESSED
21 +  DEFINITE PROBLEM NEEDING TX. A SEVERE PROBLEM.

*Except for Test Taking Attitude Score (TTA)
THE FOLLOWING REPORT SHOULD BE VIEWED AS A SERIES OF HYPOTHESES WHICH MAY REQUIRE FURTHER INVESTIGATION. INDIVIDUALS INTERPRETING THIS EVALUATION SHOULD BE KNOWLEDGEABLE IN SUBSTANCE ABUSE PROBLEMS AND POSSESS SCREENING AND ASSESSMENT SKILLS.
A: TEST TAKING ATTITUDE SCORE = (13)

<table>
<thead>
<tr>
<th>Range</th>
<th>0-7</th>
<th>8-11</th>
<th>12-17</th>
<th>18-23</th>
<th>24-26</th>
<th>27+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Avg.</td>
<td>17.32</td>
<td>5%</td>
<td>14%</td>
<td>30%</td>
<td>32%</td>
<td>13%</td>
</tr>
<tr>
<td>Males Avg.</td>
<td>17.14</td>
<td>5</td>
<td>14</td>
<td>32</td>
<td>33</td>
<td>12</td>
</tr>
</tbody>
</table>

This person's Test Taking Attitude Score suggests that he/she does not appear to feel a need to misrepresent himself on the test or during an interview.

... THE TEST TAKING ATTITUDE (TTA) SCORE REPRESENTS RESPONDENT APPROPRIATENESS.

- 0-7 Suggest emotional vulnerability.
- 8-11 Suggest very honest, possibility self-critical.
- 12-17 Confident attitude-Avg. for general population.
- 24-26 Naïve or inappropriate attempt to “look good”.
- 27+ Very inappropriate.
**B: BASIC PROBLEM SOLVING AND READING ASSESSMENT = (0)**
(The NEEDS Survey was completed in: 30 min.)

<table>
<thead>
<tr>
<th>Range</th>
<th>0-5</th>
<th>6-10</th>
<th>11-15</th>
<th>16-20</th>
<th>21+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Avg. = 1.52</td>
<td>94%</td>
<td>5%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Males Avg. = 1.52</td>
<td>94</td>
<td>5</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

... DOES PERSON HAVE MINIMAL SKILLS TO MAKE APPROPRIATE CHOICES.

... MEASURES READING LEVEL AT 5TH GRADE

... LOOKS AT MINIMAL PROBLEM SOLVING ABILITY.

... SOME OF THE ISSUES CONSIDERED:

A. TIME TO COMPLETE SURVEY
B. SIMPLE MATH.
C. SYMBOL IDENTIFICATION
D. SIMPLE LOGIC.
E. ATTITUDE - AN INAPPROPRIATE ATTITUDE MAY EXPLAIN HIGH SCORES IN THE AREA
THIS PERSON REPORTS A HISTORY OF EMOTIONAL PROBLEMS. ALTHOUGH HIS CURRENT EMOTIONAL STATE APPEARS TO BE STABLE AT THIS TIME, FURTHER INVESTIGATION SHOULD BE CONSIDERED.

HE REPORTS HAVING BEEN TREATED FOR EMOTIONAL PROBLEMS.
HE REPORTS BEING PHYSICALLY AND/OR SEXUALLY ABUSED AS A CHILD.
HE REPORTS HAVING BEEN DEPRESSED OR THAT LIFE WAS NOT WORTH LIVING.
HE REPORTS HAVING HAD EXPERIENCES OF SUDDEN FEAR OR PANIC FOR NO REASON.
HE REPORTS HAVING HAD FEAR OF PUBLIC PLACES.
HIS CRIMINAL HISTORY MAY INDICATE ATTITUDBINAL AND/OR EMOTIONAL CONCERNS THAT NEED FURTHER ASSESSMENT.

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<thead>
<tr>
<th>Range</th>
<th>0-5</th>
<th>6-10</th>
<th>11-15</th>
<th>16-20</th>
<th>21</th>
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<tbody>
<tr>
<td>Total</td>
<td>Avg.=7.89</td>
<td>48%</td>
<td>26%</td>
<td>15%</td>
<td>7%</td>
</tr>
<tr>
<td>Males</td>
<td>Avg.=7.64</td>
<td>50</td>
<td>24</td>
<td>14</td>
<td>8</td>
</tr>
</tbody>
</table>

C: EMOTIONAL STABILITY ASSESSMENT = (17)
... THIS MEASURE LOOKS AT TTA SCORES AS AN INDICATOR OF CURRENT EMOTIONAL VULNERABILITY.

... LOOKS AT REPORTED EMOTIONAL PROBLEMS.

... LOOKS AT LIFE STRESSES.

... LOOKS AT HISTORY OF AGGRESSIVE BEHAVIOR AND CRIMINAL ACTIVITY.

... LOOKS AT CURRENT AND PAST PHYSICAL AND/OR SEXUAL ABUSE.

... REPORTS RESPONSES TO MENTAL STATUS QUESTIONS.
PART 1

THIS PERSON REPORTS BEHAVIOR AND SYMPTOMS ASSOCIATED WITH BOTH A DRINKING AND DRUG USE PROBLEM. HOWEVER, HE INDICATES NOT USING ANY SUBSTANCES FOR AT LEAST 6 MONTHS, AND REPORTS TREATMENT AND/OR AA/NA INVOLVEMENT. IDENTIFICATION OF HIS REPORTED ABSTINENCE MAY BE NEEDED.

D: SUBSTANCE ABUSE ASSESSMENT = (29)
   ( DRINKING CAT. = 5   DRUG EVAL.  = 5 )

<table>
<thead>
<tr>
<th>Range</th>
<th>0-5</th>
<th>6-10</th>
<th>11-15</th>
<th>16-20</th>
<th>21+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Avg. = 11.65</td>
<td>33%</td>
<td>18%</td>
<td>14%</td>
<td>23%</td>
<td>13%</td>
</tr>
<tr>
<td>Males Avg. = 12.12</td>
<td>31</td>
<td>16</td>
<td>16</td>
<td>23</td>
<td>14</td>
</tr>
</tbody>
</table>

... EVALUATES CLINICAL, BEHAVIORAL, AND SOCIAL SYMPTOMS OF SUBSTANCE ABUSE AND USE.

... EVALUATES A PERSON'S PAST AND PRESENT SUBSTANCE ABUSE AND USE.
PART 2

SUGGESTED DSM-IV CLASSIFICATION BASED ON REPORTED DRUG OF CHOICE. 304.00 OPIOID DEPENDENCE.

He reports his most frequently used drug as other narcotics and reports his last use of it 6 to 12 months ago. He reports his second most frequently used drug as tranquilizers and reports his last use of it 6 to 12 months ago.

SUGGESTED DSM-IV CLASSIFICATION WITHOUT ALCOHOL AS A DRUG OF CHOICE. 303.9 Alcohol Dependence.

... PROVIDES DSM-IV CLASSIFICATION.

... PROVIDES INDICATION OF 1ST AND 2ND DRUGS OF CHOICE OVER PAST 3 YEARS.

... PROVIDES INDICATION OF LAST USE.
PART 3

HE BEGAN DRINKING ALCOHOL AT LEAST ONCE A MONTH WHEN HE WAS 10.
HE BEGAN USING DRUGS AT LEAST ONCE A MONTH WHEN HE WAS 20.
HE REPORTS BEING INVOLVED IN 1 INPATIENT AND 3 OUTPATIENT SUBSTANCE ABUSE TREATMENT(S).
HE REPORTS BEING INVOLVED IN 1 MEDICAL SUBSTANCE ABUSE DETOXIFICATION(S).

D: SUBSTANCE ABUSE ASSESSMENT CONT'D.

... REPORTS ON AGE OF FIRST REGULAR USE.

... REPORTS ON NUMBER AND TYPE OF SUBSTANCE ABUSE TREATMENTS.

... REPORTS SPECIFIC SUBSTANCE ABUSE RESPONSES AT THE END OF THE NEEDS REPORT.
DSM-IV Criteria

Substance Abuse
One or more of the following within a 12 month period:

1) Recurrent use resulting in a failure to fulfill major role obligations at work, school, or home

2) Recurrent use in situations in which it is physically hazardous

3) Recurrent substance-related legal problems

4) Continued use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by use

And:

The symptoms have never met the criteria for Substance Dependence
DSM-IV Criteria

Substance Dependence
Three or more of the following in a 12 month period:

1) Tolerance, as defined by either of the following:
   1) A need for markedly increased amounts of the substance to achieve intoxication or desired effect
   2) Markedly diminished effect with continued use of the same amount of the substance

2) Withdrawal, as manifested by either of the following:
   1) The characteristic withdrawal syndrome for that substance
   2) The same (or closely related) substance is taken to relieve or avoid withdrawal symptoms
3) The substance is often taken in larger amounts or over a longer period than was intended

4) There is a persistent desire or unsuccessful efforts to cut down or control use

5) A great deal of time is spent in activities necessary to obtain, use, or recover from use of, the substance

6) Important social, occupational, or recreational activities are given up or reduced because of substance use

7) Substance use is continued despite knowledge of having a persistent or recurrent physical or psychological problem caused, or exacerbated, by the substance
Specifiers:

With Physiological Dependence

Without Physiological Dependence

Remission Specifiers:

Early Full Remission: No Criteria met for 1-11 months

Early Partial Remission: One or more criteria met 1-11 months, but not full criteria for dependence

Sustained Full Remission: No Criteria met 12+ months

Sustained Partial Remission: One or more criteria met for 12+ months, but not full criteria for dependence
E: EMPLOYMENT ASSESSMENT = (8)

<table>
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<tr>
<th>Range</th>
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<th>21+</th>
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<tr>
<td>Total Avg.= 5.83</td>
<td>66%</td>
<td>21%</td>
<td>8%</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Males Avg.= 5.73</td>
<td>68</td>
<td>20</td>
<td>7</td>
<td>2</td>
<td>4</td>
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</table>

THIS PERSON IS EMPLOYED AND REPORTS 9 MONTH(S) OF FULL TIME EMPLOYMENT DURING THE PAST YEAR, AND 33 MONTHS DURING THE PAST THREE YEARS.

HE RATES HIS CURRENT EMPLOYMENT SITUATION AS NEGATIVE.

THIS PERSON HAS HAD 1 JOB DURING THE PAST THREE (3) YEARS.

HE HAS BEEN ABSENT FROM WORK 15 DAYS DURING THE PAST 12 MONTHS.

HE REPORTS HAVING BEEN INVOLVED A TOTAL OF ONE TIME IN ONE OF THE FOLLOWING FINANCIAL DIFFICULTIES: AN EVICTION, A REPOSESSION, A GARNISHMENT, OR BANKRUPTCY.
... THIS MEASURE ADDRESSES THE PERSON'S EMPLOYMENT STABILITY OVER THE PAST THREE YEARS.

... EMPLOYMENT STATUS IS EVALUATED IN RELATION TO AGE AND EDUCATION STATUS.

... LOOKS AT ATTITUDE TOWARD THE JOB.

... LOOKS AT FINANCIAL MANAGEMENT DIFFICULTIES.

... LOOKS AT INCOME LEVEL AND FINANCIAL DEPENDENCE.
THIS PERSON REPORTS BEING MARRIED BETWEEN 4 AND 5 YRS. AND RATES THIS RELATIONSHIP AS POSITIVE.

HE IS CURRENTLY LIVING WITH HIS SPOUSE.

HE REPORTS HAVING 2 CHILDREN AND RATES HIS CURRENT FAMILY LIFE POSITIVELY.

HE INDICATES HAVING 4 RESIDENCES DURING THE PAST YEAR.

HE INDICATES THAT AT LEAST ONE OF HIS IMMEDIATE FAMILY MEMBERS HAS SPENT TIME IN JAIL.
... THIS MEASURES THE STABILITY OF THE PERSON'S RELATIONSHIPS AND LIFE STYLE.

... LOOKS AT CURRENT LIVING STATUS.

... LOOKS AT LENGTH OF SIGNIFICANT RELATIONSHIP.

... LOOKS AT HOW THIS RELATIONSHIP IS EVALUATED.

... LOOKS AT RELATIONSHIP WITH DEPENDENT CHILDREN.

... LOOKS AT FAMILY HISTORY OF CRIMINAL BEHAVIOR.

... LOOKS AT SUBSTANCE ABUSE ISSUES AND THERE POSSIBLE IMPACT ON THE RELATIONSHIP.
G: PHYSICAL HEALTH ASSESSMENT = ( 5)

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<th>Range</th>
<th>Total Avg.= 2.73</th>
<th>Males Avg.= 2.42</th>
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<tr>
<td>0-5</td>
<td>93%</td>
<td>94</td>
</tr>
<tr>
<td>6-10</td>
<td>2%</td>
<td>2</td>
</tr>
<tr>
<td>11-15</td>
<td>1%</td>
<td>1</td>
</tr>
<tr>
<td>16-20</td>
<td>4%</td>
<td>4</td>
</tr>
<tr>
<td>21+</td>
<td>0%</td>
<td>0</td>
</tr>
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</table>

THIS PERSON REPORTS SOME CONCERNS ABOUT HIS PHYSICAL HEALTH. THE IMPACT ON HIS ABILITY TO FUNCTION EFFECTIVELY MAY NEED TO BE EVALUATED.

HE REPORTS THAT HE IS CURRENTLY UNDER A DOCTOR’S CARE.

HE REPORTS BEING UNABLE TO WORK OR ATTEND SCHOOL THIS PAST YEAR FOR 15 DAY(S) BECAUSE OF HEALTH REASONS.
... THIS MEASURE LOOKS TO SEE IF HEALTH ISSUES MAY BE RELATED TO THE PERSON'S CURRENT LEVEL OF FUNCTIONING.

... LOOKS AT THE PERSON'S PERCEPTION OF HIS/HER PHYSICAL STATUS.

... LOOKS AT INVOLVEMENT IN MEDICAL CARE.

... LOOKS AT TIME SPENT AWAY FROM RESPONSIBILITIES BECAUSE OF PHYSICAL PROBLEMS.
H: EDUCATION ASSESSMENT = ( 0)

<table>
<thead>
<tr>
<th>Range</th>
<th>0-5</th>
<th>6-10</th>
<th>11-15</th>
<th>16-20</th>
<th>21+</th>
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<tbody>
<tr>
<td>Total Avg. = 3.32</td>
<td>89%</td>
<td>5%</td>
<td>5%</td>
<td>1%</td>
<td>0%</td>
</tr>
<tr>
<td>Males Avg. = 3.24</td>
<td>88</td>
<td>5</td>
<td>6</td>
<td>2</td>
<td>0</td>
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</tbody>
</table>

THIS PERSON HAS HAD 12 YEARS OF FORMAL EDUCATION.

HE HAS HAD SOME SUCCESS IN FINDING FULL-TIME EMPLOYMENT DURING THE PAST YEAR.

... THIS MEASURE LOOKS AT WHETHER THE PERSON'S EDUCATION IS RELATED TO HIS/HER CURRENT FUNCTIONING.

... LOOKS AT ANY SPECIAL TRAINING.
I: CRIMINAL HISTORY ASSESSMENT = (18)

<table>
<thead>
<tr>
<th>Range</th>
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<th>6-10</th>
<th>11-15</th>
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<th>21+</th>
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<tbody>
<tr>
<td>Total</td>
<td>Avg.</td>
<td>63%</td>
<td>22%</td>
<td>11%</td>
<td>3%</td>
</tr>
<tr>
<td>Males</td>
<td>Avg.</td>
<td>58</td>
<td>24</td>
<td>14</td>
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</table>

.15 MOST RECENT BAC
18 AGE OF FIRST CONVICTION
1 Felony Conviction(s) Reported
2 Alcohol/Drug Arrest(s) Reported
1 Misdemeanor Conviction(s) Reported - (Non-Alcohol/Drug)
3 Reported Traffic Ticket(s)
1 Incarceration(s)

... THIS MEASURE LOOKS AT THE PERSON'S HISTORY OF CRIMINAL ACTIVITY.
... LOOKS AT THIS BEHAVIOR AND SCORES IT BASED ON NATIONAL CRITERIA EMPLOYED IN CORRECTIONS "NEEDS - RISK" EVALUATION.
... THIS MEASURE DETERMINES RISK SUPERVISION LEVEL ADDRESSED LATER IN THE NEEDS REPORT.
PART 1

NOTE: This person is in a jail environment at the time of this NEEDS SURVEY administration. He has been there between 1 and 15 days. These circumstances should be considered when evaluating the NEEDS Recommendations below.

ALTHOUGH THIS PERSON INDICATES THAT HE IS ADDRESSING HIS SUBSTANCE ABUSE PROBLEM, HE HAS OTHER SIGNIFICANT LIFE STRESS ISSUES THAT NEED ADDRESSING AS WELL. HIS SUBSTANCE ABUSE TREATMENT SHOULD BE MAINTAINED AND MONITORED BEFORE FOCUSING ON THESE OTHER ISSUES.

HE REPORTS A HISTORY OF EMOTIONAL PROBLEMS.

HE REPORTS ISSUES THAT COULD BE RELATED TO CURRENT OR FUTURE PERSONAL RELATIONSHIPS.

HE REPORTS HEALTH ISSUES THAT COULD BE CAUSING PROBLEMS.

J: "NEEDS" ASSESSMENT = (24)

<table>
<thead>
<tr>
<th>Range</th>
<th>0-5</th>
<th>6-10</th>
<th>11-15</th>
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<th>21+</th>
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<tbody>
<tr>
<td>Total Avg.</td>
<td>14.90</td>
<td>17%</td>
<td>22%</td>
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<td>22%</td>
</tr>
<tr>
<td>Males Avg.</td>
<td>14.87</td>
<td>18</td>
<td>22</td>
<td>20</td>
<td>20</td>
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</tbody>
</table>

PART 1

NOTE: This person is in a jail environment at the time of this NEEDS SURVEY administration. He has been there between 1 and 15 days. These circumstances should be considered when evaluating the NEEDS Recommendations below.

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HE REPORTS A HISTORY OF EMOTIONAL PROBLEMS.

HE REPORTS ISSUES THAT COULD BE RELATED TO CURRENT OR FUTURE PERSONAL RELATIONSHIPS.

HE REPORTS HEALTH ISSUES THAT COULD BE CAUSING PROBLEMS.
J: "NEEDS" ASSESSMENT CONT'D.

PART 1 CONT'D.

... THIS SECTION SUMMARIZES ALL SECTIONS ADDRESSED EXCEPT CRIMINAL HISTORY.

... LOOKS TO SEE IF THE PERSON IS IN A CONTROLLED ENVIRONMENT AT THE TIME THE SURVEY WAS ADMINISTERED.

... LOOKS AT A PRIORITY OF INTERVENTION AS FOLLOWS:

A. RESPONDENT ATTITUDE
B. SUBSTANCE ABUSE
C. EMOTIONAL VULNERABILITY
D. MENTAL CAPABILITY
E. EMPLOYMENT STABILITY
F. PERSONAL RELATIONSHIPS AND SUPPORT
G. EDUCATION
H. PHYSICAL HEALTH
PART 2

• SUPERVISION LEVEL*

• SUGGESTED NEEDS LEVEL OF SUPERVISION IS HIGH- (4).
• SUGGESTED RISK LEVEL OF SUPERVISION IS HIGH-(4).

... DEGREE PERSON CAN MONITOR HIS/HER BEHAVIOR.

... NEED VULNERABILITY AND CRIMINAL BEHAVIOR INFLUENCE EACH OTHER.

... FOUR SUPERVISION LEVELS ARE BASED ON SIMILAR CRITERIA EMPLOYED IN CORRECTIONS.

MINIMUM(2), MEDIUM(3), HIGH(4) AND MAXIMUM(5).
PART 3

• SUBSTANCE ABUSE REFERRAL *

LEVEL I REFERRAL TO OUTPATIENT TREATMENT IS RECOMMENDED. (ASAM I)

Range                              0           I            II           III          IV
Total  Avg.= 0.81            0%     42%      37%       19 %      3%
Males Avg.= 0.85            0        40         39          19           3

... ASAM* CRITERIA AND DSM-IV CLASSIFICATIONS ARE USED AS GUIDELINES FOR SUBSTANCE ABUSE RECOMMENDATIONS.

a. Level IV Medical Managed
b. Level III Medical Monitoring
c. Level II Intensive outpatient Tx.
d. Level I Outpatient Tx.

* American Society of Addiction Medicine.
<table>
<thead>
<tr>
<th>LEVEL IV</th>
<th>MEDICAL MANAGED CARE (ASAM IV)</th>
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</thead>
<tbody>
<tr>
<td>LEVEL III</td>
<td>MEDICAL MONITORING (ASAM III.5-III.7)</td>
</tr>
<tr>
<td>LEVEL II</td>
<td>INTENSIVE OUTPATIENT (ASAM II.1)</td>
</tr>
<tr>
<td>IIa</td>
<td>AFTER DETOX. IS ADDRESSED, REFERRAL TO CONTROLLED ENVIRONMENT SUCH AS HALFWAY HOUSE, DAY CARE, ETC. (ASAM III.3)</td>
</tr>
<tr>
<td>IIb</td>
<td>DETOX. MAY NOT BE NEEDED, BUT REFERRAL TO CONTROLLED ENVIRONMENT SUCH AS HALFWAY HOUSE, DAY CARE, ETC. (ASAM III.1)</td>
</tr>
<tr>
<td>IIc</td>
<td>INTENSIVE OUTPATIENT AFTER DETOX. IS ADDRESSED. (ASAM II.5)</td>
</tr>
<tr>
<td>LEVEL I</td>
<td>OUTPATIENT (ASAM I)</td>
</tr>
<tr>
<td>Ia</td>
<td>SOME INDIVIDUALS WHO REPORT ABSTINENCE, BUT DEMONSTRATE AN INAPPROPRIATE ATTITUDE WILL BE REFERRED TO LEVEL I. (ASAM I)</td>
</tr>
<tr>
<td>Ib</td>
<td>SOME INDIVIDUALS WHO REPORT A HISTORY OF SUBSTANCE ABUSE, BUT REPORT RECENT ABSTINENCE WILL BE REFERRED TO LEVEL I. (ASAM I)</td>
</tr>
</tbody>
</table>
LEVEL 0

NO REFERRAL, BUT POSSIBLE VERIFICATION MAY BE NEEDED. (ASAM 0.5)

0a INDIVIDUALS WHO WERE CHEMICALLY DEPENDENT AND REPORT NO USE FOR AT LEAST ONE YEAR. (ASAM 0.5)

0b BEHAVIOR SUGGESTING A POTENTIAL ALCOHOL USE PROBLEM. (ASAM 0.5)

0c BEHAVIOR SUGGESTING A POTENTIAL DRUG USE PROBLEM. (ASAM 0.5)

0 NO SUBSTANCE ABUSE PROBLEM IDENTIFIED AT THIS TIME. HOWEVER, EDUCATION MAY NEED CONSIDERATION. (ASAM 0.5)
**K: SUMMARY GRAPH**

### SEVERITY OF NEED PROBLEM

<table>
<thead>
<tr>
<th></th>
<th>0-5</th>
<th>6-12</th>
<th>13-20</th>
<th>21+</th>
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<tbody>
<tr>
<td>NONE</td>
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<tr>
<td>BEGIN/</td>
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<tr>
<td>MIDDLE</td>
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<tr>
<td>SEVERE</td>
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### INAPPROPRIATENESS

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<td>INAPPROPRIATENESS</td>
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### PROBLEM SOLVING STATUS

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### EMOTIONAL HEALTH STATUS

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### SUBSTANCE ABUSE STATUS

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### EMPLOYMENT STATUS

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### RELATIONSHIP STATUS

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### PHYSICAL HEALTH STATUS

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### EDUCATIONAL STATUS

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### CRIMINAL RECORD STATUS

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### OVERALL "NEEDS" SUMMARY

<p>| |</p>
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<tr>
<td>24</td>
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*4.86 IS THIS PERSON'S AVERAGE PROBLEM RATING.*
Drunk a fifth or equivalent of beer or wine in 1 day.
I can't always stop drinking when I want.
Family/friends have complained about my drinking.
Blackouts.
My drinking keeps or has kept me from being as effective as I would like.
I feel guilty about my drinking.
Drinking has caused problems with family/friends.
Spouse has attended Alanon.
My spouse/friend threatened to leave because of my drinking.
Tried to stop drinking, but couldn't.
Hide the fact I have been drinking.
Morning relief drinking.
Hands shake after heavy drinking.
Reports parent(s) may have, or had a drinking problem.
My doctor has prescribed medication to help me relax.
I have abused social or prescription drugs.
I feel guilty about my drug use.
My family/friends have complained about my drug use.
I have experienced severe after-effects from heavy drug use.
I have tried to stop using drugs, but started using again.
Reports using or trying 3 different drugs during life.

ALCOHOL
TRANQUILIZERS
OTHER NARCOTICS
Brief Summary of Research on the NEEDS Assessment

48th District Court DWI Study, Bloomfield Hills, MI
When compared to personal interview
96% General Agreement
74% Exact agreement
4% Disagreement

Comparing the NEEDS Risk/Supervision level
Adult Probation Officers in a large Georgia court
96% Within one level
57% Exact Agreement
Brief Summary of Research on the NEEDS Assessment (cont.)

North Carolina DWI Pilot Study, Department of Alcohol and Drug Abuse. 1368 DUI Offenders
  When compared to personal interview
  96.7% General agreement
  62.7% Exact agreement
  3.3% Disagreement

Wright State University School of Medicine WIP
  86% General agreement
  59% Exact agreement
When results were different, the assessment instrument found more of a problem 9% of the time, less 5%
ADMINISTRATION OF THE NEEDS SURVEY
Available Platforms

A stand-alone version installed on a single PC
- Program CD provided by ADE
- Data stored on local database

A web-based version available for users with Internet access
- No installation required
- Data stored remotely on a secure server

As part of a web-based Client Tracking Program
- Allows staff to monitor clients over time
- Records compliance with program mandates/goals
ADMINISTRATION OF THE NEEDS SURVEY

A. Setting a professional tone

- Many respondents will be resistant, resentful and even angry that they have to go through the process.

- Staff interaction with the respondent sets the tone for how the respondent perceives the assessment process.

- Try not to participate in respondent’s resistance.
B. Instructions for Administering the NEEDS Survey

1. Reading and Comprehension Issues

   It is important to determine if the respondent has reading and/or comprehension issues.

   - Take notice of how they handle prior related tasks
   - Ask if they anticipate having any problems
   - Have them read out loud and answer question # 1 of the NEEDS Survey
ADMINISTRATION OF THE NEEDS SURVEY

B. Instructions for Administering the NEEDS Survey

2. Administering the NEEDS Survey

- NEEDS is a continuation of information gathering
- Review page one of the NEEDS Survey
- Fill in custom boxes and have respondent check for accuracy
- Record time student started and finished Survey
B. Instructions for Administering the NEEDS Survey

3. Instructions to the Student

- Make sure you do not leave any question unanswered
- Only question # 120 allows for multiple answers, all other questions require only one answer
- Read each item carefully and answer the question as it applies to you
- “There are no trick questions”
4. Minimize Difficult Situations

- Do not engage in potentially harmful interaction about a respondents concerns
- The NEEDS Survey is a necessary part of the assessment process and is not a matter for debate or discussion
- Maintain a supportive but professional manner while avoiding over-concern
- “Answer the question as you think it applies to you”
5. Checking for Proper Completion of the NEEDS Survey

- Check to see if all questions have been answered
- Make sure all questions only have one answer (except Q. 120)
- Responses should only be numbers or circled “Y” or “N”
- Look for series of questions that are all Yes or all No
SUPPORT

Call ADE support for any questions or issues.

800 334-1918

OR

Send an Email to: support@adeincorp.com

We will respond as soon as possible.

THANK YOU!