ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION

PSYCHOLOGICAL/PSYCHOEDUCATIONAL EVALUATION

Service Codes 118, 119, 120, 121 and 180

SERVICE DEFINITION:

This service provides for specific assessment and / or consultation to determine and address behavioral health problems and may recommend or advise certain treatment interventions. Consultation may consist of providing assistance in planning, developing and implementing programs or treatment plans as well as staff consultation and/or training.

STANDARDS/LICENSURE REQUIREMENTS:

Psychologists must be licensed by the Board of Psychologists Examiners under Arizona Revised Statues, Title 32, Chapter 19, and Articles 2 & 3. Contractor shall provide evaluation services only if it is within his/her scope of practice and be able to demonstrate experience and training, if requested. All testing must be performed through standardized and non-abbreviated psychometric assessments unless abbreviated assessments are clinically appropriate. All diagnostic statements shall conform to current DSM-5 terminology.

USE OF PSYCHOMETRISTS:

The use of psychometrists by the Contractor is permitted for and shall be limited to the administering of testing instruments and scoring. Psychometrists shall not interpret test results for evaluations completed under this Contract. Psychometrists must possess a minimum of a bachelor's degree with a major in psychology or a closely related field of study and must have completed training in administering and scoring tests under the supervision of a licensed psychologist to include satisfactory completion of coursework in test interpretation, psychometrics and measurement theory, and educational statistics. Certification by the National Association of Psychometrists (NAP) or Board of Certified Psychometrists (BCP) is preferred.

Contractor shall maintain a personnel file on all psychometrists who provide direct service to clients. A complete personnel psychometrist file shall include:

1. Qualifications to provide the service, including a record of dates and locations of work experience, education (copy of diploma or official transcripts), and training as it relates to service;

2. Documentation of NAP or BCP certification, as applicable;

3. Compliance with the fingerprinting requirements and notarized AOC *Criminal History Affidavit* form as specified in accordance with the AOC Standard Terms & Conditions;

4. Compliance with the confidentiality requirements as specified in accordance with the AOC Standard Terms & Conditions;

5. Copy of signed conflict of interest agreement, as it pertains to the psychometrist and referred client relationship;

6. Copy of insurance as specified in accordance with the AOC Standard Terms & Conditions;

7. Copy of the signed service agreement which must incorporate and reference the AOC Standard Terms & Conditions, Special Contract Conditions, and relevant AOC service specifications.

UNITS OF SERVICE:

One unit equals one evaluation. Evaluations may be requested as a Comprehensive Evaluation, Evaluation Update, or Evaluation Addendum in accordance with this specification.

SERVICE GOALS:

To assess behavioral health and emotional needs of the individual within the individual's cultural context.

SERVICE TASKS:

For any standard psychological assessment, the tasks listed below must be completed.

1. Review referral material and questions, inclusive of the client's individual education plan information (IEP) when applicable; assess the individual's readiness for testing; develop an evaluation strategy; and answer the stated referral question.

2. The Psychologist shall conduct collateral interviews with the following parties. Collateral interviews may be discretionary if the Contractor has obtained comprehensive written information that is deemed current and relevant:

    a. Probation Officer: Obtain information to identify youth issues to be assessed, and highlight present concerns impacting the youth and family.

b. Parent/Guardian: Obtain information regarding family history, dynamics and functioning, and parental impressions of the presenting problems or concerns of the youth.

c. Interested Parties: Gather information from school personnel, assigned case managers, counselors and others, who have been or are currently involved directly with the youth and family.

3. Assess the strengths and assets of the youth and family.

4. Conduct psychological testing using standardized, non-abbreviated assessment instrument, which may contain most any aspect of intellectual or emotional functioning, including personality traits, attitudes, intelligence, or emotional concerns.

5. For Psychoeducational evaluations, conduct educational testing to assess overall potential or aptitudes and deficits in learning.

6. Provide an individualized written report to referring county and/or referring court containing the following within ten (10) business days of evaluation appointment, in accordance with AOC Standard Terms & Conditions:

a. Reason for referral;

b. Background information;

c. Identification of tests utilized, including rationale when abbreviated psychometric assessments were determined clinically appropriate;

d. Interpretations of the data (citing standard scores & percentile ranks);

e. Identification of collateral sources and specific records reviewed in the completion of the evaluation which may include, but is not limited to, collateral interviews, prior psychological evaluation reports, disposition reports, and police reports;

f. Diagnostic statement which conforms to current DSM-5 terminology with clearly identified supporting characteristics and symptoms specified in the report. Diagnosis based on historical data or information should include the statement “by history”;

g. Statement of findings and recommendations to include the following:

i. Specific identified issues and corresponding treatment recommendations and/or treatment interventions;

ii. Type of care needed (ie: substance abuse, mental health, sex offender);

iii. Level of care (inpatient, residential, outpatient) based on identifying least restrictive environment without recommending specific treatment provider or location;

iv. Need for other diagnostic tests;

v. Recommendations shall include cultural considerations as appropriate.

7. Prepare and provide all required reports in accordance with AOC Standard Terms & Conditions.

8. Provide testimony at court hearings if necessary.

CONTENT OF CLIENT RECORD:

Confidentiality and Content of Client Records of the AOC Standard Terms & Conditions are not applicable to this service. The required client record items for this service are listed below.

At a minimum, the record for each client shall include the following:

1. Client assessments and evaluations as specified in the AOC Standard Terms & Conditions including pertinent notes taken during the evaluation process and interviews, as applicable, with client, family, probation officer and/or other key persons interviewed;

2. Copies of any consultation reports, evaluations and referral material conducted by other agencies, professionals or physicians which are relevant to treatment and/or services to be provided by the Contractor;

3. Referral source summary, including the reason for referral, presenting problem and medications and dosage at the time of referral;

4. Evaluation report required in accordance with AOC Standard Terms & Conditions and document the date and method of report dissemination to identified parties;

5. Fully documented incident reports as required in accordance with AOC Standard Terms & Conditions;

6. Notations of communications pertinent to the client's well-being or treatment;

7. A copy of the signed SAF for initiating services;

8. Documentation of the client's receipt of his/her rights as required in accordance with AOC Standard Terms & Conditions; excluding sub-paragraphs that require client consent or receiving treatment, and parent/guardian release of information and A.R.S.§36-504.

9. Notation of communication regarding the occurrence of the evaluation service and all attempts made to conduct a collateral interview, as applicable, with the client's parent(s), probation officer, guardian or designated representative, if person(s) was not involved in the evaluation process;

10. If applicable, all raw test data shall identify by name and title the person administering and scoring the testing instrument(s) and date the test was administered;

11. An informed consent signed by the client's parent, guardian, or designated representative, except when testing is mandated by law or government regulations; or a copy of the client's signed Terms and Conditions of Probation; or a copy of the client's signed Terms of Release Conditions; or a copy of the court minute entry ordering the completion of an evaluation.

12. Release of written evaluation to parties other than the referring Court/Probation Department, ASC/AOC, and as authorized by the Contract Officer to receive it is prohibited without court order in accordance with the AOC Standard Terms & Conditions.

REVIEW AND QUALITY ASSURANCE:

The AOC may periodically require the Contractor to participate in a peer review process to ensure that the Contractor is providing quality evaluations and maintaining acceptable service delivery standards. The AOC may also periodically request that the juvenile courts complete a questionnaire in order to evaluate the content and usefulness of the Contractor's written evaluations.

PSYCHOLOGICAL/PSYCHO-EDUCATIONAL EVALUATION:

Comprehensive Psychological/Psycho-educational Evaluation or Re-Evaluation:

This evaluation will result in a comprehensive understanding of the emotional behavioral and educational needs of the client and family. The report must include test results; interpretation of the data; a diagnostic statement which conforms to current DSM-5 terminology; clinical and collateral interview findings and specific treatment recommendations. A comprehensive re-evaluation may occur ten (10) months or more after a comprehensive evaluation or if an evaluation update will not adequately address reason for referral.

Evaluation Update:

This evaluation update shall include a clinical interview and review of records/information, may include additional testing, and will result in a written report updating existing information that was cited in an evaluation prepared within the preceding ten (10) months and will make specific treatment recommendations, identify significant changes or address further need for evaluation. The Contractor may request a comprehensive re-evaluation if it is determined an evaluation update will not adequately address reason for referral.

Evaluation Addendum:

The addendum may be conducted when there is a need for clarification of the client's issues and/or new information has emerged within the past ninety (90) days. An evaluation addendum does not include client contact.

Professional Consultation:

Consultation may include, but not limited to, multi- disciplinary team staffing, court testimony, client and parent explanation of findings or on site case consultation as requested and authorized by the referral source. Consultations must be billed in fifteen (15) minute increments.

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I have read and fully understand the requirements to provide psychological and psycho-educational evaluations, agree to all requirements and restrictions and propose the following rates:

Evaluation Addendum (service code 118)	Proposed rate $ _____ / addendum
Evaluation Update (service code 119)	Proposed rate $ _____ / update
Psychological Evaluation (service code 120)	Proposed rate $ _____ / evaluation
Psycho-Educational Evaluation (service code 121)	Proposed rate $ _____ / evaluation
Professional Consultation (service code 180)	Proposed rate $ _____ / 15 minutes

Other agreement: _____

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_____

Contractor Signature / Date:

AOC USE ONLY: DO NOT FILL IN BEYOND THIS LINE

Evaluation Addendum (service code 118)	Final rate $ _____ / addendum
Evaluation Update (service code 119)	Final rate $ _____ / update
Psychological Evaluation (service code 120)	Final rate $ _____ / evaluation
Psycho-Educational Evaluation (service code 121)	Final rate $ _____ / evaluation
Professional Consultation (service code 180)	Final rate $ _____ / 15 minutes

Other agreement: _____

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_____ _____

Contractor Signature / Date AOC Signature / Date