

Diagnostic Clarification and Treatment Recommendations for TERM Psychological Evaluation - PARENT

See TERM Handbook sections on “Required Format and Elements of a CFWB Psychological Evaluation” posted on Optum TERM Website www.optumsandiego.com/

DIAGNOSTIC CLARIFICATION AND TREATMENT RECOMMENDATIONS EVALUATION - PARENT

Diagnostic Clarification and Treatment Recommendations are needed. Please see the accompanying Evaluation Request Form (04-178) to see if the client is already being seen by a licensed mental health professional and review all provided history from the provider and social worker to see why diagnostic clarification and treatment recommendations are needed at this time.

Evaluation narrative MUST include the following components:

- a. What is the parent’s cognitive/intellectual functioning? Is there evidence of impairments that would prevent parent from substantially benefiting from services within legal timelines for this case?
- b. What is the parent’s emotional and psychological functioning? Are criteria met for any Psychotic, Mood, or Anxiety Disorder (DSM-5-TR disorder) or Personality Disorder (DSM-5-TR disorder)? If so, would these disorders prevent parent from substantially benefiting from services within the legal timelines for this case?
- c. For a client with this clinical presentation, what is the typical required length of treatment to see a significant reduction in symptoms and/or increase in psychosocial functioning?
- d. Are there indications of personality pathology that do not meet full criteria for a diagnosis but that may negatively impact ability to safely parent? What is the parent’s level of insight, judgment, and motivation to participate in services? What are the implications regarding the parent’s ability to parent safely and/or benefit from reunification services, including therapy?
- e. Are there any other diagnostic considerations that may be impacting the parent’s motivation to participate in services or that may be impacting the parent’s insight, judgment, and/or ability to benefit from treatment?
- f. Are there any current alcohol or other substance abuse issues? If so, how might these impact the parent’s response to treatment and/or ability to safely parent?
- g. Is continuation of therapy appropriate at this time? If so, are there specific treatment recommendations? Are there specific cultural/linguistic considerations regarding intervention choice or approach? Is there a specific treatment modality that may be most appropriate.
- h. Objective measures of personality and psychopathology, normed and validated with internal measures of validity/response bias, are required for all psychological evaluations, unless there is valid clinical justification for not doing so specified in the report (i.e., due to cognitive or psychiatric compromise, lack of age appropriate measures, literacy limitations, or significant defensiveness invalidating results). An appropriate alternative is to rely on other assessment components (behavioral observation, collateral reports, clinical interview) and acknowledge potential consequent limitations in the report. The lack of normative data and objective scoring limit the usefulness of projective or “performance-based” instruments in the forensic context. Reliance on instruments that lack requisite scientific validity and/or reliability will not meet TERM standards for quality review.