Clinical Guidelines and Service Definitions
Sex Offense-Specific Evaluation: Adult Non Criminal

Originated 8/03
Reviewed 3/17/13
Revised 5/17/13
CAC Approved 5/17/13

Funding Stream:
This service is funded by Core Services if the client does not have the ability to self-pay or no other resources are available. Division Manager approval is required.

Definition of Service:
- **Service goals are centered on promoting child and family safety and family protective capacity.**
- This is a clinical assessment to determine the level of danger that a given individual may pose to children. This can be used if the allegations are significant enough to warrant Department of Human Services intervention but there are no legal charges of a sexual offense against the individual. The evaluation is used to make recommendations for structured interventions, if needed, that will best protect children and vulnerable adults in the community. An arousal screening (ABEL or PPG) and polygraph will be authorized in addition to the evaluation. These additional services may or may not be used due to clinical appropriateness or attorney request/court order prohibiting their use in the absence of criminal charges.
- **The report should contain the following information:** Identifying Information, Referral Source, Reason for Referral, Collateral Contacts, Sexual History Evaluation, Level of Deception and/or Denial, Other Findings (may include Character Pathology Mental and/or Organic Disorders, Drug/Alcohol Use, Stability of Functioning, Self-esteem and Ego-Strength Medical/Neurological/Pharmacological Needs, Level of Violence and Coercion, Escalation of High-Risk Behaviors, Motivation and Amenability for Treatment), Risk of Re-Offense, Potential Risk to Primary Victim/Secondary Victims, Treatment and Supervision Needs, Impact on the Victim (when possible) and any recommendations for further evaluation.

Estimated Length of Evaluation:
Six to ten hours over several sessions (does not include time needed for the arousal screening or polygraph)

Frequency of Services:
One time per year

Provider Credentials:
Provider must meet the SOMB’s criteria for Evaluators

Provider Responsibilities:
Report required within ten business days of completed evaluation. Both the Caseworker and Care Coordinator are to receive copies of the report.
Caseworker Responsibilities:
Caseworker is responsible for providing specific referral question(s) to the Care Coordinator on the referral form; this will enable the provider to most effectively address the relevant issues.

Staffing:
Not applicable.