## Assessment

The next several questions are about the assessment process and clinical services you offer in your program.

**AT01.** How do you assess clients’ *substance abuse status* on intake?

Choose **all that apply**

a. ACCUCARE assessments and screening  
b. ASI (Addiction Severity Index)  
c. GAF (Global Assessment of Functioning)  
d. SASSI (Substance Abuse Subtle Screening Inventory)  
e. SUDDS (Substance Use Disorder Diagnostic Schedule)  
f. Interview by staff clinician  
g. We don’t assess substance abuse status  
h. Other (please specify):  
i. ASAM (American Society of Addiction Medicine)  
j. DSM checklist  
k. MAST (Michigan Alcohol Screening Test)

**AT02.** Do you assess clients’ *motivation for change* on intake?

1. **yes** [go to question AT02_1]  
0. **no** [go to question AT03]
I.27

Assessment

**INTRODUCTION > BACKGROUND > WORKFORCE > ASSESSMENT/TREATMENT > EVIDENCE-BASED TREATMENTS > QUALITY & LEARNING**

AT02_1. How do you assess clients’ **motivation for change** on intake?
Choose all that apply

a) ☐ SOCRATES

b) ☐ LOCI

c) ☐ Interview by staff clinician

d) ☐ Other (please specify): ________________

e) ☐ Motivational Interviewing (MI)

f) ☐ Stages of Change, TTM, URICA
<table>
<thead>
<tr>
<th>AT03a</th>
<th>AT03b</th>
<th>AT03c</th>
<th>AT03d</th>
<th>AT03e</th>
<th>AT03f</th>
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<th>AT03i</th>
<th>AT03j</th>
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**INTRODUCTION > BACKGROUND > WORKFORCE > ASSESSMENT/TREATMENT > EVIDENCE-BASED TREATMENTS > QUALITY & LEARNING**

AT03. What other issues do you assess on intake?  
Choose **all that apply**

- a  [ ] mental health
- b  [ ] trauma history
- c  [ ] suicidality
- d  [ ] physical health
- e  [ ] psychosocial issues
- f  [ ] cultural backgrounds
- g  [ ] spirituality
- h  [ ] Other (please specify): ______________________________________
- i  [ ] substance abuse treatment history
- j  [ ] gambling
- k  [ ] legal issues

AT04. Do your clients receive a **DSM multi-axial diagnosis** on intake?  

- 1  [ ] yes  
- 0  [ ] no
Our next few questions are about the treatment approaches and specific services you provide in your program.

AT05. Does your program provide **treatment services**? By treatment services, we mean providing substance abuse services such as counseling, psychoeducation, trauma-informed therapies, medication treatment (pharmacotherapies) as well as alternative treatments such as equine therapy and acupuncture.

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<tbody>
<tr>
<td>1</td>
<td>yes [If YES GO TO AT05_1].</td>
</tr>
<tr>
<td>0</td>
<td>no [If NO GO TO AT06].</td>
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</tbody>
</table>

AT05_1. What types of **treatment services** are offered in your program? Choose all that apply

- [ ] a individual counseling
- [ ] b couples counseling
- [ ] c family therapy
- [ ] d group therapy
- [ ] e intensive outpatient services (IOP)
- [ ] f psychoeducation
- [ ] g equine therapy
- [ ] h trauma-informed therapy
- [ ] i medication treatment (pharmacotherapies)
- [ ] j Other (please specify): ____________________

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**Note:** The table is designed to capture a structured format for services provided, ensuring a clear understanding of the options available. Each cell corresponds to a specific service type, allowing for comprehensive documentation of the program's offerings. This structured approach enhances the clarity and accessibility of the information for both the provider and the recipient of the services.
### AT06. Does your program provide recovery services?

By recovery services, we mean providing services that are consistent with 12-step programs and philosophies such as AA, Wellbriety, and/or the Minnesota Model as well as recovery support services such as housing and transportation.

- **1** Yes [If YES GO TO AT06_1].
- **0** No [If NO GO TO AT07]

### AT06_1. What types of recovery services are offered in your program?

Choose all that apply

- a AA open group
- b AA closed group
- c NA
- d Al-Anon
- e Alateen
- f Wellbriety
- g Recovery Support Services (e.g., housing, transportation)
- h Rational Recovery (RR)
- i Other (please specify): ___________
<table>
<thead>
<tr>
<th>I.33</th>
<th>Services Provided</th>
<th>INTRODUCTION &gt; BACKGROUND &gt; WORKFORCE &gt; ASSESSMENT/TREATMENT &gt; EVIDENCE-BASED TREATMENTS &gt; QUALITY &amp; LEARNING</th>
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<tbody>
<tr>
<td>AT07</td>
<td>AT07. Does your program provide healing services? By healing services, we mean providing services that are based on indigenous beliefs such as Inipi (sweats), tobacco ceremonies, smudging, and/or cultural activities as well as non-indigenous religious practices such as referral to pastoral counseling.</td>
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<td>1 yes [If YES GO TO AT07_1].</td>
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<td>0 no [If NO GO TO SCREEN II.A.01]</td>
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<thead>
<tr>
<th>I.34</th>
<th>Services Provided</th>
<th>AT07_1. What types of healing services are offered in your program? Choose all that apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>AT07_1a</td>
<td>a indigenous diagnosis and assessment</td>
<td></td>
</tr>
<tr>
<td>AT07_1b</td>
<td>b Inipi (sweats)</td>
<td></td>
</tr>
<tr>
<td>AT07_1c</td>
<td>c Talking Circles</td>
<td></td>
</tr>
<tr>
<td>AT07_1d</td>
<td>d Tobacco Ceremonies</td>
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<tr>
<td>AT07_1e</td>
<td>e Pipe Ceremonies</td>
<td></td>
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<tr>
<td>AT07_1f</td>
<td>f Smudging</td>
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<tr>
<td>AT07_1g</td>
<td>g herbal teaching</td>
<td></td>
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<tr>
<td>AT07_1h</td>
<td>h cultural activities (drumming, dancing [e.g., Gourd, Pow Wow, Sun Dance, Stomp Dance], beading, tanning)</td>
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<tr>
<td>AT07_1i</td>
<td>i religious services</td>
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<td>AT07_1j</td>
<td>j cultural family events</td>
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<td>AT07_1k</td>
<td>k cultural education</td>
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<td>AT07_1l</td>
<td>l referral to outside indigenous practitioners/churches</td>
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<td>AT07_1m</td>
<td>m acupuncture</td>
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<td>AT07_1n</td>
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<td>AT07_1o</td>
<td>o Pastoral Counseling</td>
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<tr>
<td>AT07_1p</td>
<td>p Other (please specify): ________________</td>
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