

## **Introducing the *OK Integrated Mental Health and Substance Abuse Screen:***

The Integrated Services Initiative (ISI) would like to inform you as to the completion of a validated instrument to screen for mental health and substance abuse related issues in adults. This tool was developed through several years of very intensive work by many individuals committed to the creation of a simple, quick, easy to administer screening instrument that effectively identifies the need for further assessment for mental health and/or substance abuse related issues.

The following 13 question tool can be administered in less than 5 minutes and has been determined to be reliable and valid for adults who are seeking assistance. The tool can be administered in-person or over the phone. Any “yes”, would indicate the need for further and more comprehensive assessment in the area(s) of mental health and/or substance abuse.

This tool can be used to screen adults for mental health and substance abuse related issues and would meet the ODMHSAS requirements for screening in those two domains.

The tool does not however, effectively screen for trauma related issues. The ISI would recommend the following instructions to effectively screen for trauma related issues:

### **Trauma Screening-**

During the integrated screening process, in addition to screening for mental health and substance abuse related issues, please screen for the possibility of traumatic experiences.

There are many screening tools available today for trauma. The following are a few examples of normed and validated tools that are widely accepted in screening for trauma related issues:

#### **Adult -**

- *PTSD Checklist-Civilian (PCL-C)*
- *Post-Traumatic Symptoms Scale (PTSS)*
- *Impact of Events Scale (IES)*
- *Trauma Screening Questionnaire (TSQ)*

Additionally, ODMHSAS will also accept the use of the *Part-1 Screening and Eligibility Interview Document* as meeting the ODMHSAS integrated screening requirements for the three domains of mental health, substance abuse and trauma for adults.

## OK Integrated Mental Health and Substance Abuse Screen for Adults

Date: \_\_\_\_\_

Identifying Number: \_\_\_\_\_

During the past year:

1. Have you been preoccupied with drinking alcohol and/or using other drugs?  Yes  No
2. Have you experienced problems caused by drinking alcohol and/or using other drugs, and you kept using?  Yes  No
3. Have you experienced serious depression (felt sadness, hopelessness, loss of interest, change of appetite or sleep pattern, difficulty going about your daily activities)?  Yes  No
4. Have you experienced thoughts of harming yourself?  Yes  No
5. Have you drunk alcohol and/or used other drugs more than you intended?  Yes  No
6. Do you experience periods of time when your thinking speeds up and you have trouble keeping up with your thoughts?  Yes  No
7. Have you needed to drink more alcohol and/or use more drugs to get the same effect you used to get with less?  Yes  No
8. Have you attempted suicide?  Yes  No
9. Have you had periods of time where you felt that you could not trust family or friends?  Yes  No
10. Have you been prescribed medication for any psychological or emotional problem?  Yes  No
11. Have you drunk alcohol and/or used other drugs to alter the way you feel?  Yes  No
12. Have you experienced hallucinations (heard or seen things others do not hear or see)?  Yes  No
13. Have you tried to stop drinking alcohol and/or using other drugs, but couldn't?  Yes  No

## **Scoring**

If a consumer answers “Yes” to any one of the following questions, refer for a full Substance Abuse assessment: 1, 2, 5, 7, 11 or 13.

If a consumer answers “Yes” to any one of the following questions, refer for a full Mental Health assessment: 3, 4, 6, 8, 9, 10 or 12.

## **Information**

This tool was validated for use with adults (18 and over) seeking services through Mental Health and/or Substance Abuse programs. This tool is used for screening purposes only.

Please use an identifying number decided upon by your agency for further use if necessary.

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