

August 3, 2016

Phillip Stigger III, Probation Officer  
375 South High Street, 8<sup>th</sup> Floor  
Columbus, OH 43215

**Re: Clinical Alcohol Assessment for John S. Fail Jr. (DOB – 10/20/1961)**

Dear Officer Stigger:

I performed a Clinical Alcohol Assessment for Mr. Fail in reference to his probationary status with Franklin County. This assessment included a 55-minute clinical interview, and the administration of:

- Substance Abuse Subtle Screening Inventory (SASSI-3)
- A Michigan Alcohol Screening Test (MAST)
- A general anxiety/depression screening

The following items provide a summary of the screening results, my diagnostic opinion and professional recommendations:

**SASSI-3: POSITIVE SCREEN;** “high probability of a moderate to severe substance use disorder”

**MAST: POSITIVE SCREEN;** direct and indirect indication of problem alcohol use, mitigate concerns with clinical recommendations (screen relative to lifetime use of alcohol)

**Clinical Interview/Summary:** Mr. Fail’s written screenings provided clear indication of an alcohol use disorder at some level. He was open and forthcoming in the clinical interview and described current and past symptoms that warranted a DSM-5 alcohol use disorder diagnosis. While Mr. Fail has had much success maintaining a healthier lifestyle on his own accord over the last 6 months, he and I both agreed that getting some additional support would be of benefit to him in order for him to keep his sobriety intact. In addition to working on problem alcohol use, his follow-up care should also focus on recovering from grief and learning healthy ways to manage stress.

**DSM-5 DIAGNOSIS in Reference to Substances:** F10.20 Severe Alcohol Use Disorder (Early Remission)

**Treatment Recommendations:**

- 1) Outpatient Counseling – outpatient sessions with a professional substance abuse and mental health counselor, follow-up provider to update recommendations and discharge as appropriate;

- 2) If abstinence is compromised – an increased level of treatment and/or additional support is to be considered at the discretion of the follow-up provider (e.g. IOP, residential treatment, etc.)

If you or the probation department possess additional information about Mr. Fail's use of alcohol that might impact the outcome of this assessment, I would be happy to review it and consider appropriate modifications or amendments to the present report.

Thank you for the opportunity to assist the department of probation, Mr. Fail, and yourself in this important matter.

Sincerely,



Trevor C. Davis, CDCA

Cert.# 150427

Reviewed by Brian T. Davis, LISW-S, SAP LIC# I-7948

cc: John Fail Jr.

**Prohibition Against Re-Disclosure:** This information has been disclosed to you from records protected by Federal Confidentiality rules. The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 C.F.R Part 2. A general authorization for the release of medical or other information is not sufficient for this purpose. The Federal rules restrict any use of information to criminally investigate or prosecute any alcohol or drug abuse client. Drug abuse patient records are also protected under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 45 C.R.R parts 160 & 165. (These conditions apply to every page disclosed and a copy of this authorization will accompany every disclosure.)

**Diagnostic Conclusions / Limitations:** Directions Counseling Group provides Clinical Alcohol Assessments based on objective and standardized screenings and interviewing methods as well as self-reported information. Clinical conclusions are made to the best of the professional's ability with data on hand at the time of the assessment. Expanded assessments which involve additional background research, collateral information and third party verification can be provided as an additional service upon request.