

March 10, 2014

The Honorable Judge Robert Broadbelt  
Superior Court of California, Los Angeles  
Stanley Mosk Courthouse Dept. 81  
11054 Ventura Blvd.  
Studio City, CA 91604

**Re: Clinical Alcohol and Drug Assessment for Jeff Todd**

Dear Judge Broadbelt:

I performed a Clinical Alcohol and Drug Assessment for Mr. Todd in reference to his active custody hearings. This assessment included the administration of: a SASSI-3, a MAST, an AUDIT, an anxiety/depression screening, a 50 minute online webcam clinical interview, review of a 9/27/13 drug screening, and reviews or contact with third parties for collateral information. The following are my findings and recommendations:

**SASSI-3 (Substance Abuse Subtle Screening Inventory):** Mr. Todd's scores on this screening provided no insight into a substance abuse disorder of any kind.

(The SASSI attempts to detect substance abuse and dependence at a subtle level or in cases where the respondent is minimizing their use of substances and has an empirically validated accuracy rate of 92% for detecting moderate to severe substance use disorders.)

**MAST (Michigan Alcohol Screening Test):** The score for this screening was "1" and provided no indication of an alcohol use disorder. The one item of concern on this test was his DUI charge history. He reported a 1999 charge and a 2004 charge. The 1999 charge was a *wet and reckless* charge with a reported BAC of .09. While a .09 BAC DUI is illegal it is less indicative of a diagnosable condition than a DUI that involves a higher BAC.

The 2004 charge had no BAC taken, and is therefore of limited value in terms of providing concrete indications of an alcohol use disorder. By Mr. Todd's report there have been no alcohol related legal incidents since this 2004 charge. Assuming the court has no information to the contrary, the DUI charges, now being 10 + years past, do not provide basis for an alcohol use disorder by themselves.

**AUDIT (Alcohol Use Disorder Identification Test):** The score was "0", providing no indication of a drug use disorder. Individuals engaged in infrequent use of marijuana commonly are found to be negative on standard drug screenings because of a lack of overt signs and problem symptoms.

**Drug Screening on 9/27/2013:** I reviewed a urine drug screen provided by Mr. Todd on this date. All results were negative. The substances screened were amphetamines, cocaine, marijuana, opiates/morphine, PCP; specimen temperature. His creatinine and pH were all in range and suggested a valid screening.

**DSM/Other Substance Related Symptom concerns:** Mr. Todd denied subtle symptoms of alcohol misuse/abuse such as hangovers, mild memory loss after use, drinking repeatedly to relieve emotional

or work stress, previous treatment, conflict with significant others during or shortly after use of alcohol, guilt or regret associated with use, or any other subtle but indicative symptoms.

Mr. Todd did acknowledge past use (prior to one year ago) of marijuana at a casual level (at times weekly use but denied daily use). He was not hesitant to test for it last year nor is he at present if the court decides he should provide a negative drug screen without advance notice.

**Depression/Anxiety Screening:** Mr. Todd was screened for symptoms of depression/anxiety and possible use of alcohol or marijuana for symptom relief. I was unable to find him displaying clinical symptoms of a mood disorder and likewise was unable to find him self-medicating to relieve any such condition.

**Collateral References Reviewed:** I reviewed third party character reference or alcohol and drug questionnaire responses information from the following individuals:

- Luis Yescas, fellow basketball coach for youth at Van Nuys Sherman Oaks Park (5/16/13 declaration document in reference to custody case in LA Superior Court)
- Cullen Haywood, Recreation Coordinator at Los Angeles Dept. of Recreation and Parks (9/6/13 character reference letter)
- Anthony Sykes, Friend and Marriage and Family Therapist intern (3/10/14 collateral substance abuse assessment contact form)

All three of these third parties suggested that Mr. Todd is a man of good character in his community. Mr. Sykes stated that he has known Mr. Todd since the 4<sup>th</sup> grade, has witnessed him using alcohol, and knows Mr. Todd's lifestyle and habits very well. Mr. Sykes denied every witnessing or hearing second hand that Mr. Todd was showing signs or symptoms of alcohol abuse or dependence. Mr. Sykes report of Mr. Todd's alcohol use was consistent with what Mr. Todd reported.

**Clinical Interview/Summary:** Mr. Todd's written screenings were negative for all substance use disorders including alcohol. He reported typical use of alcohol as 1-2 beers on 1-2 days per week. He reported this same quantity of use if he were in a situation consuming alcohol at a special event or celebration like a wedding, reunion, or birthday party. He denies using substances in his home and has an articulate personal policy to avoid all drinking and driving in response to being charged with it in the past.

While it is of concern that Mr. Todd has had 2 lifetime DUI charges the time gap since those charges occurred and the absence of additional symptoms make the DUI charges an insufficient basis to conclude that he has an alcohol use disorder according to DSM 5 diagnostic criteria.

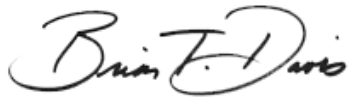
With regard to marijuana, Mr. Todd's 2013 negative drug screening and absence of detectable symptoms in the interview give a clinical impression that he is not experiencing a cannabis use disorder.

Finally, Mr. Todd was able to present the witness of three individuals in the community who vouch for him in terms of knowing him as a man who uses alcohol moderately and is not using illicit drugs.

**Diagnostic Impression in reference to alcohol or illicit substances:** I found no indication that Mr. Todd meets criteria for a diagnosable DSM 5 clinical condition with regard to alcohol or illicit drug use.

**Professional Recommendations:** I have no further professional treatment recommendations for Mr. Todd at this time.

Sincerely,

A handwritten signature in cursive script that reads "Brian T. Davis".

Brian T. Davis, LISW-S, SAP  
cc: Jeff Todd

**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.)

**About the Evaluator:**

Brian T. Davis is an Independently Licensed Social Worker (1997 – Ohio License I-7948) and qualified Substance Abuse Professional (DOT designation) providing assessments and treatment for individuals who have incurred a DUI, violated a drug free workplace policy, need an FAA Substance Abuse Evaluation, have violated a school substance policy, or need a substance abuse assessment for their physician. Mr. Davis can provide expanded forensic assessments as an additional service upon request.