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The SASSI Institute

### $\sim$ *Message* $\sim$ from the CEO

by Nelson J. Tiburcio, Ph.D.

Dear SASSI Friends and Colleagues,



It is hard to believe that another year has come and gone. As we continue to address this ongoing opioid crisis that is ravaging the country, we take this opportunity to reflect on your many comments and feedback. That feedback includes how helpful you as the frontline providers, clinicians and therapists find our newest SASSI-4 screening tool. Coupled with our clinical helpline and customer service lines, it is only one of the latest initiatives we are providing in the hopes of making your jobs easier.

Towards that end, we are happy to report that The SASSI Institute received Institutional Review Board approval to revise our Adolescent SASSI. The research version (A3R) is presently on our online platform and we encourage you to assist in validating the revised instrument by participating in this important study. Our Research Director, Dr. Linda Lazowski will offer greater feedback on this study later in this Newsletter, but our principal aim is to ensure that this revision offers those of you on the frontlines, another tool to identify and address substance use disorders, including those affecting our most vulnerable population, our young.

Our NAADAC, APPA CEU certified training platforms (available in-person and online) continue to provide you with increased options for professional development in addition to enhanced service provision and all have been well received. Once the Adolescent SASSI-A3 study is concluded, and our new adolescent instrument developed and validated, we plan to offer similar trainings on the use of this screening instrument. This revised instrument will offer increased utility in identifying prescription medication and opioid abuse, in addition to alcohol and other drug use disorders, as demonstrated among adolescents.

This past year we also presented and/or participated in a total of twenty-three national and local conferences, forums and networking venues, including the very first Monroe County Opioid Summit in Bloomington, Indiana. At this venue, our Training Director, Ms. Scarlett Baker, among other providers and consumers provided an enlightening presentation about some of our own SASSI history, reflecting on our founder, Dr. Glenn A. Miller, his vision, where we stand presently, and where we hope to be in the years to come. Indeed, our entire staff attended this critically important conference. I am also very happy to say that our presentations, forums and conference attendance have spanned the U.S., including: a booth we sponsored at the annual Employee Assistance Professional Association Conference in Los Angeles, numerous conferences in the Midwest and networking on the East Coast. We have renewed many of our *Continued on page 6* 

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## FAQs from the Clinical Helpline

by Kristin S. Kimmell, LCSW, LCAC

We regularly get inquiries about the acceptability of reading the questionnaire to a client who may have difficulty with their reading skills. We discourage the evaluator from reading the questionnaire to the client for a variety of reasons, but the primary one concerns the validity of the results. No matter how careful the reader might be, the tone of voice or emphasis on a particular part of the question may lead the client in one direction or another. Or the client may interrupt with a question regarding the meaning of a word or intention of a particular question. This is why we offer a professionally read audio CD of the SASSI-4, Adolescent SASSI-A2 and Spanish SASSI paper and pencil versions for clients who have reading difficulties. We hope in the future to be able to offer this for the online platform as well. Please contact our customer service department for ordering information.

Another frequent question is related to the clinical interpretations of the "low" scores on the profiles. These mostly relate to the subtle scales which include the OAT, SAT, DEF and SAM scales. Most callers know what a low DEF indicates. And SAM has no clinical interpretation. So what about those low OAT and SAT scales?

What does "low' mean? A low score is anything below the 15th percentile on the graph.

In the example to the right, the caller indicated that she was doing an assessment on a health care professional who had been arrested for her one and only DWI the previous year, had completed her alcohol education class and needed this evaluation as a final step for probation. She was not in trouble in her job and in fact, highly regarded in her profession. Given the client was at the end of her requirements, the evaluator was somewhat concerned with the results and what it meant.

The instructions were given to answer the FVA/FVOD side for the last twelve months. Her RAP is zero. Her Prescription Drug Scale is zero. She has 'no' on all the rules so came up with a Low Probability of having a Substance Use Disorder. However, her DEF of 9 is highly elevated. Elevated DEF scores

increase the possibility of the SASSI missing individuals with a substance use disorder. Elevated DEF may also reflect situational factors. Note that the SAM is within the norm so it is probably more likely that her DEF is situational given the context.

She also has an OAT score of 'O' and a SAT score of '2'. Both are below the 15th percentile.

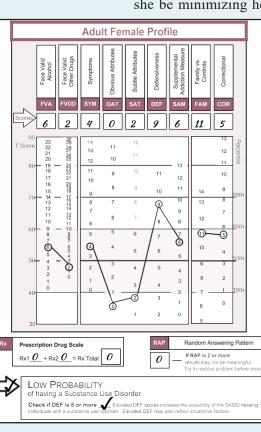
A low OAT indicates someone has difficulty acknowledging personal limitations or shortcomings. A low SAT indicates someone who might have a 'chip' on her shoulder, a hypersensitivity to others or feelings of rejection.

So even though this client is nearing the completion of her probation requirements, we still get a picture of someone who is highly guarded (DEF), has a hard time acknowledging shortcomings (OAT) and may continue to exhibit resentment (SAT) for the situation she is in. Perhaps this is due to her profession, or perhaps it is her personality. What the results give the evaluator is clinical direction on how to approach the client to help reduce her defensiveness and give her permission to open up. Affirming how demanding her job is and how on top of things she must be could be a pathway to discussing her feelings of shame related to the DWI and how it might be affecting her self-esteem. Could she be minimizing her use of alcohol and drugs? Perhaps,

> but as we strongly express, the SASSI is only one part of a clinician's assessment. Hopefully, with the input of all the information you have, the clinician can evaluate the results which fit the context for this client.

> As always, the free Clinical Helpline is available Monday through Thursday from 9 a.m. until 5 p.m. and on Friday from 10 a.m. until 5 p.m. (EST) at 888-297-2774 to answer any questions you may have. We have long-time users as well as those who are new to the SASSI who call us. We are happy to take your calls.

Warm regards, *Kus Kimmell, LCSW, LCAC* Director: Clinical Services



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#### The Focus on the Opioid Crisis

by Scarlett L. Baker

As mentioned earlier in this newsletter in the "Message from the CEO" section, I had the pleasure of addressing our local community during the First Annual South Central Opioid Summit. I shared with them a bit of history about The SASSI Institute, our founder, and our current focus on research & development during this opioid crisis. Subtitled "Year of Making Connections" seemed fitting for our current objective and is what we invited the participants to do, connect with us, as well as work alongside us as we fulfill various initiatives. We encourage you to join us as well. More information on our most recent study and how you can participate can be found later in this newsletter.





It was our pleasure to be able to co-sponsor this conference and have several of our staff there to participate in the break-

out educational sessions and hear the moving plenary speakers. Each speaker who shared their story about recovery and addiction spoke directly from their hearts. In addition to hearing from workers on the front line, we also got to listen to the voice of family members who lost someone to this epidemic and individuals who are in recovery themselves. We are grateful to them for sharing their stories with us and remain dedicated to putting every effort available towards doing our part to help during this time of need.

While the opioid crisis has undoubtedly been a considerable focus throughout the country these past few years, and with good reason; please know that we have not forgotten about the most commonly abused substance that clients present with, alcohol. We remain dedicated to making an impact in helping to stop the opioid crisis, but we hear your concerns that alcohol is still the most abused drug of choice. We want to ensure you that we continue to research alcohol addiction with the same emphasis and passion that we are giving our opioid and prescription medication research to help you better serve those individuals and help them find their path to recovery.

We thank each of you for the work that you are doing to help others overcome the disease of SUD and alongside their families, help to guide them down this bumpy road.

Sincerely, *Scarlett Baker* 

Director: Training Services Dissemination & Planning

### **SASSI Online Update: New Feature**

The SASSI Institute is always listening to the voice of our customers. We want to help you do your work so that you can help your clients. Towards that goal, we have added an often-requested feature to SASSI Online. If you are the Primary Clinical Contact (PCC) for your organization, you recently noticed a new "Admin" tab in your SASSI Online dashboard. From the Admin tab, you have a read-only overview of all the assessments administered by the counselors in your organization. If you need to see a client's full report, click on their "Client ID" field just like you do in the My Clients tab.

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Check this space in the future for news of more improvements to SASSI Online!

Private Practice + Drug Courts + Employee Assistance Programs + SBIRT early INTERVENTION SAVES LIVES

### Our 2nd Annual: Recovery Month Celebration & Open House



We were pleased to celebrate Recovery Month again this past year with an Open House. Celebrating those who have embarked on the road to recovery into sobriety is always a joy, not just in September, but all year round.

We celebrated alongside many providers from our surrounding community including Amethyst House, Ruby Recovery, and officials from our local correctional facilities.



We were fortunate again this year to have a beautiful day for the event and look forward to you joining us next year. We appreciate the hard work of those working with individuals in recovery and the dedication of those in recovery to stay sure footed on the path.





Dr. Tiburcio presenting our door prize to Juan Lopez, President of Ruby Recovery. Also pictured, far right, is Dr. Alfredo Lopez of Alivio Medical Center.

Picture taken at Ruby Recovery.



Thank you!!

In memory of Dr. Glenn A. Miller



A few friendly SASSI faces: Lauren Nelson, Executive Assistant; Chris Blunk, Board Member; & Donna Alexander, Administrative Assistant







#### **Development and Validation of the Adolescent SASSI-A3**

by Linda E. Lazowski, Ph.D.

The important work of revising the Adolescent SASSI is underway, and we invite you to take part. You can easily register to conduct screenings with the research version of the instrument (SASSI-A3R) and receive SASSI-A2 screening reports at no charge, at SASSI.com/A3. The research version includes the SASSI-A2 items, as well as new items that we're evaluating for inclusion on the revised instrument. Our aim is to provide you with an updated instrument that accurately identifies the most recent trends in adolescent alcohol and drug abuse, as well as the abuse of prescription medications. Essential features of this validation work include having a participant sample that is diverse in ethnic background and geographic region.

The inclusion of diagnoses of non-substance related disorders, if any, whether dually diagnosed in teens with substance use disorders (SUD) or if observed on their own, is another essential feature of this validation study. This information will help us evaluate the accuracy of the SASSI-A3 screening outcome for teens with SUD and co-occurring conditions, as well as the instrument's effectiveness in identifying the absence of SUD even when teens without SUD are experiencing symptoms related to other psychological conditions. Our online diagnostic checklist allows you to provide this information conveniently. All submissions are completely anonymous. Our online research platform is designed to ensure the anonymity of client information and asks for no personally-identifying client information. Teens who agree to contribute their anonymous SASSI responses to the project will help future teens get treatment services they may need, as well as earn a donation made by The SASSI Institute on their behalf to a youth or pet-focused charity of their choice. In closing, I want to add that I value your contributions to this research, and applaud the work you do to help teens overcome their substance abuse. I invite you to contact me (research@sassi.com) with any questions or suggestions.

Best regards, Linda E. Lazowski, DhD

Director of Research

#### **Adolescent Research: Invitation to Counselors**

The SASSI Institute is conducting a research study to validate an updated version of our adolescent screening inventory. Our aim is to provide practitioners with an effective tool to address the public health epidemic of adolescent prescription opioid and other prescription drug abuse, and substance use disorders more generally. Your contribution of screenings to this research is vital to its success.

Professionals in the U.S. who provide services to adolescents (13-18 years old) who might benefit from screening for alcohol or drug abuse are invited to take part in our Adolescent SASSI-A3 validation project.

#### **Benefits of Study Participation:**

- Administer the research version of the adolescent instrument and receive the SASSI-A2 screening report at no charge.
- Teen participants will earn the opportunity to select a charity as the recipient of a donation made by The SASSI Institute.

#### For more information, visit: <u>www.SASSI.com/A3</u>

### ~ *Message* ~ from the CEO

#### Continued from page 1

existing contacts, affiliates and collaborations, and made significant inroads towards a critically important population, that is, those on community corrections sanction and individuals reentering communities from prisons, jails and other institutional settings. We at The SASSI Institute remain committed to providing the tools, trainings, and clinical consultations that will ultimately provide you the assistance necessary as you work with those affected by substance abuse. The Scantron and SASSI-to-Go editions of our SASSI-4 screening tool are now at your disposal. And as many of you have requested, we continue our work towards providing you with online availability of our SAVRS-2 and SAS-ASL screening tools for Deaf, Hard of Hearing and vocational rehabilitation clients.

I want to thank the entire SASSI team for their teamwork, diligence and tireless work as we strive towards fulfilling our SASSI mission: supporting and responding to the needs of clinicians, research and justice professionals, consumers and educators who work with those who are affected by substance abuse. We do indeed have an obligation to continue to serve those that need us most. Please continue to visit our websites (sassi.com, sassionline.com) and our Facebook page for further updates as we continue to release new products and services. As always, we welcome and look forward to your comments, suggestions, questions, and requests. Please contact us as needed; we continue to be only a click away!

Sincerely, Nelson Jose Tiburcio, PhD

## STAFF CORNER:

We are at once delighted and disheartened to announce the retirement of Betty Miller after 18 years with the organization. She will be greatly missed by not only the staff but everyone she came in contact with while working at SASSI. Although the biggest part of her job was dedicated to Shipping/Receiving and Customer Service, she wore many hats. Betty's attention to detail, dependability, and commitment to excellence have been invaluable. We began to think of her as our "Wonder Woman." We know you all will join us in wishing Betty well in this new chapter of her life, allowing her to work on her favorite crafts and hobbies along with spending time with her family.



#### Do you work with Impaired Drivers?



www.thebadds.com

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The Behaviors & Attitudes Drinking & Driving Scale (BADDS) can:

- Predictrisk of future impaired driving
- Measurechangepost intervention
- Evaluate intervention impact
- Identify rationalizations, behaviors and attitudes related to impaired driving: Training Online available
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