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|  | OFFICE OF FORENSIC MENTAL HEALTH SERVICES (OFMHS)**Appropriate Level of Forensic Services (ALFS) Screening Tool** |
| **Identifying Information** |
| CLIENT’S NAME | CAUSE NUMBER(S) |
| NCM CASE NUMBER | COURT |
| **Appropriate Level of Forensic Service Screening Checklist** |
| For any client whose name does not appear on the most recent FPATH eligible persons list, forensic navigators may use this screening tool to assess their clients and to provide an appropriate level of services as outlined in OFMHS Policy 36. |
| **Client Meets** | **Criteria A.** |
| [ ]  | 1. The client has been opined competent to stand trial **OR** there are agreed orders for a finding of competent to stand trial on the current case.
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| **Client Meets** | **Criteria B.** |
| [ ]  | 1. The client had at least one (1) previous competency evaluation order within the last five (5) years for which they were found competent **OR** has no previous competency evaluation orders prior to the current order; and
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| [ ]  | 1. The client has not had a previous competency evaluation order within the last two (2) years for which they were found not competent to stand trial; and
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| [ ]  | 1. The client reported only perceptions and beliefs to the forensic navigator that were based in reality **OR** reported some perceptions or beliefs that were not based in reality, but the client also reported that they are not very bothered by these perceptions or beliefs and that they feel little-to-no pressure to act on them; and

Include direct client quotes to support Criterion 3 has been met: |
| [ ]  | 1. The forensic navigator did not have difficulty following the content of the client’s speech **OR** may have had some difficulty following the content of the client’s speech, but the client’s speech did not consistently include content that was hard or almost impossible to follow; and

Include direct client quotes to support Criterion 4 has been met: |
| [ ]  | 1. The client reported to the forensic navigator no elevated or irritable moods or restlessness **OR** reported some elevated or irritable moods or restlessness, but the client also reported these are not occurring on a daily basis.

Include direct client quotes to support Criterion 5 has been met: |
| **Appropriate Level of Forensic Service Screening Checklist** |
| Does the client meet criterion A. **OR** all of criteria B. (1 - 5) above? [ ]  Yes [ ]  NoThe forensic navigator will complete and upload a Recommended Services Plan (RSP) to the Navigator Case Management (NCM) tool for any given case. If marked “yes” above, the FN is not required to submit the RSP to the court and the FN may provide an appropriate level of services to their client as outlined in OFMHS Policy 36. |
| NAME OF FORENSIC NAVIGATOR COMPLETING THIS FORM | DATE FORM COMPLETED |