

PART 1. YOUTH, ASSESSOR, AND EVALUATION INFORMATION

Completed

JJIS#:	Youth's Name:
Assessment Date <i>(date assessment was initiated):</i>	
Office/County of Jurisdiction <i>(county conducting assessment):</i>	
Assessor <i>(person conducting assessment):</i>	

For Reassessments Only. Skip if this is an initial assessment.

Linked assessment <i>(name of most recent prior JCP assessment)</i>	
<input type="checkbox"/> JCP Risk Assessment – 2006.1	<input type="checkbox"/> V1.0 Oregon JCP Screen Assessment
<input type="checkbox"/> V2.0 Oregon JCP Screen/Assessment	<input type="checkbox"/> V1.0 JCP Reassessment
Date of linked assessment <i>(generally the most recent prior JCP assessment that was completed at least 30 days or more before this assessment)</i>	_____ (month - day - year)

1.0 DEMOGRAPHIC AND JCP PROGRAM EVALUATION QUESTIONS

Before conducting the assessment, complete questions 1.1 through 1.4 to help determine if the youth or family (if they are present) needs an interpreter. If either is not proficient in English, please stop the assessment and continue only when someone proficient in the youth's or family's language is available. For help on determining English proficiency, see help for item 1.1.

1.1 Is English youth's primary language?
 Yes No

1.2 [IF NOT] Ask youth to describe his or her understanding of English:
 Poor Fair Very Good

1.3 If youth's primary language is not English, what is it?

<input type="checkbox"/> Chinese (Mandarin)	<input type="checkbox"/> Spanish
<input type="checkbox"/> Hmong	<input type="checkbox"/> Vietnamese
<input type="checkbox"/> Russian	<input type="checkbox"/> Other non-English (Specify) _____

1.4 Race/ethnicity/cultural heritage. Ask the youth to self-identify his/her race, ethnicity or cultural heritage from the list below. Check all that apply.

<input type="checkbox"/> Black or African-American	<input type="checkbox"/> Vietnamese
<input type="checkbox"/> White (Caucasian)	<input type="checkbox"/> Native American / Alaskan Native
<input type="checkbox"/> Asian	<input type="checkbox"/> Native Hawaiian / Pacific Islander
<input type="checkbox"/> Chinese	<input type="checkbox"/> Hispanic / Latino
<input type="checkbox"/> Indian	<input type="checkbox"/> Mexican
<input type="checkbox"/> Japanese	<input type="checkbox"/> Other (Specify) _____
<input type="checkbox"/> Korean	<input type="checkbox"/> Race / Ethnicity Unreported

1.5 Type of Assessment

1 Initial Assessment

2 JCP Risk Reassessment

3 JCP Program Evaluation Reassessment

4 Combined JCP Risk and Program Evaluation Reassessment

1.6. [Answer this question only if you are completing an **INITIAL ASSESMENT**; skip if this is a reassessment]

Do you expect this youth to be referred to JCP Prevention Services within the next 3 months?

- Yes No Don't know

JCP Program Evaluation Questions

*Complete this section only if you are completing a JCP Program Evaluation Reassessment
(you marked either 3 or 4 on Question 1.5)*

1.7 First JCP Service Start or "Open" Date :

Month/Day/Year

1.8 Last JCP Service End or "Closed" Date (if applicable)

Month/Day/Year

1.9 Program/Service Status (check only one)

- 1 Still active at time of review
 2 Inactive at time of review
 3 No longer in service at time of review

or Youth did not participate in JCP service or program (select reason from list below)

- 4 Unable to contact youth or family
 5 Youth or parent/guardian refused/declined
 6 No show: Youth or family did not show up for service/program
 7 Appropriate service not available
 8 Other (specify) _____

1.10 [Answer only if youth was **INACTIVE** at time of reassessment]

What date was case placed on inactive status? : _____

Month/Day/Year

1.11 [Answer if youth is **INACTIVE** or **NO LONGER IN SERVICE** at time of reassessment]

Did youth complete program requirements?

- Yes, generally completed program requirements
 No, did not complete program requirements
 Don't know

[Answer Questions 1.12 through 1.18 below only if youth **participated** in a JCP Prevention Program. Skip to Section 2.0 if "no participation" in a JCP Prevention Program (you marked 4 - 8 in Question 1.9 above)]

1.12 JCP services provided to address youth's identified risk factors (check all that apply)

- 1 **Direct interventions** specifically designed to address risk factors (i.e., services to increase school success, decrease acting out or delinquent behaviors, reduce substance abuse, improve family functioning, and/or increase positive peer associations)
- 2 **Case management or case coordination services** (include multi-agency service teams)
- 3 **Support services** (include basic needs, childcare, health, housing, recreation, transportation, etc.)

1.13 Other JCP Services Provided (describe) _____

1.14 Completed or satisfactorily participating in program/activities as directed?

- 1 Yes
- 2 Partially
- 3 No
- 4 Does not apply

1.15 Completed or satisfactorily participating in planned skill development?

- 1 Yes
- 2 Partially
- 3 No
- 4 Does not apply

1.16 Completed or satisfactorily participating in treatment programs?

- 1 Yes
- 2 Partially
- 3 No
- 4 Does not apply

1.17 Risk areas focused on by JCP service plan during the report period (check all that apply)

- 1 School Issues
- 2 Peer Relationships
- 3 Antisocial Behavior
- 4 Family Functioning
- 5 Substance Use
- 6 Attitudes, Values, & Beliefs
- 7 Not specified
- 9 Don't know, unknown

1.18 Other area focused on by JCP Service Plan (specify) _____

PART II. INDICATORS

Fill in all responses, including items for case planning. If unsure about an answer, select “More Information Needed.” Do not leave the item blank. You may make any necessary revisions/adjustments to responses within 30 days of the assessment date if you have not “locked” the assessment.

2.0 <input type="checkbox"/>	SCHOOL ISSUES Case Planning Domain: Education <i>*Some of these items may not be applicable if youth has graduated from high school or has completed, or is currently working on, a GED. If youth is being assessed during the summer, code the last regular semester and use the last month of school for the “past month” questions.</i>	More Info. Needed Yes No	Score ¹
PF2.1	Significant school attachment/commitment (has significant attachments, beliefs, commitment and/or involvement with and within his/her school; motivated to do well in school).	<input type="checkbox"/> <input type="checkbox"/> <input type="radio"/>	
R2.2	Academic failure (recently failed, or currently failing two or more classes; not meeting minimal academic standards; not performing at grade level appropriate to youth’s age).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R2.3	Chronic truancy (skips school at least once a week, or has more than four unexcused absences in past month).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R2.4	School dropout (has stopped attending school or is not enrolled. Do not count if graduated, completed/working on GED, or attending alternative education/trade program).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R2.5	Suspension(s) or expulsion(s) during past 6 months.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
C2.6	Suspension(s) or expulsion(s) from school during past month.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
PF2.7	Family actively involved in helping youth succeed in school (helps with homework, provides transportation to school, talks with teachers, etc.).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
R2.8	Diagnosed learning disability or concrete evidence of cognitive difficulties (include if youth has an academic Individualized Education Plan or has been held back a grade level due to learning difficulties).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
Comments			

¹ Only un-shaded items are scored. The risk factor numbers begin with the letter "R", the protective factor items begin with the letters "PF", the change over time items begin with the letter "C", items that begin with the letter "T" are test items and are not scored. Each item where a circle is checked receives a score of "1". Shaded items are not included in the scoring of the assessment, but are included here for case planning (CP) and evaluation purposes. Mental Health (MH) items are included to indicate additional assessments the youth may need.

3.0 <input type="checkbox"/>	PEER RELATIONSHIPS AND OTHER RELATIONSHIPS Case Planning Domain: Life/Social Skills	More Info. Needed Yes No	Score
PF3.1	Friends disapprove of unlawful behavior (<i>associates on a regular basis with <u>more than one friend</u> who disapproves of unlawful acts such as stealing, physically hurting others, vandalism, etc.</i>).	<input type="checkbox"/> <input type="checkbox"/> <input type="radio"/>	
R3.2	Friends engage in unlawful or serious acting-out behavior (<i>has <u>one or more friends</u> or routine contact with peer(s) who actively engage in unlawful behaviors including delinquency, substance abuse, or violent activities.</i>). ▲ ²	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R3.3	Has friends who have been suspended or expelled or dropped out of school (<i>associates with one or more friends who have been suspended, expelled, or dropped out of school</i>).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
PF3.4	Has friends who are academic achievers (<i>has friendships and meaningful acquaintances with <u>more than one other youth</u> achieving academic excellence</i>).	<input type="checkbox"/> <input type="checkbox"/> <input type="radio"/>	
T3.5	Substance abusing friends (<i>Youth hangs out with one or more other youth who use alcohol and/or drugs on a regular basis [e.g., at least several times per month]</i>).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
PF3.6	There is an adult in youth's life (other than a parent) she/he can talk to (<i>youth reports having good conversations or connections with an adult, other than a parent, within the last month</i>).	<input type="checkbox"/> <input type="checkbox"/> <input type="radio"/>	
PF4.16	Lives in a low crime and/or stable, supportive neighborhood (<i>youth perceives neighborhood as friendly, stable, supportive, law abiding</i>).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
Comments			

4.0 <input type="checkbox"/>	BEHAVIOR ISSUES Case Planning Domain: Offense Specific	More Info. Needed Yes No	Score
R4.1	Chronic aggressive, disruptive behavior at school starting before age 13 (<i>stealing, fighting, bullying, threatening, shunning, starting rumors/malicious gossiping</i>).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
C4.2	Aggressive, disruptive behavior at school during past month (<i>stealing, fighting, bullying, threatening, shunning, starting rumors/malicious gossiping</i>).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R4.3	Three or more referrals for criminal offenses (<i>misdemeanor or felony charges, such as burglary, theft, assault, vandalism. Exclude curfew, truancy, running away, MIP's, incorrigibility, technical probation violations, violations of local ordinances and infractions</i>).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R4.4	Referred for a criminal offense at age 13 or younger (<i>misdemeanor or felony charge. Exclude curfew, truancy, running away, MIP's, incorrigibility, technical probation violations, and/or violations of local ordinances and infractions</i>). ▲	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
PF4.5	Involved in constructive extra-curricular activities (<i>sports, clubs, student or religious groups, practice of music, theater, or other arts</i>).	<input type="checkbox"/> <input type="checkbox"/> <input type="radio"/>	

² ▲ = Violence indicator

JCP RISK ASSESSMENT 2006. 1 - JJIS Version

R4.6	Chronic runaway history (has recent or past chronic runaway history involving an extended period [1 week or more] or repeated [3 or more] short episodes [1 to 3 days]).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
C4.7	Recent runaway (in past month, youth has run away).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R4.8	Behavior hurts others (has youth been charged with a violent crime anytime in the past, or has been violent or extremely threatening/aggressive towards others).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
R4.9	In past month, youth's behavior has hurt others or put them in danger. ▲	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R4.10	Behavior hurts youth or puts her/him in danger (check if has been true <u>at any time in the past</u>) (limit to physical harm or threat of harm; e.g., attempted suicide, riding in a vehicle with a teenage driver who had been drinking or using drugs, taking other excessive risks).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
C4.11	In the past month, youth's behavior has hurt or put her/him in danger (see R4.10) Answer should be "no" if response to 4.10 is "no."	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
R4.12	A pattern of impulsivity combined with aggressive behavior toward others.	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R4.13	Harms or injures animals.	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R4.14	Preoccupation with or use of weapons.	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R4.15	Has history of setting fires.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
Comments			

5.0 <input type="checkbox"/>	FAMILY FUNCTIONING Case Planning Domain: Family	More Info. Needed Yes No	Score
PF5.1	Communicates effectively with family members (shared communication is both verbal and nonverbal and includes establishing and maintaining healthy relationship boundaries).	<input type="checkbox"/> <input type="checkbox"/> <input type="radio"/>	
R5.2	Poor family supervision and control (family does not know where the youth goes, what he or she does, or with whom, and has little or no influence in such matters).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R5.3	Serious family conflicts (people in youth's family often yell at and insult each other, in ways that make the youth uncomfortable or unhappy).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R5.4	History of reported child abuse/neglect or domestic violence.	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
5.5	Inactive Field (skip)		
R5.6	Criminal family members (family member or someone in youth's household has history of criminal behavior that is having an impact on youth's current behavior).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R5.7	Substance abusing family or household member (Family member(s) or someone in youth's household has/have history of substance abuse and drug related behavior that is having an impact on youth's current behavior).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
R5.8	Family trauma/disruption during past 12 months (youth's family has experienced separation/divorce; moving more than once; inadequate family finance to meet basic needs, job loss, disability, chronic unemployment, homelessness, prolonged or life threatening illness; death; abandonment).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
R5.9	Family trauma/disruption since last review. (Reassessment Only)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
PF5.10	Has close, positive, supportive relationship with at least one family member (at least one family member has a supportive relationship with the youth, encourages the youth, and provides recognition for achievements).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP

JCP RISK ASSESSMENT 2006. 1 - JJIS Version

Comments	
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6.0	SUBSTANCE USE		
<input type="checkbox"/>	Case Planning Domain: Substance Use	More Info. Needed Yes No	Score
R6.1	Substance use beyond experimental use (<i>uses multiple drugs [or combinations of drugs], uses alcohol/other drugs regularly.</i>)	○ <input type="checkbox"/> <input type="checkbox"/>	
R6.2	Current substance use is causing problems in youth's life (<i>youth is having problems with school, the law, family, friends or community related to alcohol/drug use.</i>)	○ <input type="checkbox"/> <input type="checkbox"/>	
R6.3	Substance use began at age 13 or younger (<i>began use of alcohol or other drugs, or regular use of tobacco, at age 13 or younger.</i>) ▲	○ <input type="checkbox"/> <input type="checkbox"/>	
R6.4	Has been high or drunk at school at any time in the past.	○ <input type="checkbox"/> <input type="checkbox"/>	
Comments			

7.0	ATTITUDES, VALUES, & BELIEFS		
<input type="checkbox"/>	Case Planning Domain: Life Skills	More Info. Needed Yes No	Score
<i>*Note R7.1 is a risk indicator and is included in the Domain Total in 12.1. However, only Domains 2 through 6 count toward the minimum of two JCP risk domains required for JCP Program eligibility.</i>			
R7.1	Anti-social thinking, attitudes, values, beliefs (<i>attitudes or values which are accepting of delinquent behavior, drug use, or violence.</i>)	○ <input type="checkbox"/> <input type="checkbox"/>	
T7.2	Youth does not have empathy, remorse, sympathy, or feelings for his or her victim(s).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
T7.3	Youth accepts responsibility for behavior.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
T7.4	Youth inaccurately interprets actions and/or intentions of others as hostile	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
T7.5	Youth talks about the future in a positive way with plans or aspirations of a better life	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
T7.6	Youth preoccupied with delinquent or antisocial behavior.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP

Comments:

8.0	MENTAL HEALTH INDICATORS		
<i>Youth with multiple mental health indicators are at increased risk of offending. Consider additional mental health assessment and/or services and supervision for these youth.</i>			
		More Info. Needed Yes No	Score
8.1	Actively suicidal or prior suicide attempts.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	MH
8.2	Depressed or withdrawn.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	MH
8.3	Difficulty sleeping or eating problems.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	MH
8.4	Hallucinating, delusional, or out of touch with reality (while not on drugs or alcohol).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	MH
8.5	Social isolation: youth is on the fringe of her/his peer group with few or no close friends. ▲	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	MH

JCP RISK ASSESSMENT 2006. 1 - JJIS Version

Sections 9.0 through 11.0 – No Longer Used

12.0	TOTALS JJIS will calculate automatically; use directions below if manual calculation is desired.		
12.1	Total Risk Domains (<i>Count number of domains checked <input checked="" type="checkbox"/> or risk domains with one or more circles checked</i>) (maximum of 6) <i>Note: Domain 7 does not count in determining JCP program eligibility.</i>		_____
12.2	Total Risk Indicators (maximum of 30)		_____
12.3	Total Protective Factors (maximum of 6)		_____
12.4	Total Mental Health Indicators - <i>count items checked "yes" in Section 8</i> (maximum of 5)		_____
Complete Questions 12.5 – 12.11 only if answer to Question 1.5 is "Initial Assessment"			
12.5	Initial Assessment Risk Level Based on Office Preference		
	<u>Default Range</u> <input type="checkbox"/> Low Risk 0-5 <input type="checkbox"/> Medium Risk 6-13 <input type="checkbox"/> High Risk 14 or more	<u>Alternate Range</u> <input type="checkbox"/> Low Risk 0-5 <input type="checkbox"/> Medium Risk 6-13 <input type="checkbox"/> Medium-High 14-17 <input type="checkbox"/> High Risk 18 or more	
12.6	a. Is youth low risk? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No", check "Not Applicable" If "Yes", does youth have one or more of seven identified high risk indicators that increase a low risk youth's likelihood of reoffending (answer was "yes" for any of the following questions: 2.4, 3.6, 4.6,4.7, 4.13, 4.14, 6.4)? If youth is low risk, and answer is YES, consider an override to medium risk for this youth.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
12.7	Do you want to override the Risk Level?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Override Up <input type="checkbox"/> Yes, OverrideDown	
12.8	Override Risk Level	<input type="checkbox"/> Low Risk <input type="checkbox"/> Medium Risk <input type="checkbox"/> Medium – High Risk (<i>use only if county is using alternate range</i>) <input type="checkbox"/> High Risk	

JCP RISK ASSESSMENT 2006. 1 - JJIS Version

12.9	Inactive	
12.10	Override Reason	<input type="checkbox"/> Sex offender <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Extremely serious substance abuse <input type="checkbox"/> Fire setting <input type="checkbox"/> Low risk offender with one of the 7 "high-risk" indicators <input type="checkbox"/> Other (specify) _____
12.11	Final Initial Assessment Risk Level	<input type="checkbox"/> Low Risk <input type="checkbox"/> Medium Risk <input type="checkbox"/> Medium-High Risk <i>(use only if county is using alternate range)</i> <input type="checkbox"/> High Risk
12.12	<p align="center">Completing and Locking the JCP</p> <p>Remember to check the "<input type="checkbox"/> Completed" checkbox at top right of first page when finished. If the completed box is checked in JJIS, and all mandatory questions have been answered, JJIS checks the box and enters the current date as the Locked Date.</p>	

13.0	VIOLENCE INDICATORS	
	Case Planning Domain: Offense Specific	
13.1	Violence Indicators Automatically answered in JJIS Manually, answer is "Yes" if 3.2, 4.4, 4.8, 4.9, or 8.5 is "yes"; or if youth is age 6 – 11, and 6.3 is "yes". Otherwise, answer is "No"	<input type="checkbox"/> Yes <input type="checkbox"/> No

14.0	REASSESSMENT	
	Complete Sections 14.0 through 21.5 only if this is a JCP Risk Reassessment	
14.1	Date of previous JCP Assessment, immediately prior to this assessment	_____
		<i>(month/day/year)</i>
14.2	Expected date of next JCP assessment	_____
		<i>(month/day/year)</i>
14.3	Reason for JCP Reassessment: Scheduled Review	<input type="checkbox"/> 90 day review <input type="checkbox"/> 120 day review <input type="checkbox"/> 180 day review <input type="checkbox"/> Other scheduled review: _____ <input type="checkbox"/> Non-scheduled review
14.4	Other reason for JCP Reassessment (non-scheduled)	<input type="checkbox"/> Completed treatment or accountability objectives <input type="checkbox"/> Technical probation violation <input type="checkbox"/> New law violation <input type="checkbox"/> Counselor initiated review <input type="checkbox"/> Other
14.5	Inactive	

JCP RISK ASSESSMENT 2006. 1 - JJIS Version

15.0	COMMUNITY PROTECTION Case Plan Domain: Community Protection	
15.1		
15.2	Most Serious Weapons Charge since Linked Assessment	Weapons charge, if any, pre-filled by JJIS Data Link; otherwise blank _____
15.3	Most Serious Law Violation since Linked Assessment	Pre-filled by JJIS data link if any new law violation; otherwise blank _____
15.4	Weapons Charge Recorded in JJIS since Linked Assessment	JJIS will enter a "Yes" if there is a weapons charge listed in 15.2 above <input type="checkbox"/> Yes <input type="checkbox"/> No
15.5	Weapons Charge Not Recorded in JJIS since Linked Assessment Has the youth had a weapons charge that has not been entered into JJIS, such as a crime in another state, or one that JJIS could not easily identify as a weapons offense, or an offense committed on a reservation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15.6	Describe the Weapons Charge Not Recorded in JJIS since Linked Assessment If the answer to 15.5 above was "YES", you must describe the weapons charge that has not been entered.	Weapons charge :
		Score
15.7	Community Protection Score Score is automatically calculated by JJIS. If doing manually, enter points () of checked response in right column. Only one score should be entered.	<input type="checkbox"/> No new law violation (-1) _____ <input type="checkbox"/> Status, local ordinance, or violation (0) _____ <input type="checkbox"/> Misdemeanor (+1) _____ <input type="checkbox"/> Non-person felony (+1) _____ <input type="checkbox"/> Weapons related - felony or misdemeanor (+2) _____ <input type="checkbox"/> Felony person (+2) _____
15.8	Frequency of New Criminal Referrals since Linked Assessment Automatically calculated by JJIS. If doing manually, enter points () of checked response in right column.	<input type="checkbox"/> Only 1 new criminal referral since linked assessment (0) _____ <input type="checkbox"/> Two or more new criminal referrals since linked assessment (+1) _____

JCP RISK ASSESSMENT 2006. 1 - JJIS Version

16.0	RESPONSE TO SUPERVISION Case Plan Domain: Accountability	
		Score
16.1	Compliance with <u>technical</u> terms of probation/ supervision? Enter points () of checked response in score column on far right.	<input type="checkbox"/> Very compliant (-2) <input type="checkbox"/> Compliant (-1) <input type="checkbox"/> Partially compliant (0) <input type="checkbox"/> Generally non-compliant (+1) <input type="checkbox"/> Seriously non-compliant (+2)

17.0	RESPONSE TO ACCOUNTABILITY Case Plan Domain: Accountability	
		Score
17.1	Completed or satisfactorily participating in accountability sanctions, as directed Enter points () of checked response in score column on far right.	<input type="checkbox"/> Does not apply (0) <input type="checkbox"/> No (+1) <input type="checkbox"/> Partially (0) <input type="checkbox"/> Yes (-1)

18.0	RESPONSE TO SKILL DEVELOPMENT AND TREATMENT Case Plan Domain: Accountability	
		Score

18.1	Completed or satisfactorily participating in planned skill development Enter points () of checked response in score column on far right.	<input type="checkbox"/> Does not apply (0) <input type="checkbox"/> No (+1) <input type="checkbox"/> Partially (0) <input type="checkbox"/> Yes (-1)

18.2	Completed or satisfactorily participating in treatment programs Enter points () of checked response in score column on far right.	<input type="checkbox"/> Does not apply (0) <input type="checkbox"/> No (+1) <input type="checkbox"/> Partially (0) <input type="checkbox"/> Yes (-1)

JCP RISK ASSESSMENT 2006. 1 - JJIS Version

19.1	Inactive
20.0	SCORING
20.1	<p>JCP Reassessment final score Automatically calculated by JJIS</p> <p>To calculate manually, add the scores in Sections 15 through 18. Add the total to the score in question 12.2, "Total Risk Indicators." This is the total score.</p> <p>Note: The final score may be less than the score in 12.2 if the youth has been compliant with terms of probation.</p>
Final Score: _____	

21.0	FINAL ASSESSMENT RISK LEVEL				
	Domain: Community Protection				
21.1	Inactive				
21.2	<p>Reassessment Risk Level Based on Office Preference</p>	<p><u>Default Range</u></p> <input type="checkbox"/> Low Risk <input type="checkbox"/> Medium Risk <input type="checkbox"/> High Risk	<p>0-5 6-13 14 or more</p>	<p><u>Alternate Range</u></p> <input type="checkbox"/> Low Risk <input type="checkbox"/> Medium Risk <input type="checkbox"/> Medium-High <input type="checkbox"/> High Risk	<p>0-5 6-13 14-17 18 or more</p>

21.3	Do you want to override the Reassessment Risk Level?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Override Up <input type="checkbox"/> Yes, OverrideDown
21.4	Reassessment Override Risk Level	<input type="checkbox"/> Low Risk <input type="checkbox"/> Medium Risk <input type="checkbox"/> Medium – High Risk (<i>use only if county is using alternate range</i>) <input type="checkbox"/> High Risk
21.5	Reassessment Override Reason	<input type="checkbox"/> Not applicable <input type="checkbox"/> Sex offender <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Extremely serious substance abuse <input type="checkbox"/> Fire setting <input type="checkbox"/> Other (specify)_____
21.6	Final Assessment Risk Level	<input type="checkbox"/> Low Risk <input type="checkbox"/> Medium Risk <input type="checkbox"/> Medium-High Risk (<i>use only if county is using alternate range</i>) <input type="checkbox"/> High Risk
22.0	<p>COMPLETING AND LOCKING THE JCP REASSESSMENT</p> <p>Check the Completed box at the top right of the screen to indicate the Assessment is complete – JJIS verifies that all mandatory questions have been answered and inserts the current date as the Locked Date.</p>	
COMMENTS:		

Instructions: JJIS Version

There are important changes to the JCP Risk Assessment - 2006.1. Prior to using this new version of the JCP for the first time, assessors are urged to review the following documents (available on the web at www.ojdda.org):

1. New features: See: **“What’s New on the JCP 2006.1: JJIS Version”**
2. General Instructions: For general instructions, see **“General Instructions for Using the JCP Risk Assessment 2006.1.**
3. Item Specific Instructions: For detailed instructions for each section and each item see **“JCP Risk Assessment 2006.1: Specific Instructions for Each Section and Question”**. These instructions are also available on the JJIS instrument under “Question Help”.
4. The JCP Risk Reassessment: Several questions on the JCP Risk Reassessment are pre-filled by JJIS. These items could be difficult to complete manually. Use JJIS for the Reassessment Section of JCP 2006.1 if at all possible.

MANUAL SCORING AND TOTALS

JJIS will automatically compute the number of domains, total JCP score, total risk factors total protective factors, total mental health indicators, and risk level based on office preference. The instructions that follow are provided in case you need to compute these results manually. Manual calculations are subject to error and should be re-checked in JJIS.

- ❖ If you are scoring manually and want to count the number of risk domains, check the large box under the domain number if at least one circle in that domain has been checked.
- ❖ Only **un-shaded** items are scored
- ❖ On this hard-copy version of the JCP 2006.1, the risk indicator numbers begin with the letter **"R,"** the protective factor items begin with the letters **“PF,”** items indicating change over time begin with the letter **“C,”** and those that begin with the letter **“T”** are test items and are not scored.
- ❖ Each item where a circle is checked receives a score of “1.” Shaded items are not included in the scoring of the assessment, but are included here for case planning (**CP**) and evaluation purposes.
- ❖ Items indicated with **“MH”** are mental health indicators. The presence of a mental health item indicates the assessor should consider additional mental health assessments and/or services and supervision for these youth.
- ❖ Research suggests that youth who have one or more of the JCP **violence indicators** may be more at risk of committing a violent act in the future. You should consider how to address the particular indicator in the youth’s case plan.
- ❖ JCP Service Eligibility: If you have checked at least one circle in a domain, check the box () in the left margin. If you have checked at least two boxes (), the youth is eligible for JCP service.
- ❖ All JCP Assessments 2006.1 (and reassessments) completed for youth referred to a juvenile department should be entered into JJIS.

Questions: Contact www.ojdda.org