

PART I. YOUTH AND EVALUATOR INFORMATION

A. YOUTH BACKGROUND: Fill in ALL the information requested below.

Presenting Behavior (Select 1 from list on page 9)			Consent Signed (Y/N)		Youth ID	
Youth's Last Name		Youth's First Name		Middle Initial(s)	Juv. Jus. Involved? (Y/N)	JJIS # (if applicable)
Month	Day	Year	Address		City	Zip Code (Youth's residence)
Date of Birth						
County/Tribe of Residence				Youth's Identified Tribe(s) (If applicable)		

1.0 LANGUAGE, RACE, AND CULTURE

Before conducting the assessment, complete this section to help determine if the youth needs an interpreter. If either is not proficient in English, please stop the assessment and continue when an interpreter or individual proficient in the youth or family's language is available. You should also determine the family's need for an interpreter if they are present.

1.1 Is English youth's primary language?

1. Yes 2. No

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

- 1 Poor 2 Fair 3 Very Good

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

01. Chinese (Mandarin) 04. Spanish
 02. Hmong 05. Vietnamese
 03. Russian 06. 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.

01. Black or African-American 08. Vietnamese
 02. White (Caucasian) 09. Native American / Alaskan Native
 03. Asian 10. Native Hawaiian / Pacific Islander
 04. Chinese 11. Hispanic / Latino
 05. Indian 12. Mexican
 06. Japanese 13. Other (Specify) _____
 07. Korean 14. Race / Ethnicity Unreported

1.5 Gender

1. Male 2. Female

***NOTE:** When entering information into the JCP Data Manager, you will also need to select population group information (by re-checking all items you've indicated in 1.3 – 1.5 above in the population group variable as well).

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B. ASSESSOR/EVALUATOR INFORMATION: Fill in ALL the information requested below.

Month	Day	Year				
Assessment Date			Assessment Type (I/R)	Assessor Last Name	Assessor First Name	County/ Tribe of Service
Assessor Agency					Primary Referring Agency/Individual (Initial Screen Only)	

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.

Is this youth under the supervision of a county juvenile department? If so, STOP. Juvenile department staff should complete the JCP Risk Assessment - 2006.1 and enter it in the Juvenile Justice Information System (JJIS).

2.0	SCHOOL ISSUES	More Info. Needed	Score ¹
<input type="checkbox"/>	<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>	Yes No	
PF2.1	Significant school attachment/commitment (<i>has significant attachments, beliefs, commitment and/or involvement with and within his/her school; motivated to do well in school</i>).	<input type="checkbox"/> <input type="checkbox"/> <input type="radio"/>	
R2.2	Academic failure (<i>recently failed, or currently failing two or more classes; not meeting minimal academic standards; not performing at grade level appropriate to youth’s age</i>).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R2.3	Chronic truancy (<i>skips school at least once a week, or has more than four unexcused absences in past month</i>).	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R2.4	School dropout (<i>has stopped attending school or is not enrolled. Do not count if graduated, completed/working on GED, or attending alternative education/trade program</i>).	<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 (<i>helps with homework, provides transportation to school, talks with teachers, etc.</i>).	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
R2.8	Diagnosed learning disability or concrete evidence of cognitive difficulties (<i>include if youth has an academic Individualized Education Plan or has been held back a grade level due to learning difficulties</i>).	<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.

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3.0 <input type="checkbox"/>	PEER RELATIONSHIPS	More Info. Needed		Score	
		Yes	No		
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"/>	
Comments					

4.0 <input type="checkbox"/>	BEHAVIOR ISSUES	More Info. Needed		Score	
		Yes	No		
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"/>	
R4.6	Chronic runaway history (<i>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]</i>).	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C4.7	Recent runaway (<i>in past month, youth has run away</i>).	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

² ▲ = Violence indicator

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R4.8	Behavior hurts others or puts them in danger (check if true at any time in past) (<i>youth has been charged with a violent crime or been violent or extremely threatening/aggressive to others. Limit to harm or serious threats such as robbery, carried a handgun or other illegal weapon, has been in a fight with a weapon, physically attacked someone with the idea of seriously hurting him/her, sexually assaulted someone, or driven a vehicle after drinking or using illegal drugs.</i>)	<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 (in the past month, youth has been charged with a violent crime or been violent or extremely threatening/aggressive to others. Limit to harm or serious threats such as robbery, carried a handgun or other illegal weapon, has been in a fight with a weapon, physically attacked someone with the idea of seriously hurting him/her, sexually assaulted someone, or driven a vehicle after drinking or using illegal drugs). ▲	<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 at any time in the past) (<i>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.</i>)	<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
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			

5.0 <input type="checkbox"/>	FAMILY FUNCTIONING	More Info. Needed Yes No	Score
PF5.1	Communicates effectively with family members (<i>shared communication is both verbal and nonverbal and includes establishing and maintaining healthy relationship boundaries.</i>)	<input type="checkbox"/> <input type="checkbox"/> <input type="radio"/>	
R5.2	Poor family supervision and control (<i>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.</i>)	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R5.3	Serious family conflicts (<i>people in youth's family often yell at and insult each other, in ways that make the youth uncomfortable or unhappy.</i>)	<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 (<i>family member or someone in youth's household has history of criminal behavior that is having an impact on youth's current behavior.</i>)	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R5.7	Substance abusing family or household member (<i>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.</i>)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
R5.8	Family trauma/disruption during past 12 months (<i>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).</i>)	<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

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PF5.10	Has close, positive, supportive relationship with at least one family member <i>(at least one family member has a supportive relationship with the youth, encourages the youth, and provides recognition for achievements).</i>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	CP
Comments			

6.0 <input type="checkbox"/>	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="radio"/> <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="radio"/> <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="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
R6.4	Has been high or drunk at school at any time in the past.	<input type="radio"/> <input type="checkbox"/> <input type="checkbox"/>	
Comments			

7.0	ATTITUDES, VALUES, & BELIEFS <i>*Note R7.1 is included in the risk factor total, but not counted as one of the 5 JCP domains.</i>	More Info. Needed Yes No	Score
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="radio"/> <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

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> *Note, these items are not included in the JCP Evaluation Score.	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

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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

PART III. SCORING TOTALS

9.0	TOTALS Database will calculate automatically; use directions below if manual calculation is desired.	
9.1	JCP Eligibility Screen Total Risk Domains <i>Count number of domains checked <input checked="" type="checkbox"/> or risk domains with one or more circles checked</i>	_____
9.2	Risk Assessment - Total JCP Evaluation (Risk and Protective) Score - <i>count circles in un-shaded boxes (exclude mental health indicators) (maximum of 30)</i> 9.2a Total JCP Scored Risk Factors (maximum of 24) 9.2b Total JCP Scored Protective Factors (maximum of 6)	_____ _____ _____
9.3	Total Mental Health Indicators - <i>count items checked "yes" in Section 8 (maximum of 5)</i>	_____
10.0	Violence Indicator (add items (3.2, 4.4, 4.9, 6.3 & 8.5) with a "▲") (maximum of 5)	_____

PART IV. JCP SERVICE INFORMATION

(Fill in ALL the information requested below)

11.0	JCP REFERRAL INFORMATION (For Intial Screens Only):	
11.1	Please list the JCP Program/Services youth was referred to: *NOTE: Only youth 10-17 with 2 or more domains are eligible for JCP service. 1. _____ 2. _____ 3. _____ 4. _____ OR	
11.2	Please indicate reason youth was not referred to program: <input type="checkbox"/> Youth not eligible for JCP service <input type="checkbox"/> Youth/Parent/Guardian refused/declined service <input type="checkbox"/> Needed service not available	

12.0	JCP SERVICE INFORMATION (For Reassessments Only):
12.1	First JCP Service Start or "Open" Date __/__/__
12.2	Last JCP Service End or "Closed" Date __/__/____ (if applicable)
	<p>Program/Service Status (<i>check only one</i>)</p> <p><input type="checkbox"/> 1 Still active at time of review.</p> <p><input type="checkbox"/> 2 Inactive at time of review. Date placed on inactive status: __/__/____</p> <p><input type="checkbox"/> 3 No longer in service at time of review [GO TO 12.4]</p> <p>OR</p> <p>12.3 Youth did not participate in JCP service or program (<i>select reason from list below</i>)</p> <p><input type="checkbox"/> 4 Unable to contact youth or family</p> <p><input type="checkbox"/> 5 Youth or parent/guardian refused/declined</p> <p><input type="checkbox"/> 6 No show: Youth or family did not show up for service/program</p> <p><input type="checkbox"/> 7 Appropriate service not available</p> <p><input type="checkbox"/> 8 Other (specify)_____</p>
<p>If "no participation," (you marked 4-8 above) STOP HERE.</p> <p>If entering data into the JCP Data Manager, make sure all relevant fields are completed</p>	

12.4	<p>If youth is inactive (option 2 on 12.3 above) or no longer in service at time of review (option 3 on 12.3 above), did he/she complete program requirements?</p> <p><input type="checkbox"/> Yes, generally completed program requirements</p> <p><input type="checkbox"/> No, did not complete program requirements</p> <p><input type="checkbox"/> Don't know</p>
12.5	<p>JCP SERVICES PROVIDED TO YOUTH'S IDENTIFIED RISK FACTORS (<i>check all that apply</i>)</p> <p><input type="checkbox"/> 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)</p> <p><input type="checkbox"/> 2 Case management or case coordination services (include multi-agency service teams)</p> <p><input type="checkbox"/> 3 Support services (include basic needs, childcare, health, housing, recreation, transportation, etc.)</p>
12.6	<p>Other JCP Services Provided</p> <p>(Describe)_____</p>

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13.0	Service Engagement
13.1	Completed or satisfactorily participating in program/activities as directed? <input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Does not apply
13.2	Completed or satisfactorily participating in planned skill development? <input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Does not apply
13.3	Completed or satisfactorily participating in treatment programs? <input type="checkbox"/> Yes <input type="checkbox"/> Partially <input type="checkbox"/> No <input type="checkbox"/> Does not apply

14.0	Risk Areas Focused on by JCP
14.1	RISK AREAS FOCUSED ON BY JCP SERVICE PLAN DURING THE REPORT PERIOD <i>(check <u>all</u> that apply)</i> <input type="checkbox"/> 1 School Issues <input type="checkbox"/> 2 Peer Relationships <input type="checkbox"/> 3 Antisocial Behavior <input type="checkbox"/> 4 Family Functioning <input type="checkbox"/> 5 Substance Use <input type="checkbox"/> 6 Attitudes, Values, & Beliefs <input type="checkbox"/> 7 Not specified <input type="checkbox"/> 9 Don't know, unknown
14.2	Other area focused on by JCP Service Plan (specify) _____

Instructions: Community Version

NOTE: This is not a structured interview or survey instrument

The JCP Assessment was developed to identify dynamic and static risk and protective factors that put youth at risk of delinquency, and to use this information to guide decisions regarding level and type of intervention and/or supervision. Additional information and materials are available at: <http://www.npcresearch.com>.

For sample interview or survey questions, please see the Screener Prompt Sheet, Interview Questions, or Youth and Parent/Family Surveys in the OJCP Screen/Assessment User's Guide or on the Web at <http://www.npcresearch.com>.

If you don't have sufficient information for a "yes" or "no" response, or have conflicting information, check "More Info Needed." Completion (and data entry) of all fields is required.

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.

IMPORTANT: Only trained JCP Staff should complete this assessment. The youth or the youth's parent/guardian should NEVER complete the assessment.

PART I. YOUTH AND EVALUATOR INFORMATION

A. Youth Background

- ❖ Fill in all information on the youth's background.
 - Choose a primary **presenting behavior** from the following list only:

PRESENTING BEHAVIOR	RISK DOMAIN AREA
1. Poor academic performance	School Issue
2. School behavior issues	School Issue
3. Truancy/attendance	School Issue
4. Other school issues	School Issue
5. Negative peer influence	Peer Issue
6. Other peer issue	Peer Issue
7. Aggressive/violent behavior	Behavior Issue
8. Fighting	Behavior Issue
9. Fire setting	Behavior Issue
10. Possession of a weapon	Behavior Issue
11. Gang involved/gang affected (self-identified) ³	Behavior Issue
12. Running away	Behavior Issue
13. Sexual harassment/sexual acting out	Behavior Issue
14. Dating violence (aggressor)	Behavior Issue

³ Only select if youth self-identifies as gang-involved (for instance, actively participates as an active member of a gang, identifying themselves as members through self-report, attire, tattoos, hand signals, or police identification) or gang-affected (not actively participating as a member of a gang, but associates through friendship or family ties with a known gang member).

15. Theft/stealing	Behavior Issue
16. Vandalism (can include Criminal Mischief)	Behavior Issue
17. Staying out late/curfew violations	Behavior Issue
18. Arrest or law violation	Behavior Issue
19. Other behavior issues	Behavior Issue
20. Family conflict	Family Issue
21. Homeless	Family Issue
22. Out of home placement	Family Issue
23. Not following family rules	Family Issue
24. Other challenges for the family (not listed above)	Family Issue
25. Substance use/abuse	Substance Use Issue
26. Antisocial thinking/defiance/etc.	Attitudes Values Belief Issue
27. Social Isolation	Mental Health
28. Suicide attempt/thoughts	Mental Health
29. Other mental health issue	Mental Health

- If youth is juvenile-justice involved, please obtain the **JJIS number** assigned to the youth and enter it on the form.
- **1.1 – 1.3 Language:** Before conducting the assessment, complete items 1.1 through 1.3. to help determine if the youth or family needs an interpreter. If either is not proficient in English, please stop the assessment and continue when an interpreter or individual proficient in the youth and family's language is available. *Remember, even though there are not specific questions on the JCP about the family's English comprehension, if a family member is present, you should also determine their need for an interpreter.*
- **1.4 Race/ethnicity:** Ask youth to self-identify his/her race, ethnicity or cultural heritage. If the youth identifies with more than one race or ethnicity, check all that apply.
- When you enter this information into the **JCP Data Manager database**, the OCCF system will also prompt you to select a "population group" (which includes race/ethnicity, gender, and language). This population group data will help OCCF programs have a consistent way of reporting the clients they are serving. Please replicate the information entered in the above fields when entering the population group information.

B. Assessor/Evaluator Information

- ❖ Fill in all information on the assessor conducting the assessment.
 - **Assessment Date:** Enter the date the JCP Assessment was conducted (or initiated). When an assessment takes place over a period of days, a single date must be identified for the JCP Assessment. This date should represent the beginning of the process. The JCP Data Manager database will always prompt the user to enter a date.
 - Indicate whether the **assessment type** is an "I" (initial screen) or "R" (reassessment).

- The **primary referring agency**/individual should indicate the primary agency/individual responsible for bringing the youth to the attention of the JCP assessor (or agency). This field will help the programs better understand the avenues for which youth come to the attention of the JCP initiative, as well as serve as a case management tool. If the referral comes from an individual, try to indicate the agency (if applicable) after the name. For example: "John Smith, School Counselor", or "Jane Doe, Parent." In the rare case the primary referring agency is unknown, enter "unknown" in the database.

PART II. INDICATORS

Instructions: Information for the JCP Assessment can be gathered by interviewing the youth, family, and other sources. An assessor may also want to refer to official school, court, and/or other records for additional information.

- ❖ This section provides an answer sheet for recording identified risk and protective factors. Each item in this section includes the objective criteria for determining whether or not a factor is present.
- ❖ You should try to get sufficient information to answer all of the risk and protective factors. However, if you don't have sufficient information (or if you have conflicting information), check the middle column "More Info. Needed."
- ❖ This instrument is not a structured interview or survey. It is an answer sheet, and should not be filled out by the youth or parent/guardian. For materials that the youth or guardian can fill out, please see www.npcresearch.com.

PART III. SCORING AND TOTALS

Scoring: Only **un-shaded** items are scored.

- ❖ The risk factor 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. You can run reports from the JCP Data Manager to see which violence indicators are present in youth.

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 () in the left margin, the youth is eligible for JCP service.

- ❖ The **JCP Data Manger database** will automatically compute the number of domains, total JCP score, total risk factors and total protective factors.

PART IV. JCP SERVICE INFORMATION

FOR INITIAL ASSESSMENTS ONLY: If you are conducting an initial assessment, you only need to fill out section 11.

- ❖ **11.1 JCP Program/Service:** Indicate the JCP program or service that you are referring the youth to. Do not include other non-JCP services the youth may be receiving.

- ❖ **11.2** Indicate the reason you did not refer a youth to a JCP program or service.

FOR REASSESSMENT ONLY: If you are conducting a reassessment, you must complete sections 12-14 (you should leave section 11 blank).

- ❖ The **JCP Start Date** should indicate the day the youth began JCP Services (this date should be on or after the date of the initial assessment. The **JCP End Date** is the day the youth ended JCP services (if youth is still receiving services, leave this date blank).

- ❖ **12.3 Program Service Status:** Indicate the JCP program status of the youth under review (items 1-3). If the youth did not participate in JCP services, please indicate the reason for not completing (items 4-8).
 - If you indicated a reason on items 4-8 of question 12.3, you do not need to fill out any more information on the reassessment form. In the JCP Data Manager database, enter the additional fields as “null” if applicable.
 - **IMPORTANT:** If a youth is eligible for JCP services (has 2 or more risk domains on the initial assessment) a reassessment must be completed on the youth (even if it only indicates the youth did not receive program services, item 12.3).

- ❖ **13.0 Service Engagement:** This is a new section to the JCP, and has been added to help in the combined analysis of JCP and JJIS youth. The purpose of this set of items in JJIS is to determine if the youth’s original risk score should be adjusted (higher or lower) depending on how well the youth is responding to their case plan. For the community version of the reassessment, these questions should be answered in a similar fashion.
 - **13.1 Program/Activities**
 - A “yes” response indicates that the youth is participating satisfactorily in JCP program(s) and/or activity(s).

- **13.2 Skill Development**
 - A “yes” response indicates that the youth is participating satisfactorily in all planned skill development activities (such as anger management, etc.). Choose “does not apply” if the youth’s case plan does not include skill development.

- **13.3 Treatment Programs**
 - A “yes” response indicates that the youth is participating satisfactorily in all treatment conditions (such as substance abuse treatment, family counseling, etc.) as suggested in the case plan. If a youth is voluntarily participating in treatment unrelated to their presenting behavior or the treatment is not part of the case plan please select, “not apply.”

JCP DATA MANAGER DATABASE

- ❖ All Oregon JCP Assessments (2006.1) - Community Version and Reassessments, which are completed for youth non-offenders, should be entered in the JCP Data Manager database (located at <http://www.oregon.go/OCCF/webapps.shtml>).
 - Assessments and Reassessments for youth offenders receiving JCP funded services must be entered into the Juvenile Justice Information System (JJIS) using the JCP Risk Assessment - 2006.1 (located in the Youth Notebook under "assessments").

- ❖ A JCP Data Manager database User’s Manual is available at: www.npcresearch.com.

- ❖ The JCP Data Manager database will enable database users to run various staff/program reports based on available data and user login level. For assistance with the JCP Data Manager, you may contact OCCF web support at: occfwebsupport@fc.state.or.us.

For questions about using this JCP Assessment, please contact the JCP Evaluators:

Jerod Tarte
Juliette Mackin

tarte@npcresearch.com
mackin@npcresearch.com

503-243-2436 x 103
503-243-2436 x 114