

# Transforming Presentence Investigations: Incorporating Risk-Needs-Responsivity and Strength-Based Approaches into Reports

Prepared by Carey Group for the Pennsylvania Partnership for Criminal Justice Improvement

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# Foreword

The County Chief Adult Probation and Parole Officers Association of Pennsylvania (CCAPPOAP) is proud to present *Transforming Presentence Investigations: Incorporating Risk-Needs-Responsivity and Strength-Based Approaches into Reports*. This Pennsylvania Partnership for Community Justice Improvement (PPCJI) document was developed to help agencies incorporate current research and recommendations—specifically, those related to the risk-need-responsivity (RNR) model and strength-based approaches—into presentence investigations and reports.

Evidence-based presentence investigation (PSI) reports can assist the courts in determining appropriate sentences, jail and state facilities in addressing programming and reentry needs, and probation officers in developing effective supervision and case management strategies. The combined result is a research-based system that improves outcomes for the community, victims, and people before the court.

This document provides an overview of the RNR model, recommends practices, and offers solutions to common challenges. It also includes templates for a PSI interview guide and for a PSI report. Agencies are encouraged to customize both documents to meet their unique needs and to reflect their capacity.

We would like to take this opportunity to thank PPCJI's Implementation Workgroup for their impressive work organizing the information and materials for this publication.



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## Consulting Team

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# Introduction

The Pennsylvania Commission on Sentencing reports that, in 2022, 90,476 people were sentenced statewide at the Courts of Common Pleas level. With court dockets extremely busy, judges often have limited time to gain a comprehensive understanding of the people in front of them other than their criminal record prior to sentencing.

In 2007, the Conference of Chief Justices and the Conference of State Court Administrators passed Resolution 12 calling for the adoption of research-informed sentencing practices associated with a reduced likelihood of rearrest.<sup>1</sup> One tool that can aid in research-informed sentencing is a pre-sentence investigation (PSI) report. According to Pennsylvania code, “the pre-sentence investigation report shall include information regarding the circumstances of the offense and the character of the defendant sufficient to assist the judge in determining sentence.”<sup>2</sup> In addition, according to Standard 2.2 of the American Probation and Parole Association’s *National Standards for Community Supervision*, “Agencies should provide recommendations concerning terms and conditions in presentence reports submitted to the court...”<sup>3</sup>

## RISK-NEED-RESPONSIVITY MODEL

Research shows that following the risk-need-responsivity (RNR) model improves justice system outcomes.

- The risk principle tells us to match the intensity of supervision and intervention to a person’s likelihood of recidivism based on an actuarial assessment.
- The need principle tells us to focus interventions on a person’s criminogenic needs, as determined by the assessment.
- The responsivity principle tells us to match programming and program delivery to people’s unique characteristics.

The Pennsylvania Partnership for Criminal Justice Improvement (PPCJI) created this document to help agencies incorporate current research and recommendations—specifically, those related to the risk-need-responsivity (RNR) model and strength-based approaches—into their PSI reports. The document includes recommended practices; common challenges and solutions; a PSI interviewing guide, including possible language; and a sample PSI report.

<sup>1</sup> [https://ccj.ncsc.org/\\_data/assets/pdf\\_file/0019/23536/08012007-support-sentencing-public-safety-reduce-recidivism.pdf](https://ccj.ncsc.org/_data/assets/pdf_file/0019/23536/08012007-support-sentencing-public-safety-reduce-recidivism.pdf)

<sup>2</sup> [234 Pa. Code § 702](#)

<sup>3</sup> [https://www.appa-net.org/eweb/docs/APPA/National\\_Standards\\_Community\\_Supervision\\_FINAL.pdf](https://www.appa-net.org/eweb/docs/APPA/National_Standards_Community_Supervision_FINAL.pdf)

# Recommended Practices

## Adopt a Validated Risk/Needs Assessment Tool

Validated risk/needs assessment instruments are a key tool in helping justice systems improve decision making and outcomes:

- According to Standard 3.1 of the American Probation and Parole Association’s *National Standards for Community Supervision*, “Agencies should adopt and implement empirically developed and validated risk and needs assessments.”<sup>4</sup>
- Among the sentencing practices recommended in Resolution 12 is the use of validated risk/needs assessment information.<sup>5</sup>
- The National Center for State Courts’ 2011 report *Using Offender Risk and Needs Assessment Information at Sentencing*<sup>6</sup> provides courts with guidance on how to incorporate assessments into sentencing practices.

Used across the system—in court, correctional, and community supervision contexts—assessments provide data-driven predictions of the likelihood of certain events. General risk and needs assessment tools, which should include both static and dynamic risk factors,<sup>7</sup> predict the likelihood of recidivism.<sup>8</sup> Agencies should also adopt the use of specialized assessment tools for specific offenses (e.g., sex offenses, violent offenses, impaired driving) and to understand the presence and impact of factors such as trauma and mental health conditions.<sup>9</sup> The results of these assessments should be incorporated into PSI reports and shared with the courts and other stakeholders.

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<sup>4</sup> [https://www.appa-net.org/eweb/docs/APPA/National\\_Standards\\_Community\\_Supervision\\_FINAL.pdf](https://www.appa-net.org/eweb/docs/APPA/National_Standards_Community_Supervision_FINAL.pdf)

<sup>5</sup> [https://ccj.ncsc.org/\\_data/assets/pdf\\_file/0019/23536/08012007-support-sentencing-public-safety-reduce-recidivism.pdf](https://ccj.ncsc.org/_data/assets/pdf_file/0019/23536/08012007-support-sentencing-public-safety-reduce-recidivism.pdf)

<sup>6</sup> [https://www.ncsc.org/\\_data/assets/pdf\\_file/0020/19127/rna-guide-final.pdf](https://www.ncsc.org/_data/assets/pdf_file/0020/19127/rna-guide-final.pdf)

<sup>7</sup> Static risk factors, such as age and criminal history, cannot be changed through effective intervention, while dynamic risk factors, such as thoughts and beliefs and coping/self-control skills, can be changed through effective intervention. More information about risk and needs assessments can be found in the *Risk and Need Assessment User Guide: Volume 1* ([https://ccappoap.com/\\_static/d21026440532a300144ebade44929d9e/riskuserguide\\_vol\\_-1- final-9-10-2018-.pdf?dl=1](https://ccappoap.com/_static/d21026440532a300144ebade44929d9e/riskuserguide_vol_-1- final-9-10-2018-.pdf?dl=1)).

<sup>8</sup> Risk level is not related to the severity of the offense.

<sup>9</sup> More information about specialized assessments can be found in the *Risk & Need Assessment User Guide: Specialized Assessments* ([https://ccappoap.com/\\_static/1b2c3e85a27abdb8020b50d162e6c5af/ppcji-risk-assessments-user-guide\\_-1-16-23- final.pdf?dl=1](https://ccappoap.com/_static/1b2c3e85a27abdb8020b50d162e6c5af/ppcji-risk-assessments-user-guide_-1-16-23- final.pdf?dl=1)).

A common barrier to incorporating risk and needs information into PSI reports is that some stakeholders can be skeptical of the results. While ongoing and regular training and open, honest, and transparent discussions will help overcome some resistance, the most effective strategies are to validate the tool on the local population so that stakeholders can be sure of its accuracy and relevance and to collect and share data on supervision outcomes and how they correlate with results.

**Recommendation:** Adopt the use of general and specialized assessments, and include assessment results in PSI reports.

#### THE SENTENCE RISK ASSESSMENT INSTRUMENT

Pennsylvania has adopted a Sentence Risk Assessment Instrument that uses static factors to help the court determine the appropriate sentence, including when additional information (e.g., additional assessments, evaluations) “may assist the court in determining candidates for alternative sentencing, such as state intermediate punishment, state motivational boot camp, county intermediate punishment, recidivism risk reduction incentive; appropriateness for problem-solving courts; and the duration and intensity of community supervision or other programs or services” (<https://www.pacodeandbulletin.gov/secure/pacode/data/204/chapter305/chap305toc.html>).

## Use Assessment Results to Help Determine the Length of Community Supervision

According to 204 Pa. Code § 303.11, “the sentencing guidelines provide recommendations regarding the type of disposition, the duration of confinement and/or community supervision, the intensity of conditions, and the requirements associated with restitution and other economic sanctions.”<sup>10</sup> In Pennsylvania, the court is required to consider—but not necessarily follow—sentencing guidelines that reflect both the seriousness of the conviction offense and the person’s prior convictions. Other factors may impact the sentencing decision. These include mandatory minimum sentencing provisions, substance use assessments, validated risk/needs assessments, and other evidence-based practices.<sup>11</sup>

The court could consider diversion for people assessed as low risk and, if they are not diverted, provide them with short periods of supervision, with interventions focused on their stabilization needs (e.g., mental and physical health, housing, food security). For people assessed as moderate or high risk, the RNR model would suggest longer periods of

<sup>10</sup> <https://www.pacodeandbulletin.gov/Display/pacode?file=/secure/pacode/data/204/chapter303/s303.11.html&d=reduce>

<sup>11</sup> <https://www.pacodeandbulletin.gov/Display/pacode?file=/secure/pacode/data/204/chapter303/s303.11.html&d=reduce>

supervision with a higher dosage, or amount, of intervention focused on people’s criminogenic needs. The higher the risk, the greater the dosage.<sup>12</sup>

A significant barrier to aligning the length of community supervision with a person’s risk and needs is that many people believe that a lengthy period of supervision is always needed to help someone address their criminogenic needs and increase their likelihood of law-abiding behavior. It is critical that staff and stakeholders understand the importance of keeping probation terms just long enough to ensure accountability proportionate to the underlying act, connect people to needed treatment and services, and complete cognitive behavioral and other risk-reducing interventions with them. Longer supervision terms can result in more technical violations, lead to higher caseload sizes, and, significantly, **not** reduce recidivism.

**Recommendation:** Use results from risk/needs assessments to determine the length and intensity of community supervision.

## Individualize Conditions

There are two main types of conditions: supervision conditions, which focus on ensuring that people remain law-abiding during the supervision period, and behavior-change conditions, in which people are provided with the information, skills, resources, programming, and treatment to facilitate behavior change.

Pennsylvania statute indicates that “conditions shall be assessed and ordered based on individualized circumstances” and that the court should impose only those conditions that they deem “...necessary and the least restrictive means available to promote the defendant’s rehabilitation and protection of the public.”<sup>13</sup> In addition, the American Probation and Parole Association’s *National Standards for Community Supervision* indicates that conditions should be “reasonable, tailored to the individual, not overly burdensome, and include a focus on criminogenic factors” (Standard 2.1) and that agencies should include “recommendations concerning terms and conditions in the presentence reports...” (Standard 2.2).<sup>14</sup>

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<sup>12</sup> More information about sentencing length can be found in the *Length of Community Supervision* brief: [https://ccappoap.com/\\_static/f3f28324b8fc79fa7225486edda1f98b/supervision-length-final\(2\).pdf?dl=1](https://ccappoap.com/_static/f3f28324b8fc79fa7225486edda1f98b/supervision-length-final(2).pdf?dl=1).

<sup>13</sup> <https://casetext.com/statute/pennsylvania-statutes/consolidated-statutes/title-42-pacs-judiciary-and-judicial-procedure/part-viii-criminal-proceedings/chapter-97-sentencing/subchapter-e-imposition-of-sentence/section-9763-conditions-of-probation>

<sup>14</sup> [https://www.appa-net.org/eweb/docs/APPA/APPAs\\_National\\_Standards\\_for\\_Community\\_Corrections.pdf](https://www.appa-net.org/eweb/docs/APPA/APPAs_National_Standards_for_Community_Corrections.pdf)



Conditions should be linked to a person's assessed risk level and criminogenic needs. People at a low risk of recidivism should receive few conditions and low levels of intervention. For people at moderate and high risk, conditions should help them build the skills they need to address their assessed criminogenic needs and protect community well-being and safety. In addition, conditions should reflect people's assessed responsivity factors (e.g., motivation, mental health, gender, developmental age, learning style and learning disabilities, and culture) and stabilization needs (e.g., housing, medication, physical health, finances, childcare, and transportation). Although these factors are not criminogenic, if left unaddressed, they can interfere with people's ability to successfully participate in programming and complete supervision.

The following are some common barriers to assigning impactful conditions:

- There may be a belief that more conditions result in better outcomes for people on supervision, victims, and the community.
- Stakeholders may be inclined to assign the same conditions to everyone regardless of assessment results and investigators' findings.
- Conditions may not be achievable, realistic, or enforceable.
- They might interfere with people's prosocial activities (e.g., work, school, time with supportive others).

Ongoing training can help stakeholders understand that too many conditions might overwhelm people and result in officers spending most of their time monitoring compliance rather than focusing on behavior change; that it is important to consider people's abilities and situations, as well as agency, community, and virtual resources, when assigning conditions; that only enforceable conditions should be included; and that conditions should build on rather than negatively impact people's strengths.<sup>15</sup>

**Recommendation:** The PSI report should provide the court with the information it needs to craft individualized and least restrictive conditions that increase a person's likelihood of engaging in law-abiding behavior and that improve community well-being and safety.

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<sup>15</sup> More information about conditions can be found in the *Impactful Court Conditions* brief: [https://ccappoap.com/static/49070b89da526545201e7d58d97362e7/impactful-conditions-brief\(3\).pdf?dl=1](https://ccappoap.com/static/49070b89da526545201e7d58d97362e7/impactful-conditions-brief(3).pdf?dl=1). In addition, *Manual of Effective Correctional Programs* (<https://ccappoap.com/ebp-resources/ebp-stakeholder-resources/>) provides agencies with guidelines for selecting programming and offers a brief overview of effective programs.

## Incorporate a Strength-Based Approach

A strength-based approach identifies the strengths of an individual, their family, and their community, and how those strengths can help and support people in behavior change. In addition, strengths (e.g., self-reliance, employment skills, coping skills, cooperation with supervision) can be protective factors, which have been found to be correlated with an increased likelihood of law-abiding behavior. For these reasons, PSI reports should include and build on people's strengths.

Historically, the justice system has not focused on strengths, so, for many, this may be a challenging culture shift. Staff and stakeholders will need to be trained and provided with resources to help them and the people they are supervising to identify strengths and to use these strengths to increase the likelihood of success.

**Recommendation:** Include strengths in the PSI report.

## Train Staff

Staff who are tasked with writing PSI reports need to be properly trained and coached in administering risk/needs and specialized assessments, interpreting the results, and making recommendations based on them. Similarly, correctional staff need to be trained on how to use PSI reports to guide classification, programming, and reentry planning, while probation officers need to be trained on how to use PSI reports to determine the level and intensity of supervision, develop case plans, and identify supervision strategies.

Initial training is only the first step. It is essential that agencies identify a clear sustainability plan to help ensure fidelity of practice. This should include regular booster sessions, observations and coaching, and interrater reliability testing. In addition, initial trainings should be offered on a regular basis to address staff turnover.

**Recommendation:** Train staff in administering, interpreting, and making recommendations based on assessments, and in using assessment results.

## Train Stakeholders

It is essential that stakeholders are trained in how to best use the information in the PSI report. Specifically, the court, prosecutor, and defense attorney need to have confidence in the results of the risk/needs assessment and understand how to interpret the results. This includes understanding the definition of risk and differences between specific and general

risk, being able to identify populations that may need additional assessments, and knowing how assessment information should and should not be used to inform sentencing. It is also important that they understand that the PSI report is intended to enhance, not replace, the court's discretion.

Stakeholder turnover is a common barrier. To address this, training should not be an isolated event. Depending on the need, agencies might provide regularly scheduled stakeholder trainings for those who are new or are interested in a refresher.

**Recommendation:** Train stakeholders in how they can most effectively use the PSI report in sentencing decisions.

## Collaboratively Develop Standard PSI Interview Guide and Report Templates

The content and format of PSIs and PSI reports vary greatly across Pennsylvania. The frequency with which the court orders PSIs, the investigative expectations, and the length and content of reports are often dictated by the needs and capacity of the probation agency and courts. The agency, in consultation with the courts, should develop standard templates for both the PSI and the PSI report.

This guide identifies possible PSI interview questions, including potential language, ways to verify information, additional factors that may be considered, and an example of a PSI report. Agencies are strongly encouraged to individualize both the PSI and the PSI report to meet their needs. The following are some questions to consider:

- When should a report be ordered? For example, would it depend on the type or seriousness of the illegal act? On the grading of the illegal act?
- How long should the report be? Should there be short and long versions for different needs? Should it be in a narrative, bullet point, or table format?
- What information that is supported by the research should the report include?
- Should the report indicate the overall risk level (e.g., low, moderate, or high) or the actual score of the assessment?
- What types of recommendations should be offered regarding length of incarceration, length of supervision, and conditions? How specific should recommendations be?

It is sometimes difficult for stakeholders to come to a consensus on the content and format of the PSI and the PSI report. This is why collaboration between the agency and courts is so

essential when developing the templates. Piloting the new templates with one or two investigators and judges can also assist with obtaining buy-in.

**Recommendation:** Collaboratively develop a standard template for the PSI and the PSI report based on needs and capacity.

## Consider Victim Impact

PPCJI is committed to ensuring that victims' rights are protected in accordance with the Crime Victims Act (Act 11 of 1998) and that victims have a voice at sentencing. They should be provided with an opportunity to be interviewed or to offer a statement. The impacts they express should be reflected in the PSI report, including in recommended conditions that address their restoration and safety.<sup>16</sup>

**Recommendation:** Provide victims with an opportunity to offer a statement or to be interviewed, and craft recommendations to address restoration and safety.

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<sup>16</sup> More information on victims' rights can be found in *Ensuring Victims' Rights as a Probation Officer* ([https://ccappoap.com/\\_static/ec178134c4f7563db1893e39029ee082/new-ebp\\_rightsofvictim\\_probation-onepager-final-9-1-22.pdf?dl=1](https://ccappoap.com/_static/ec178134c4f7563db1893e39029ee082/new-ebp_rightsofvictim_probation-onepager-final-9-1-22.pdf?dl=1)).

# Appendix A: Presentence Investigation Interview Guide

**Instructions:** Use this interview guide to gather information for the PSI.

- Items in **blue** are questions from the ORAS-CST interview guide. (Not all questions from the ORAS-CST interview guide are included in this interview guide.)
- Items in **green** are from the ACE Questionnaire.
- Items in **purple** are intended to identify strengths.
- Cells shaded **aqua** ask whether information provided by interviewees has been verified.
- Cells shaded **orange** are interviewers' perceptions.
- Items in black in unshaded cells are additional recommended questions.

A few tips:

- Introduce the purpose of the PSI by saying, for example: "The court has asked our agency to prepare a pre-sentence investigation report. The purpose is to help the judge better understand you, determine an appropriate sentence, and identify how the system can work with you more effectively so you get out and stay out of the justice system. In addition to this interview, we also rely on multiple sources of information, such as previous records, contacts with others, etc. I will be taking a few notes now and then so I can remember things better. If something isn't entirely clear at any point, please feel free to stop me and ask me any questions you may have."
- Take notes on key points so that you can review them later.
- For all sections, use effective motivational interviewing (MI) techniques, including components of the spirit of MI (compassion, empowerment, partnership, and acceptance) and OARS (open-ended questions, affirmations, reflections, and summaries), to explore the views of the person being interviewed.

## Case Information

Name: Click or tap here to enter text.	Docket:
Alias(es):	Docket:
SID:	Docket:
Judge:	Docket:
District Attorney:	Defense Attorney:
Officer:	Interview Date: Click or tap to enter a date.

## Contact Information

Address:
Telephone Number:
Email:
Emergency Contact:

## Demographics

SS#:	U.S. Citizen:	
DOB:	Age:	Birthplace:
Gender (Birth):	Gender (Identity):	
Race:	Ethnicity:	
Height:	Weight:	
Hair Color:	Eye Color:	
Tattoos/Scars:		

## Description of Current Offense

Tell me about what happened the day you were arrested.	<input type="checkbox"/> Advised by counsel not to answer
Why did you decide to commit the offense?	

What part did others play in the offense?

What part did drugs or alcohol play?

Did you threaten or hurt anyone?

Was anyone else involved in the current offense?

What is your current relationship with them?

## Criminal History

Are you currently on probation, parole, or IP?

Notes:

Tell me about the first time you were ever arrested.

How old were you when you were first arrested?

What was it for?

Have you ever been arrested or charged with a crime as a juvenile, under the age of 18?

Most Serious Charge:

Date:

Grading:

Notes:

Verified juvenile record in Pennsylvania Juvenile Case Management System?  Yes  No

Not including your current charge(s), **how many times have you been convicted of a felony** as an adult (or certified adult)? Include any out-of-state charges.

Notes:

Have you ever been sentenced to county jail?

How many times?

Have you ever been sentenced to state prison?

How many times?

Have you ever been sentenced to another type of secure correctional facility?

How many times?

Notes:

While you were incarcerated, did you ever get written up or punished for misconduct?

How many times?

Notes:

[List the details of each incident, including when and where the incident occurred, what happened, what sanction the person received, and how they felt about the sanction.]



Verified with jail?  Yes  No

Prior to your current offense, have you ever been under community supervision before? Include probation, IP, ARD, etc.

Describe your adjustment.

Did you complete supervision?

What was the hardest part of being on supervision?

Have you ever been revoked for a technical violation while on supervision? (Consider for all prior offenses.)

If yes, provide details on what the violation was.

If you've had probation or parole supervision revoked for a technical violation, were you ever sentenced to state prison as a result of the violation?

How many times?

Verified prior record and current supervision status in JNET?  Yes  No

Verified prior record and violations in CPCMS?  Yes  No

Verified prior record and violations in agency's case management system?  Yes  No

Think about times in your life when you were following the law, staying out of trouble, and doing things that others considered positive. What contributed to those positive times in your life?

## Residence Information

Current Address:
<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Stay with family <input type="checkbox"/> Stay with friend <input type="checkbox"/> Other:
Who do you currently live with?
How many times have you moved in the past year? (Do not count incarcerations.)  What were reasons for the moves? (Probe to determine stability of current living situation.)
Tell me about the neighborhood you live in.  How would you rate your neighborhood? <input type="checkbox"/> High Crime <input type="checkbox"/> Moderate Crime <input type="checkbox"/> Some Crime, But No More Than Most <input type="checkbox"/> Little Crime
Tell me about the kinds of crime that happen in your neighborhood.  Are police there frequently?  Do you feel safe?
Officer's perception of the level of crime in the person's neighborhood: <input type="checkbox"/> High Crime <input type="checkbox"/> Moderate Crime <input type="checkbox"/> Some Crime, But No More Than Most <input type="checkbox"/> Little Crime
Are drugs readily available in your neighborhood? <input type="checkbox"/> Easily Available <input type="checkbox"/> Somewhat Available <input type="checkbox"/> Generally Not Available
Officer's perception of the availability of drugs in the neighborhood: <input type="checkbox"/> Easily Available <input type="checkbox"/> Somewhat Available <input type="checkbox"/> Generally Not Available
General comments related to residence:

## Veteran Status

Have you ever served in the military?	Type of discharge:
Military history (branch, dates, rank, special training):	
Did you receive any medals or commendations?	
Were there any court martials or disciplinary actions?	
Were you involved in conflict or did you experience any traumatic events?	
Are you currently being treated, or have you been treated in the past, for physical or mental health conditions related to your service?	
Obtained copy of DD-214? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## Marital/Relationship Status

What is your relationship status? <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> In a relationship <input type="checkbox"/> Separated <input type="checkbox"/> Widowed	
Name of spouse/partner:	Age or DOB:
Do you currently live together?	Are they part of your support system?
Have they ever been involved in drugs or criminal activities (regardless of arrest or conviction)?	
Notes:	
Describe your relationship with your partner.	
How do you get along?	

Do you and your partner have a supportive relationship?

How do you resolve disagreements?

In this relationship, have you experienced physical, psychological, or sexual abuse?

Have you ever obtained a protection from abuse (PFA) order against your partner?

Has your partner ever obtained a protection from abuse (PFA) order against you?

Verified in PFAD?  Yes  No

Whether involved or single, rate how satisfied you are with your current marital status.

Very Satisfied  Satisfied  Somewhat Satisfied  Not Satisfied

Notes:

General comments related to marital/relationship status:

Interviewed current partner?  Yes  No

## Children

Tell me about your children. Describe your relationship with them.

Child's Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Age or DOB:	Custody Status:
Do they live with you?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

Child's Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Age or DOB:	Custody Status:
Do they live with you?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

Child's Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Age or DOB:	Custody Status:
Do they live with you?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

Child's Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Age or DOB:	Custody Status:
Do they live with you?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

Child's Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Age or DOB:	Custody Status:
Do they live with you?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

Child's Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Age or DOB:	Custody Status:
Do they live with you?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

Was Children and Youth, foster care, or a similar agency involved with any of your children?

Verified with Children and Youth?  Yes  No

General comments related to children:

Interviewed at least one child?  Yes  No

## Parental Figures

Tell me about your parents and/or anyone else who helped raise you. Describe your relationship with them.

Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship: Mother	Age or DOB:
Do you live together?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship: Father	Age or DOB:
Do you live together?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

Name:		<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship:	Age or DOB:	
Do you live together?	Are they part of your support system?	
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?		
Notes:		

Name:		<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship:	Age or DOB:	
Do you live together?	Are they part of your support system?	
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?		
Notes:		

Name:		<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship:	Age or DOB:	
Do you live together?	Are they part of your support system?	
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?		
Notes:		



Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship:	Age or DOB:
Do you live together?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

What was your childhood like?
General comments related to parental figures:
Interviewed at least one person in a parental role? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Family and Social Supports

Describe your relationship with family (siblings, aunts, uncles, cousins, etc.) and friends. Include those who are part of your support system (not listed above).

Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship:	Age or DOB:
Do you live together?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

Name:		<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship:	Age or DOB:	
Do you live together?	Are they part of your support system?	
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?		
Notes:		

Name:		<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship:	Age or DOB:	
Do you live together?	Are they part of your support system?	
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?		
Notes:		

Name:		<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship:	Age or DOB:	
Do you live together?	Are they part of your support system?	
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?		
Notes:		

Name:	<input type="checkbox"/> Living <input type="checkbox"/> Deceased
Relationship:	Age or DOB:
Do you live together?	Are they part of your support system?
Have they ever been involved in drugs or illegal activities (regardless of arrest or conviction)?	
Notes:	

General comments related to family and social supports:
Interviewed at least one family member or social support? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Additional Family and Social Support Questions

Have you ever been arrested for assaulting a family member? Explain.
How does your family feel about you getting in trouble with the law?
Has your trouble with the law changed your relationship with your family?
How many close friends would you say you have?
How often do you see them?
What percentage of your close friends have been in trouble with the law?

What kind of things have they been involved in?
Now I want you to think of other friends, not necessarily close ones, but more like acquaintances. These are people you see and hang out with occasionally. How many of your acquaintances have been in trouble with the law?
What kind of activities have they been involved in?
How often do you have contact with them?
What are some of the activities you like to do with your family and friends?
How would you rate the current emotional and personal support that you receive from your friends and family? <input type="checkbox"/> Very Strong <input type="checkbox"/> Strong <input type="checkbox"/> OK <input type="checkbox"/> Weak <input type="checkbox"/> No Support
How satisfied are you with this level of support? <input type="checkbox"/> Very Satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Somewhat Satisfied <input type="checkbox"/> Not Satisfied
Visiting records at jail viewed for family and friends? <input type="checkbox"/> Yes <input type="checkbox"/> No

### Childhood Abuse and Neglect

Did a parent or other adult in the household often or very often: Swear at you, insult you, put you down, or humiliate you? OR Act in a way that made you afraid that you might be physically hurt?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did a parent or other adult in the household often or very often: Push, grab, slap, or throw something at you? OR Ever hit you so hard that you had marks or were injured?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did an adult or person at least 5 years older than you ever touch or fondle you or have you touch their body in a sexual way? OR Attempt or actually have oral, anal, or vaginal intercourse with you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you often or very often feel that: No one in your family loved you or thought you were important or special? OR Your family didn't look out for each other, feel close to each other, or support each other?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Did you often or very often feel that: You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? OR Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were your parents ever separated or divorced?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were any of your parents or other adult caregivers: Often or very often pushed, grabbed, slapped, or had something thrown at them? OR Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? OR Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was a household member depressed or mentally ill, or did a household member attempt suicide?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did a household member go to prison?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was Children and Youth, foster care, or a similar agency involved in your family when you were a child?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified with Children and Youth?	<input type="checkbox"/> Yes <input type="checkbox"/> No

### Gang Activity

Have you ever been in a gang?		
<input type="checkbox"/> Yes – Still Active <input type="checkbox"/> Yes – No Longer Active <input type="checkbox"/> No – Never		
Gang Name:	Date Joined:	Date Left:
General comments related to gangs:		
Verified with gang intelligence? <input type="checkbox"/> Yes <input type="checkbox"/> No		

### Education

What was the highest level of education you completed?
<input type="checkbox"/> High School Diploma <input type="checkbox"/> GED <input type="checkbox"/> College Education <input type="checkbox"/> Did Not Complete High School or GED
<input type="checkbox"/> GED and a 2-Year Program <input type="checkbox"/> Vocational Training <input type="checkbox"/> Other:
Notes:

In school, did you ever have any learning, emotional, or behavioral struggles?

Learning Issues    Emotional Issues    Behavioral Issues    No Issues

Notes:

Were you ever suspended or expelled from school?

In-School Suspension    Out-of-School Suspension    Expulsion

No Suspensions or Expulsions

Notes:

Describe some of your strengths from when you were in school.

Were you ever bullied or teased in school?

General comments related to education:

Obtained copied of educational records?    Yes    No

## Employment

Were you working at the time of your arrest?

If you were working, what were you doing?

Employer:

Job Position:

Length of Employment:

What is your current employment status?	
<input type="checkbox"/> Employed (Include Self-Employed) <ul style="list-style-type: none"> <li><input type="checkbox"/> Full-Time Hours (30+ Hours Per Week)</li> <li><input type="checkbox"/> Part-Time Hours</li> <li><input type="checkbox"/> Temporary or Inconsistent Hours</li> </ul> Notes:	Employer:
	Job Position:
	Length of Employment:
	Paying Taxes or Filing 1099?:
<input type="checkbox"/> Retired <ul style="list-style-type: none"> <li><input type="checkbox"/> Collecting Pension</li> <li><input type="checkbox"/> Not Collection Pension</li> </ul> Notes:	
<input type="checkbox"/> Disability <ul style="list-style-type: none"> <li><input type="checkbox"/> Verified disability</li> <li><input type="checkbox"/> Collecting SSI/SSD   <input type="checkbox"/> Not Collecting SSI/SSD</li> <li><input type="checkbox"/> Able to Work   <input type="checkbox"/> Not Able to Work</li> </ul> Notes, including disability:	
<input type="checkbox"/> Student <p>School Name: _____ Location: _____</p> <input type="checkbox"/> Classes on Campus <input type="checkbox"/> Classes Online <ul style="list-style-type: none"> <li><input type="checkbox"/> Full-Time (More than 6 Credits)   <input type="checkbox"/> Part-Time (6 Credits or Less)</li> </ul> Notes:	

- Homemaker
  - Maintain House
  - Care for Dependent

Notes:

- Unemployed
  - Looking for Work
  - Not Looking for Work

Notes:

Tell me about your work history.

Please describe your job skills and strengths.

How do you get along with your coworkers?

How do you get along with your boss?

General comments related to employment:

Verified employment in JNET?  Yes  No

Obtained copied of pay stubs?  Yes  No



## Financial Situation

Tell me about your current financial status. Are you able to get by or are you struggling to make ends meet?				
How do you support yourself while not working? (If unemployed)				
Within the past six months, have you been behind on or struggling to pay any of the following? <input type="checkbox"/> Child Support <input type="checkbox"/> Medical Bills <input type="checkbox"/> Household Bills <input type="checkbox"/> Fines/Costs <input type="checkbox"/> Debts/Loans/Credit Cards <input type="checkbox"/> Other: _____ <input type="checkbox"/> Not Behind on Any Bills/Debts				
Notes:				
What is your current monthly income?	Source of income:			
Do you have any additional sources of household income?	Sources of income:			
What are your estimated monthly expenses?	Notes:			
Do you have any debts or assets?	Notes:			
Do you own any property? Vehicles?	Notes:			
Do you worry about finances and meeting your basic needs?				
How would you rate your current financial situation?				
1	2	3	4	5
Cannot pay bills			Can pay bills and have extra money	
General comments related to financial situation:				
Obtained copied of financial records? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Verified activity with Prothonotary? <input type="checkbox"/> Yes <input type="checkbox"/> No				

## Physical Health

Do you have any current physical illnesses?

[Include the diagnosis, treatment, and medications.]

What is your current health insurance status?

Private Insurance  Medical Assistance  Uninsured  Other:

Do you feel that your current physical health will interfere with your ability to comply with court conditions and treatment? Explain.

General comments related to physical health:

Obtained copied of medical records?  Yes  No

## Mental Health

Do you have any current mental illnesses?

[Include the diagnosis, treatment, and medications.]

Are you taking your medications as prescribed?

Have you ever been hospitalized for mental health concerns?

Have you ever attempted suicide or had suicidal thoughts?

What is your current health insurance status?

Private Insurance  Medical Assistance  Uninsured  Other:

Do you feel that your current mental health will interfere with your ability to comply with court conditions and treatment? Explain.

Do you feel that your mental health contributed to your arrest? Explain.

General comments related to mental health:

Obtained copies of mental health records?  Yes  No

## Alcohol Use

Have you ever consumed alcohol?

Tell me about your drinking habits.

Do you usually drink alone or with others?

How old were you when you first started regularly drinking alcohol? Do not include taking a sip or drinking socially only a handful of times.

How often (daily, weekly, monthly) and under what circumstances were you drinking when you first started drinking regularly?

Not including periods of incarceration, how often have you consumed alcohol within the last 6 months?

How long has it been since you last drank?

List reasons for drinking (e.g., birthday, celebrating special occasion, bad breakup, family death, etc.).

What is the longest period you have abstained from drinking? Do not count periods of incarceration.

What has worked in the past to help you abstain?

Within the last 6 months, have you had any of the following employment issues because of alcohol use? [\[Click on all that apply.\]](#)

Issue	Notes
<input type="checkbox"/> Been denied a job due to a failed urine test	
<input type="checkbox"/> Been fired from a job	
<input type="checkbox"/> Missed work	
<input type="checkbox"/> Been criticized because of the quality of your work	
<input type="checkbox"/> Been caught under the influence at work	

Were you under the influence of alcohol at the time of your arrest?

Do you feel that alcohol contributed to the behaviors that led to your arrest?

Has anyone (e.g., friends, family, coworkers, employers, etc.) ever expressed concern about your drinking and/or asked you to stop or cut down on your drinking?

If yes, explain. Include name(s), relationship to you, approximate date(s), and the concern.

Do you think you have a problem with alcohol?

Do you think you've had a problem with alcohol in the past?

If yes, explain. If the problem was in the past, include the approximate time frame and what your concerns were.

If you think that you have a problem with alcohol, [are you willing to consider going to a program?](#)

General comments related to alcohol use:

Officer's perception and/or knowledge of a problem with alcohol use:

- Never had a problem with alcohol
- Had a problem with alcohol in the past
- Has a current problem with alcohol

Notes:

## Substance Use

Have you ever used any drugs?

When was the last time you used drugs?

Tell me about your substance use.

[Do you use alone or with others?](#)

What substances have you used? [\[Click on all that apply.\]](#)

Substance	Age of First Use	Frequency of Use	Date or Age of Last Use
<input type="checkbox"/> Marijuana/Hashish			
<input type="checkbox"/> Cocaine (Powder)			
<input type="checkbox"/> Cocaine (Crack)			
<input type="checkbox"/> Heroin			
<input type="checkbox"/> Fentanyl			
<input type="checkbox"/> LSD/ACID			
<input type="checkbox"/> Mushrooms			
<input type="checkbox"/> PSP			
<input type="checkbox"/> Ecstasy/Molly			
<input type="checkbox"/> Meth/Crystal			
<input type="checkbox"/> Synthetic Marijuana/ K2			
<input type="checkbox"/> Bath Salts			
<input type="checkbox"/> Barbiturates			
<input type="checkbox"/> Inhalants			
<input type="checkbox"/> Stimulants			
<input type="checkbox"/> Pills (Other)			
<input type="checkbox"/> Other:			
Notes:			

Have you ever had any of the following issues related to substance use? [Do not count alcohol.]

Issue	Never	12+ Months Ago	Within Past 12 Months	Explain
Social/Friendships				
Legal				
Family Relationships				
Employment				
Health				
Education				
Financial				
Other:				

Within the last 6 months, have you had any of the following employment issues because of substance use? [\[Click on all that apply.\]](#)

Issue	Notes
<input type="checkbox"/> Been denied a job due to a failed drug test	
<input type="checkbox"/> Been fired from a job	
<input type="checkbox"/> Missed work	
<input type="checkbox"/> Been criticized on the quality of your work	
<input type="checkbox"/> Been caught under the influence at work	
<input type="checkbox"/> Other:	

Were you under the influence of substances at the time of your arrest?

Do you feel that substances contributed to your behaviors that led to your arrest?

What is the longest period of time that you have abstained from substances? Do not count periods of incarceration.

What has worked in the past to help you abstain?



Do you think you have a problem with drugs?

Do you think you've had a problem with drugs in the past?

If yes, explain. If the problem was in the past, include approximate dates and what your concerns were.

If you think you have a problem with drugs, [are you willing to consider going to a program?](#)

General comments related to substance use:

Officer's perception and/or knowledge of a problem with substance use:

- Never had a problem with substances
- Had a problem with substances in the past
- Has a current problem with substances

Notes:

## Alcohol and Substance Use Treatment

Have you ever been in treatment for alcohol and/or substance use, including treatment while incarcerated?

Facility/ Program	Inpatient	Halfway House	Partial Hospital	IOP	Outpatient	Detox	Support Groups	Other:	Treated For			Notes (Explain any unsuccessful discharge)
									Alcohol Use	Substance Use	Both	
												Successful Discharge <input type="checkbox"/> Yes <input type="checkbox"/> No
												Successful Discharge <input type="checkbox"/> Yes <input type="checkbox"/> No
												Successful Discharge <input type="checkbox"/> Yes <input type="checkbox"/> No
												Successful Discharge <input type="checkbox"/> Yes <input type="checkbox"/> No

Facility/ Program	Inpatient	Halfway House	Partial Hospital	IOP	Outpatient	Detox	Support Groups	Other:	Treated For			Notes (Explain any unsuccessful discharge)
									Alcohol Use	Substance Use	Both	
												Successful Discharge <input type="checkbox"/> Yes <input type="checkbox"/> No
												Successful Discharge <input type="checkbox"/> Yes <input type="checkbox"/> No
												Successful Discharge <input type="checkbox"/> Yes <input type="checkbox"/> No

Notes:

Obtained copies of treatment records?  Yes  No

## Activities/Free Time

Think about the past 6 months, including any time spent while incarcerated. [Walk me through a typical day for you](#). Provide details about activities, times, names of people with whom you spend time, etc. If weekday activities differ from weekend activities, please explain.

How much free time do you estimate you have each week?

[Do you have any hobbies or interests?](#)

[Do you belong to any groups or clubs?](#)

[Do you go to church](#) or another place of worship?

If you go to church or another place of worship, how frequently do you go?

What voluntary structured activities do you engage in regularly?

What court-ordered structured activities do you engage in regularly?

General comments related to activities/free time:

## Thoughts, Attitudes, and Behaviors

How do you feel about what happened?

How do you feel about your own history of illegal behavior, including past and present offenses?

Officer's perception and/or knowledge of the person's pride in past and present illegal behavior:

- Shows no pride in illegal behavior
- Shows some pride in illegal behavior
- Shows a lot of pride in illegal behavior

Notes:

Officer's perception and/or knowledge of the person's remorse for past and present behavior:

- Shows genuine remorse for behavior
- Does not show remorse for behavior

Notes:

Officer's perception and/or knowledge of the person's acknowledgment of responsibility for past and present illegal behavior:

- Takes full responsibility for behavior
- Takes some responsibility for behavior
- Takes no responsibility for behavior

Notes:

Officer's perception and/or knowledge of the person's justification, understanding, and acceptance of past and present illegal behavior:

- Does not try to justify, rationalize, or minimize behavior
- Tries to justify, rationalize, or minimize behavior a little
- Completely tries to justify rationalize, or minimize behavior

Notes:

Has anything in your life changed you or led you here?

Officer's perception of past events that may have had an impact on the person's emotions, motivations, or beliefs:

Tell me about the victim(s).

How do you think they feel about what you did?

As a general rule, do you worry about other people's problems?

Why or why not?

Are you generally concerned about your family and friends and their problems?

Why or why not?

Officer's perception and/or knowledge of the person's concern for others.

- Shows concern for others
- Shows concern for family/friends only
- Shows no concern for others

Notes:

Officer's perception of any neutralizing techniques that the person uses: [\[Click on all that apply\]](#)

- Denial of Responsibility:** The person feels that their illegal acts are due to factors beyond their control or that they were "wrongly accused." They may justify and/or minimize their behavior.
- Denial of Injury:** The person admits responsibility for the act but minimizes the extent of the harm or denies any harm.
- Victim Blaming:** The person explicitly states or implies that the victim is to blame for the harm.
- Victim Mentality:** The person expresses a negative attitude toward themselves and/or their ability to achieve goals through prosocial means. They may make self-deprecating statements such as "I have never been good enough," "I'm not good at any job," "I never did well in school," etc.
- Lack of Empathy or Sensitivity Toward Others:** The person shows no concern or desire to understand how their behavior may affect others.
- Lack of Genuine Remorse or Pride in Behavior:** The person shows no concern or true remorse for their actions and may even be proud of their behavior.
- "System Bashing":** The person believes that those who disapprove of the person's actions are immoral, hypocritical, or criminal themselves, since "everyone does stuff like this."
- Appeal to Higher Loyalties:** This is common among gang members, who believe that they "live by a different code" or that it is acceptable to sacrifice the demands of society at large for the demands of more immediate loyalties.
- Negative Expression about the Law/Authority:** The person may feel that the law is unfair, express negative thoughts about conventional institutions or those in positions of power, disregard rules and procedures, and/or not follow directives from people in positions of authority.
- No Neutralization Techniques Noted**

Notes:

Now, I want you to think about how things have been going for you recently (i.e., in the past 6 months). Do you sometimes feel that you have lost control over events in your life?

- Feels in control over events
- Sometimes lacks control
- Generally lacks control

Notes:

Officer's perception of whether the person feels in control of their life:

- Feels like they are in control
- Feels like they sometimes lacks control
- Feels like they generally lack control

Notes:

Do you think it is sometimes ok to tell a lie?

Under what circumstances?

Officer's perception and/or knowledge of the person's acceptance of lying:

- Feels lying is wrong
- Feels lying is wrong, except for small white lies
- Feels lying is acceptable or justifiable
- Has already been caught lying or omitted information

Notes:



A lot of people like to take chances and risks. Do you consider yourself a risk taker?

What activities do you take part in?

How often do you take part in them?

How about when you committed your offense? Do you feel like you were engaging in risky behavior?

How did it make you feel?

If I asked you to rate yourself as a risk taker on a scale from 1 to 5, with 1 being not at all and 5 being often, how would you rate yourself?

Have you ever hurt or threatened to physically hurt anyone?

If yes, what was their relationship to you?

Would you describe yourself as someone who “walks away from a fight,” or “tries to avoid it, but it seems to find you,” or “first one in?”

Under what circumstances, if any, would you begin a physical fight?

Officer’s perception and/or knowledge of the person’s acceptance of physical fighting:

- Feels physical fighting is wrong
- Feels physical fighting is acceptable or justifiable

Notes:

Officer's perception and/or knowledge of the person's ability to walk away from a physical confrontation:

- Would walk away from a physical confrontation
- Would not walk away from a physical confrontation

Notes:

Officer's perception and/or knowledge of whether the person would begin a physical confrontation:

- Would not begin a physical confrontation
- Would begin a physical confrontation

Notes:

General comments about thoughts, attitudes, and behaviors:

## Final Thoughts

In general, do you agree with the statement "Do unto others before they do unto you"? (Opposite of the Golden Rule)

- Disagree with statement
- Depends on situation
- Agree with statement

Notes:

Are you open to participating in any treatment or programming, if our office recommends it?

Explain:

What conditions or programs do you feel would help you successfully complete community supervision?

## Post-Interview

Officer's perception of strengths		
<input type="checkbox"/> Able to control temper	<input type="checkbox"/> Flexible	<input type="checkbox"/> Peacemaker
<input type="checkbox"/> Able to express feelings	<input type="checkbox"/> Forgiving	<input type="checkbox"/> Persistent
<input type="checkbox"/> Adaptable	<input type="checkbox"/> Friendly	<input type="checkbox"/> Polite
<input type="checkbox"/> Adventurous	<input type="checkbox"/> Funny	<input type="checkbox"/> Practical
<input type="checkbox"/> Ambitious	<input type="checkbox"/> Generous	<input type="checkbox"/> Prosocial family
<input type="checkbox"/> Artistic	<input type="checkbox"/> Good endurance	<input type="checkbox"/> Prosocial friends
<input type="checkbox"/> Assertive	<input type="checkbox"/> Good friend	<input type="checkbox"/> Quick-thinking
<input type="checkbox"/> Athletic	<input type="checkbox"/> Good memory	<input type="checkbox"/> Relaxed
<input type="checkbox"/> Believes in self	<input type="checkbox"/> Good parent/motivated to be there for their children	<input type="checkbox"/> Reliable
<input type="checkbox"/> Cares about others	<input type="checkbox"/> Good problem solver	<input type="checkbox"/> Religious
<input type="checkbox"/> Carpentry skills	<input type="checkbox"/> Good sense of humor	<input type="checkbox"/> Resourceful
<input type="checkbox"/> Competitive	<input type="checkbox"/> Happy	<input type="checkbox"/> Sensitive to the needs of others
<input type="checkbox"/> Confident	<input type="checkbox"/> Hard-working	<input type="checkbox"/> Sincere
<input type="checkbox"/> Connected with 12-step support groups	<input type="checkbox"/> Healthy	<input type="checkbox"/> Smart
<input type="checkbox"/> Content/has inner peace	<input type="checkbox"/> Honest	<input type="checkbox"/> Spiritual
<input type="checkbox"/> Cool-headed	<input type="checkbox"/> Imaginative	<input type="checkbox"/> Spontaneous
<input type="checkbox"/> Cooperative	<input type="checkbox"/> Independent	<input type="checkbox"/> Strong
<input type="checkbox"/> Creative	<input type="checkbox"/> Intelligent	<input type="checkbox"/> Strong family support
<input type="checkbox"/> Curious	<input type="checkbox"/> Internally motivated	<input type="checkbox"/> Strong leadership skills
<input type="checkbox"/> Determined	<input type="checkbox"/> Likable	<input type="checkbox"/> Strong role models
<input type="checkbox"/> Eager to get off supervision	<input type="checkbox"/> Logical	<input type="checkbox"/> Successful in the past
<input type="checkbox"/> Emotionally intelligent	<input type="checkbox"/> Loves animals	<input type="checkbox"/> Supportive boss
<input type="checkbox"/> Empathetic	<input type="checkbox"/> Loves children	<input type="checkbox"/> Transportation
<input type="checkbox"/> Employed	<input type="checkbox"/> Loyal	<input type="checkbox"/> Warm-hearted
<input type="checkbox"/> Encouraging teacher	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Well-liked by others
<input type="checkbox"/> Energetic	<input type="checkbox"/> Musical	<input type="checkbox"/> Willing to learn
<input type="checkbox"/> Enthusiastic	<input type="checkbox"/> Opportunities	<input type="checkbox"/> Willing to take a stand
<input type="checkbox"/> Ethical	<input type="checkbox"/> Optimistic	<input type="checkbox"/> Willing to take risks
<input type="checkbox"/> Extensive work history	<input type="checkbox"/> Organized	<input type="checkbox"/> Other:
<input type="checkbox"/> Fair	<input type="checkbox"/> Patient	

**Officer's perception of stabilization needs, barriers, and other responsivity factors**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Conflict with work or school schedule   | <input type="checkbox"/> Lack of childcare      | <input type="checkbox"/> Limited job skills         |
| <input type="checkbox"/> Cost of services                        | <input type="checkbox"/> Lack of education      | <input type="checkbox"/> Limited time               |
| <input type="checkbox"/> Disability                              | <input type="checkbox"/> Lack of family support | <input type="checkbox"/> Limited treatment services |
| <input type="checkbox"/> Financial insecurity                    | <input type="checkbox"/> Lack of government ID  | <input type="checkbox"/> Mental health concern      |
| <input type="checkbox"/> Food insecurity                         | <input type="checkbox"/> Lack of insurance      | <input type="checkbox"/> Other:                     |
| <input type="checkbox"/> Housing instability                     | <input type="checkbox"/> Lack of social network |   |
| <input type="checkbox"/> Lack of cell phone/access to technology | <input type="checkbox"/> Lack of transportation |   |
|  | <input type="checkbox"/> Lack of work           |   |
|  | <input type="checkbox"/> Limited job history    |   |

**Officer's assessment of the interview:**

**Other comments or information:**

## Assessments

<b>Pennsylvania Commission on Sentencing</b>	
Sentence Risk Assessment Instrument Score:	

<b>Ohio Risk Assessment System (ORAS)</b>	
Community Supervision Screening Tool (CSST) Risk Level:	Date:
Community Supervision Tool (CST) Risk Level:	Date:

Criminogenic Need Domain	Low	Moderate	High
Criminal History	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education/Employment/Financial Situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family/Social Support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neighborhood Problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer Associations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Criminal Attitudes/Behavioral Patterns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Adverse Childhood Experiences</b>
ACE Score:

<b>Specialized Assessments/Other Assessment Information</b>
Notes:

## Recommended Special Conditions and Supervision Plan

[Empty box for Recommended Special Conditions and Supervision Plan]

# Appendix B: Somewhere County Adult Probation and Parole Agency Presentence Investigation

Name: Jonathon Doe  
 Alias: John Doe  
 Address: Somewhere Correctional Facility  
 100 Main Street  
 Somewhere, PA 11111  
 Home Phone: 555-555-5555  
 Cell Phone: 555-555-5555  
 Sex: Male  
 Citizenship: USA  
 Judge:  
 Defense Attorney:

Report Date: 1-1-25  
 SSN: 123-45-6789  
 DOB: 1-1-75  
 SID: 987-65-43-2  
 FBI: 111111AB1  
 OLN: 22222222  
 Veteran: Army  
 Race: White  
 District Attorney:

## Current Offense

Docket No.	OTN	Offense Code	Offense & Grade	Date of Incident/Arrest

## Prior Arrest Resulting in Conviction/Adjudication

Date of Arrest/Disposition	County/State	Offense	Disposition

Bail Status: \$10,000 Cash  
 Credit: 125 days

Jail: 11-15-24

Released: N/A



# Appendix C: Sample PSI Report

## Official Record

(See the criminal complaint and probable cause statement.)

## Defendant's Version

[Add a paragraph describing the defendant's version of the event.]

Jonathan Doe agrees with the substantive facts of the probable cause statement. He reports that he and his girlfriend, Julie Simon, had a recent argument because he thought she was flirting with one of his friends, Robert Adams. He states that he decided to go fishing for a few hours and was drinking beer. While walking home, he saw Julie talking to Mr. Adams. Mr. Doe said that he just "lost his mind," ran up and punched Mr. Adams several times, and then immediately went home.

## Victim Statement

[Add a paragraph describing the victim's version of the event.]

Mr. Adams was interviewed by phone. He indicated that he saw Ms. Simon, with whom he's been friends since childhood, on the street and was talking to her when Mr. Doe ran toward him screaming, "I knew it!" Mr. Doe punched him several times and then fled the scene. Mr. Adams reports several bruises but no serious injuries. (See the attached victim statement.)

## Assessment and Interview

[List the actuarial assessment used and the assessed risk level.]

Mr. Doe was interviewed and assessed using the Ohio Risk Assessment System-Community Supervision Tool (ORAS-CST). This is an evidence-based, nonproprietary tool that separates adults into risk groups based on their likelihood to recidivate and identifies dynamic risk factors that can be used to prioritize program needs. It should be noted that this is a general predictor of recidivism and not offense-specific. The court can use the person's assessed risk level and criminogenic needs to help determine the length of community supervision and recommended programming and conditions, with the duration of supervision increasing as the risk level increases.

## ORAS-CST Risk Group

MALES	FEMALES
<input type="checkbox"/> Low <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Very High	<input type="checkbox"/> Low <input type="checkbox"/> Low/Moderate <input type="checkbox"/> Moderate <input type="checkbox"/> High

## Community Supervision Tool Dynamic Risk Factors

[Do not include this section for people assessed as low risk.]

Domain	Does Not Contribute to Overall Risk	Potential Concern to Overall Risk	Significantly Contributes to Overall Risk
<b>Criminal History<sup>i</sup></b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments: [List strengths and concerns. Discuss only arrests resulting in conviction or adjudication. Present as a narrative or bullet points.] Mr. Doe had one prior conviction five years ago for an alcohol-related DUI where he fled from the police.			
<b>Education/Employment/Financial Situation<sup>ii</sup></b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments: [List strengths, concerns, and barriers. Present as a narrative or bullet points.] Mr. Doe completed high school and a two-year carpentry certification. At the time of the offense, he was employed full-time as a carpenter and was known to be very skilled. He was fired due to his recent conviction. He reports that he has been unable to find a job due to a lack of a driver's license. He also states that he is falling behind on his bills and that he may be evicted from his apartment.			
Recommended Conditions: <input type="checkbox"/> No conditions related to need <input checked="" type="checkbox"/> Attend employment program at PA Careerlink <input type="checkbox"/> Attend programs at the designated Department of Corrections facility that address this need			
<b>Family/Social Support<sup>iii</sup></b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments: [List strengths, concerns, and barriers. Present as a narrative or bullet points.] Mr. Doe describes most of his family as very supportive and says that they "have always been there for him." He reports that, over the last couple of years, he has "burned some bridges" and that he wants to reestablish connections. He is currently single; Ms. Simon broke off their relationship after the incident.			

Domain	Does Not Contribute to Overall Risk	Potential Concern to Overall Risk	Significantly Contributes to Overall Risk
<p>Recommended Conditions:</p> <p><input checked="" type="checkbox"/> No conditions related to need</p> <p><input type="checkbox"/> [Add conditions available in the agency]</p> <p><input type="checkbox"/> Attend programs at the designated Department of Corrections facility that address this need</p>			
<b>Neighborhood Problems<sup>iv</sup></b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>Comments:</p> <p>[List strengths, concerns, and barriers. Present as a narrative or bullet points.]</p> <p>Mr. Doe lives downtown in an apartment complex. He likes the area since he can walk to most places easily, but he reports that the police are often there and that many of his neighbors use drugs. Although he'd like to move, he wants to do so on his own terms. Right now, he's in jeopardy of being evicted.</p>			
<p>Recommended Conditions:</p> <p><input type="checkbox"/> No conditions related to need</p> <p><input checked="" type="checkbox"/> Refer to a housing program</p> <p><input type="checkbox"/> Attend programs at the designated Department of Corrections facility that address this need</p>			
<b>Substance Use<sup>v</sup></b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>Comments:</p> <p>[List strengths, concerns, and barriers. Present as a narrative or bullet points.]</p> <p>Mr. Doe has been drinking since the age of 14. His current and prior offenses both include alcohol. He successfully completed an outpatient treatment program as a condition of his DUI sentence. He has been fired in the past for drinking on the job. He indicates that he has also used meth several times over the last year to "help him stay awake" for work. He does not feel that he has a drug or alcohol problem.</p>			
<p>Recommended Conditions:</p> <p><input type="checkbox"/> No conditions related to need</p> <p><input checked="" type="checkbox"/> Undergo a drug and alcohol evaluation and comply with recommended treatment</p> <p><input checked="" type="checkbox"/> Drug and alcohol testing as determined by the probation agency</p> <p><input type="checkbox"/> Attend programs at the designated Department of Corrections facility that address this need</p>			
<b>Peer Associates<sup>vi</sup></b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>Comments:</p> <p>[List strengths, concerns, and barriers. Present as a narrative or bullet points.]</p> <p>Mr. Doe reports that most of his friends regularly drink and that 75% of his friends have a criminal record involving alcohol, drugs, and fighting.</p>			

Domain	Does Not Contribute to Overall Risk	Potential Concern to Overall Risk	Significantly Contributes to Overall Risk
Recommended Conditions:			
<input checked="" type="checkbox"/> No conditions related to need <input type="checkbox"/> [Add conditions available in the agency] <input type="checkbox"/> Attend programs at the designated Department of Corrections facility that address this need			
<b>Criminal Attitudes/Behavioral Patterns<sup>vii</sup></b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments:			
<p>[List strengths, concerns, and barriers. Present as a narrative or bullet points.]</p> <p>Mr. Doe admits to the offense but does not appear to be remorseful. He states that Mr. Adams and Ms. Simon “should not have been talking” and that Mr. Adams “should have known better.” He adds that Mr. Adams “got what he deserved.”</p> <p>Mr. Doe reports that he is often impulsive and that it sometimes gets him into trouble.</p>			
Recommended Conditions:			
<input type="checkbox"/> No conditions related to need <input checked="" type="checkbox"/> Successfully complete the Thinking for a Change program <input type="checkbox"/> Attend programs at the designated Department of Corrections facility that address this need			

**Additional Conditions**  
 [Add conditions that would assist in reentry or address stabilization factors or barriers that might impede the person’s likelihood of success.]

In addition to the conditions indicated above, it is recommended that Mr. Doe:

- Have no contact with Mr. Adams
- Pay a supervision fee of \$4/month
- Pay the cost of prosecution

## Notes

- i. A score of “moderate” or “high” in **criminal history** reflects, for example, serious convictions prior to the age of 18, number of felony convictions, number of sentences resulting in community supervision or incarceration, and technical violations of supervision and misconducts while incarcerated.
- ii. A score of “moderate” or “high” in **education/employment/financial situation** reflects, for example, a lack of employment history, a record of poor performance on the job or at school, a poor work ethic/commitment to work or school, relationship conflicts at work or school, resistance to authority, and a challenging financial situation. The Court may want to address this domain through special conditions that help a person improve their commitment to work/school ideals and achievement.
- iii. A score of “moderate” or “high” in **family/social support** reflects, for example, constant fighting at home, a lack of warmth/caring in the home, disregard for prosocial success, and attitudes and behaviors that support law violations. The Court may want to address this domain through special conditions that help a person build skills to reduce or better manage stress and conflict in the home.
- iv. A score of “moderate” or “high” in **neighborhood problems** indicates a neighborhood with a high rate of illegal behavior and easily accessible drugs, which could lead to increased opportunities to engage in illegal behavior.
- v. A score of “moderate” or “high” in **substance use** reflects, for example, the use of illegal substances, which could lead to increased contact with people who have harmful attitudes and beliefs, difficulty succeeding in educational and employment settings, and harmful behavior that a person might not engage in if they were not using substances. The Court may want to address this domain through special conditions that help a person address their substance use and the influences that lead them to misuse drugs and alcohol.
- vi. A score of “moderate” or “high” in **peer associations** reflects, for example, associations with people who encourage and reward illegal behavior. The Court may want to address this domain through special conditions that help a person recognize and resist negative peer influences and form meaningful relationships with people who support their positive goals.
- vii. A score of “moderate” or “high” in **criminal attitudes/behavioral patterns** reflects, for example, thoughts, values, and attitudes supportive of harmful/illegal behavior (e.g., rationalizing/not taking responsibility for behavior, minimizing actions, blaming others, acting entitled, and attempting to exert power and control over others). The Court may want to address this domain through special conditions that help a person understand their thinking patterns, feelings, beliefs, and values; recognize the connection between these and their actions; and develop new ways of thinking.