

JUVENILE DELINQUENCY ASSESSMENT / REPORT TO THE COURT

Name - Juvenile		Current Court Case Number	County
Date of Assessment	<input type="checkbox"/> Initial Assessment <input type="checkbox"/> Subsequent / Ongoing Assessment		Name - Social Worker
Name - Judge			Branch
Name - District Attorney		Name - State Public Defender / Attorney	
Law Violation - Specify.			

I. JUVENILE INFORMATION

Name - Juvenile (Last, First, Middle)		Birthdate (mm/dd/yyyy)
Gender <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Ethnicity	
Primary Language - Juvenile		Interpreter Needed <input type="checkbox"/> Yes <input type="checkbox"/> No
Juvenile Lives With		Relationship
Address (Street, City, State, Zip Code)		Telephone Number -
Juvenile Attends School <input type="checkbox"/> Yes <input type="checkbox"/> No	Name - School	Grade
Number of Classes Taken <input type="checkbox"/> Regular <input type="checkbox"/> Special Ed <input type="checkbox"/> Both	School Day <input type="checkbox"/> Full day <input type="checkbox"/> Partial day	
Attendance - Describe.		
School behavior - Describe.		
Name - School Contact Person		Title Telephone Number ()
Juvenile Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Name - Employer	
Employment Dates (From / To)	Telephone Number - Work	

II. FAMILY INFORMATION

<input type="checkbox"/> Yes <input type="checkbox"/> No	Has family received CPS ongoing services in past?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is family currently receiving CPS ongoing services?
Name - Social Worker if CPS case is open	

A. Mother Information

Name - Mother (Last, First, Middle)		Birthdate (mm/dd/yyyy)
Home Address (Street, City, State, Zip Code)		Telephone Number - Home

Primary Language		Interpreter Needed <input type="checkbox"/> Yes <input type="checkbox"/> No	
Education			
Mother Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Name - Employer		
Work Hours		Telephone Number - Work	
Name - Current Spouse / Partner			

Father Information

Name - Father (Last, First, Middle)		Date (dd/yyyy)	
Home Address (Street, City, State, Zip Code)			Telephone Number -
Primary Language		Interpreter Needed <input type="checkbox"/> Yes <input type="checkbox"/> No	
Education			
Mother Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Name - Employer		
Work Hours		Telephone Number - Work	
Name - Current Spouse / Partner			

Siblings

Name	Birthdate	School	Placement if not living with parents

D. Others Living in Household

Significant Extended Family

Provide names, relationships, living situations and conditions

Mother's family resides in:

Father's family resides in:

F. Family Insurance Information

III. PAST AND PRESENT JUVENILE / FAMILY ISSUES

Juvenile / family members - AODA issues / treatment - Specify.

Drug(s) of choice if AODA issues identified - Specify.

Juvenile / family members - mental health issues / treatment - Specify.

Juvenile / family members - other issues / treatment - Specify.

Juvenile / family members - CPS agency / court history - Specify.

Delinquency history of siblings - Specify.

Juvenile's Legal History

Date of Offense	Offense	Disposition	Law Enf. / Ct. Case No.	Supervision End Date

Juvenile's Placement History

Start Date	End Date	Placement

Significant family history - Specify.

Juvenile / family considerations - Specify.

Primarily Native American heritage

IV. OTHER

A. Current law violations / offenses(s) - Specify charges.

B. Victim Impact Statement (if submitted by victim):

C. Juvenile's explanation of involvement - Specify.

- Yes No Juvenile accepts responsibility.
- Incident was premeditated or spontaneous - Specify.
- Juvenile's plan as to future offenses non-involvement - Specify.

D. Parent's reaction to juvenile's law violation - Specify.

- Yes No Parent / Caretaker helped juvenile accept responsibility.
- Yes No Parent / Caretaker helped juvenile understand victim impact.
- Yes No Parent / Caretaker imposed consequences.
- Parent / Caretaker's plan as to future offenses non-involvement by juvenile - Specify.

E. Significant information not presented elsewhere - Specify.

V. PROTECTION STRENGTHS / NEEDS ASSESSMENT

Rate each question from 1 - 5 (5 = strength; 1 = need; 3 = unexceptional). Check the box under the appropriate number in the column on the right. Legend: S = Strength; U = Unexceptional; N = Need

	S	U	N		
Parent / Caretaker defined below is: <input type="checkbox"/> Parent <input type="checkbox"/> Substitute care provider <input type="checkbox"/> Relative	5	4	3	2	1
1. Parent / caretaker is aware of juvenile's friends, activities, and whereabouts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Parent / caretaker sets rules, monitors compliance and enforces consequences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- | | | | | | | |
|----|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 3. | Parent / caretaker promotes, models non-criminal behavior. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. | Parent / caretaker demonstrates cooperative behavior towards authority figures. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. | Parent / caretaker supports community consequences for juvenile's behaviors. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. | Parent / caretaker / family members have positive role models and / or support systems. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Juvenile		S	U	N		
		5	4	3	2	1
7.	Juvenile complies with caretaker's rules and consequences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Juvenile accepts responsibility for choices, actions, consequences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Juvenile demonstrates cooperative behavior towards authority figures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Juvenile has acceptable self-control and decision making skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Competency Strengths / Needs Assessment		S	U	N		
		5	4	3	2	1
11.	Parent / caretaker is a positive role model with respect to significant relationships.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Parent / caretaker acts responsibly as to use of alcohol and other drugs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Parent / caretaker uses acceptable discipline techniques.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Parent / caretaker communicates effectively with juvenile.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Parent / caretaker engages the juvenile in positive family and community activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Parent / caretaker promotes juvenile's school success.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Juvenile		S	U	N		
		5	4	3	2	1
17.	Juvenile achieves within educational abilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Juvenile has interest / abilities in one or more academic / vocational areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Juvenile has long-term educational or vocational goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Juvenile is involved in constructive community / school activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	Juvenile demonstrates age appropriate daily living skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Juvenile demonstrates age appropriate peer social skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Juvenile demonstrates non-problematic sexual behavior.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Juvenile demonstrates ability to learn from mistakes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25.	Juvenile resolves conflicts in effective and non-violent fashions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Accountability Strengths / Needs Assessment		S	U	N		
		5	4	3	2	1
26.	Juvenile has awareness of impact of his / her behavior upon victim.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>








27. Juvenile has remorse towards victim.

28. Juvenile willing to make amends to victim.



VI. WISCONSIN DELINQUENCY RISK ASSESSMENT

SCORE

1.	Age at first referral to juvenile court intake		
	Under 15	2	
	15 or over	0	_____
2.	Prior referrals to juvenile court intake		
	None	-1	
	One or two	0	
	Three or more	2	_____
3.	Prior assaults (includes but is not limited to use of a weapon)		
	Yes	2	
	No	0	_____
4.	Prior out-of-home placements		
	None or one	0	
	Two or more	1	_____
5.	Prior runaways (from home or placement)		
	None or one	0	
	Two or more	2	_____
6.	School behavior problems (includes truancy)		
	None	-1	
	Minor problems	0	
	Serious problems or habitual truancy noted	2	_____
7.	History of physical or sexual abuse, or neglect as a victim		
	Yes	1	
	No	0	_____
8.	History of alcohol or other drug abuse		
	Yes	1	
	No	0	_____
9.	History of serious emotional problems		
	Yes	1	
	No	0	_____
10.	Peer relationships		
	Good support and influence	-1	
	Negative influence	1	
	Strong negative influence	2	_____

TOTAL RISK SCORE



-3 to +1 **Low Risk** 2 to 4 **Medium Risk** 5 to 8 **High Risk** 9 or above **Very High Risk**



VII. JUVENILE DELINQUENCY SERVICE - PLACEMENT GUIDE

RISK LEVEL:

OFFENSE LEVEL:

Severity of Current Offense	Risk Level			
	Low	Medium	High	Very High
CATEGORY I	LEVEL 1	LEVEL 1	LEVEL 2	LEVEL 2
CATEGORY II	LEVEL 1	LEVEL 2	LEVEL 2	LEVEL 2*
CATEGORY III	LEVEL 2	LEVEL 2*	LEVEL 3*	LEVEL 3*
CATEGORY IV	LEVEL 3*	LEVEL 3*	LEVEL 4	LEVEL 4

* = The service placement levels represented in these cells may be adjusted, with the supervisor's consent, using the service placement adjustment process.



SERVICE PLACEMENT LEVEL:

SERVICE PLACEMENT ADJUSTMENT:

Social workers must perform the service placement adjustment process if adjustment is necessary. Social worker supervisor sign off is required.

FINAL SERVICE PLACEMENT LEVEL:



VIII. SERVICE PLACEMENT ADJUSTMENT

Factors to Decrease Placement Level	Factors to Increase Placement Level
<p><u>Service Related Issues</u> Supportive family situation History of successful interventions Child's service needs are exceptional</p> <p><u>Offense Related Issues</u> Child played minor role in offense Offense committed under duress, coercion Victim(s) provoked offense by their conduct Offense unique (not likely to be repeated)</p> <p><u>Circumstantial Issues</u> Child actively participating in appropriate services Child's living situation has significantly changed in a positive direction</p>	<p><u>Service Related Issues</u> Non-supportive family situation History of failed interventions Child's service needs are exceptional Services not available</p> <p><u>Offense Related Issues</u> Child played lead role in offense Child demonstrated vicious, heinous behavior Dangerous weapons involved Multiple victims Witnesses threatened</p> <p><u>Circumstantial Issues</u> Escalating delinquent behavior Child not participating or refusing to participate in appropriate services</p>
Level 1	Level 2
Deferred prosecution / informal disposition Consent decree County supervision (6 months or less) First offender programs Out-patient individual / family counseling (including AODA) Restitution, community service work Educational support programs Employment / training programs Consider for PASS Retail theft group Challenge Academy (for 16.8 + year olds) Aggression counseling / anger management Weekend Report Center	Any services from Level 1, plus the following: County supervision (6 -12 months) Community supervision programs (Low to moderate supervision) In-home therapy services Foster home placements Group home placements Day treatment programs Sex offender services
Level 3	Level 4
Any services from Levels 1 and 2 plus the following: CCF case management service (Moderate intensive) (CAP, NIP, RTSC) Intensive Supervision Program (ISP) RCC placement SPRITE	Any services from Levels 1, 2 or 3 plus the following: Serious Juvenile Offender Program Corrections placement

Any services at or below the final service level may be utilized as appropriate for implementation of the case plan for individual juveniles and their family.

IX. ASSESSMENT CONCLUSIONS


1. Notable risks, juvenile / family strengths, juvenile / family needs as follow:

2. This juvenile's risk assessment level is: Level

3. This juvenile's service placement level is: Level

4. Education plan:
 will attend school at .

5. Identified competencies / interests of juvenile that will be built upon during period of supervision - Specify.

6. mmended case plan to promote community protection, competence and accountability - Describe.



X. DISPOSITION RECOMMENDATIONS

The following disposition employs those means necessary to most effectively promote protection of the public, hold the child accountable for their actions, and implement competency development as a means of reducing risk of future law violations.

Consent Decree

The Court enters into a Consent Decree with _____ and places _____ under the supervision of _____ County Department of Human Services for a period of _____ with the following condition:

Delinquency Finding

A. The Court finds _____ to be delinquent, places _____ under the supervision of _____ County Department of Human Services for a period of _____ with placement to be in _____ and with the following conditions:

1. All parties shall be available to and cooperative with the Department social worker, including signing consent for release of information forms.

2. The recommended rules of supervision for _____ are as follows:

Community Protection

- a. Obey the reasonable rules of the parents, school and social worker.
- b. Have no contact with the victim(s) co-defendant(s).
- c. Commit no further law violation.
- d. Neither use or possess any alcohol or illegal drugs.
- e. Cooperate with UAs as requested by the parent or social worker.
- f. Engage in no acts or threats of violence.
- g. Advise the social worker immediately of any police contacts.
- h. Participate in and successfully complete NIP / CAP community supervision and the Home Detention Program as a bridge to NIP / CAP supervision.
- i. Successfully complete the NIP Weekend Report Center as required by the social worker.

Competency Development

- j. Attend school regularly with no unexcused absences.
- k. Successfully complete counseling to address issues of anger management as recommended by the social worker.
- l. Successfully complete family therapy as requested by the social worker.
- m. Complete an AODA evaluation.
- n. Successfully complete AODA treatment as recommended by the social worker or as recommended by an AODA evaluation.
- o. Successfully complete any additional services as recommended by the _____ County Department of Human Services social worker subject to review by the Court at the request of any party.

Accountability

- p. Participate in Victim Offender Conferencing if requested by the victim or
- q. Pay restitution in the amount of \$ _____, and cooperate with the expectations of the Youth Restitution Program, including attendance at the Youth Restitution Program orientation.
- r. Perform _____ hours of community service, and cooperate with the expectations of the Youth Restitution Program, including attendance at the Youth Restitution Program orientation.

3. The parents shall comply with the following conditions:

- a. Participate in services as requested by the social worker or service providers.
- b. Advise the social worker immediately of any changes in residence or telephone number.
- c. Cooperate with the Collections Unit of the _____ County Department of Human Services making payment of fees assessed for service.

4. _____ child is in an out of home placement, _____ and his / her parents shall comply with the following conditions for return:

- a. _____ demonstrate the ability to follow the general rules and expectations in his / her living environment and school.

- b. _____ will have successful home visits where he / she can consistently follow the rules and expectations of his / her parent(s) and any other adults in the household.
- c. _____ will maintain regular contact with _____ by phone and visits and will participate in his / her treatment as requested.
- d. Other: _____

B. The Court requires _____ to provide a DNA sample and complete sex offender registration.

C. The Court advises _____ of the possible sanctions that may be imposed if _____ were to violate the conditions of supervision.

D. The Court make the findings necessary to support the disposition plan as ordered by the Court.

Respectfully submitted _____ Date: _____

COUNTY DEPARTMENT OF HUMAN SERVICES



XI. RECOMMENDED COURT FINDINGS (OUT OF HOME PLACEMENT)

- 1. That the court find that the department has made reasonable efforts, including _____, to prevent the removal of _____ from the home, while assuring that the child's health and safety are the paramount concerns and that the department has made reasonable efforts to make it possible for _____ to return safely to home. **938.355(2)(b)6** and **938.38(5)(c)7**.
- 2. Reasonable efforts to prevent removal of _____ were not required because _____. **938.355(2d)**
- 3. That the court find that continued placement of _____ in _____ home would be contrary to the health, safety and welfare of the child **938.355(2)(b)** because _____.
- 4. That the department has made reasonable efforts to achieve the permanency plan which include _____. **938.355(2)(b)6**.
- 5. That the court find that the permanency plan is _____.
- 6. That the court finds that the date by which it is likely that the permanency plan can be accomplished is _____. **938.38(5)(c)5**.
- 7. That the department is making reasonable effort to place _____ child for adoption, with a guardian or in some other alternative permanent placement. **938.355**
- 8. That the court find that there is a continuing necessity for placement and that the current placement is safe and appropriate. **938.38(5)(c)1**.
- 9. That the court make a finding regarding the compliance with the permanency plan by the department, other service providers, the parents, the guardian, and the child. **938.38(5)(c)2**.
- 10. That the court find that the department has involved appropriate services in addition to agency staff in planning to meet the special needs of _____ and the parents. **938.38(5)(c)3**.
- 11. That the court finds that _____ progress has been made toward eliminating the need for placement and toward returning _____ safely to the parental home or obtaining a permanent placement for _____. **938.38(5)(c)4**.
- 12. The child has been placed outside of the parental home for _____ months of the last 22 months. **938.417(1)(a)**
- 13. IF THE CHILD HAS BEEN PLACED OUTSIDE THE HOME FOR 15 OF 22 MONTHS: That the court find the current permanency plan is appropriate and that the circumstances which prevent the child from being in a permanent placement are _____. **938.38(5)(c)6**.
- 14. That the court finds that _____ termination of parental rights is not in the child's best interest. **938.417(2)(b)**

XII. SUMMARY OF CASE DISPOSITION

Disposition of this case is as follows:

Date of Disposition:

Amount of Restitution: \$

Number of Community Service Hours:

Date required to complete Restitution / Community Service:

Names of other offenders involved:

XIII. SIGNATURES



SIGNATURE Social Worker

Date Signed

Office:

Telephone Number:

Email address:



SIGNATURE - Supervisor

Date Signed

