WOMEN'S RISK/NEEDS ASSESSMENT PRE-RELEASE SCORING FORM

Version 6: 2012

DIRECTIONS:

This form is used to compute final risk/needs levels, and to provide a summary of needs. Carry scores over from totals computed on the interview and self-report assessment form. Note that in some cases, e.g. self-efficacy, it is necessary to collapse the score into smaller increments. Please follow the indicated directions for doing so.

PART I: Risk/Needs Assessment:

The factors scored in this section were observed to be correlated with client recidivism and appropriate for inclusion into the risk scale. Summing the scores for each of the factors listed below, provides not only an indication of the magnitude of each need (for treatment purposes), but a total score which then determines level of risk/supervision (low, medium, and high risk). WARNING: Cut-off scores (Part III) are specific to the NIC/UC research sites and should be recalibrated after a short pilot study for each agency using the assessment.

SCALE	RANGE	SCORE	COMMENTS
Criminal History	(0-15)		This scale is a static scale and has no treatment recommendations associated with it.
Employment/ Financial	(0-10)		This scale goes beyond employment alone to problems associated with poverty, e.g., homelessness, inability to pay bills, etc. Treatment may involve job skills training, particularly that which offers employment certifications. Other options include finance management training and job interview skills training.
Housing Safety	(0-6)		Treatment matches would be to safe and affordable housing, restraining orders, and safety in relationships.
Antisocial Friends	(0-6)		Individuals scoring higher on this scale may benefit from cognitive-behavioral programs which seek to change antisocial thinking patterns or programs which assist the individual in severing ties to antisocial peers and developing friendships with pro-social peers through conventional activities.
Anger/Hostility	(0-7)		Treatment should involve cognitive-behavioral based anger management classes.
Depression/Anxiety Symptoms 0 = 0 1-4 = 1 5 = 2	(0-2)		High scores warrant an evaluation by a mental health professional. Even a score of one may indicate a serious mental health problem. Note: The item is only a screen; it is not intended to serve as a substitute for an evaluation by a mental health professional.

SCALE	RANGE	SCORE	COMMENTS
Psychotic Symptoms	(0-2)		High scores warrant an evaluation by a mental health professional. Even a score of one may indicate a serious mental health problem. Note: The item is only a screen; it is not intended to serve as a substitute for an evaluation by a mental health professional.
Child Abuse	(0-2)		Treatment should involve taking necessary precautions for the woman's safety. Traumainformed strategies are also recommended. Programming should be available but not required.
Adult Abuse	(0-2)		Treatment should involve taking necessary precautions for the woman's safety. Traumainformed strategies are also recommended. Programming should be available but not required.
Sexual Abuse	(0-2)		Treatment should involve taking necessary precautions for the woman's safety. Traumainformed strategies are also recommended. Programming should be available but not required.
Substance Abuse Current	(0-6)		Treatment matches may include residential or outpatient substance abuse treatment services. It is recommended that treatment programs focus on cognitive-behavioral strategies and include a structured after-care component.
Relationship Dysfunction (survey)	(0-7)		This scale identifies women who are likely to lose a sense of self-determination in relationships and seek to please intimate partners in ways that prove to be self-destructive. Treatment programs designed to foster health relationships are recommended.
Parental Stress (survey) 0-12 = 0 13-20 = 1 21+ = 2	(0-2)		This scale identifies women who feel overwhelmed by their parenting responsibilities and likely report some sense of desperation. Treatment matches would include parenting skills classes, development of support networks, and financial assistance (as needed).
Total	(0-69)		

PART II: Strengths

The factors scored in this section identify client strengths that have been found to mediate or reduce the effects of other risk factors (Part I) on recidivism. Scores must be transferred from the interview and the self-report form and then summed. In all cases, the higher score indicates a strength.

SCALE	RANGE	SCORE	COMMENTS
Family Support 0-2 = 0 3-4 = 1 5 = 2	(0-2)		Support from members of the <i>family of origin</i> (parents and siblings) is strongly associated with prison success upon release. Programming for family reunification, where possible, is recommended.
Self-Efficacy (survey) 0-23 = 0 24 += 1	(0-1)		Women with high scores on self-efficacy are more likely to be successful upon release than those with lower scores. Treatment recommendations would involve programs designed to increase self-efficacy.
Total	(0-3)		

PART III: Determining Risk Scores and Levels

 Total Risk Scale (Part I)
 Total Strength Scale (Part II)
 ΓΟΤΑL SCORE: Subtract Part II Score from Part I Score

LEVELS:

Cut off scores (below) are based upon those for the NIC/UC research sites. They must be determined for each site, ideally after a pilot study allowing at least 12 months of follow-up.

Circle: 0-11 = Low Risk 12-22 = Moderate Risk 23-38 = Medium Risk39+= High Risk