

**Intake Decision Tool (IDT)**  
**MCASP Intake Risk Assessment (Revised)**

Caseworker: \_\_\_\_\_

Date: \_\_\_\_\_

Youth Name: \_\_\_\_\_ PID: \_\_\_\_\_

Folder #: \_\_\_\_\_

IDT Item	Responses/Scoring
<b>Part I. Delinquency History (Auto-populated)</b>	
<b>1. Age at first offense:</b> The age at the time of the offense for which the youth was referred to DJS for the first time on a misdemeanor or felony.	<input type="radio"/> 17 and over (0 pts) <input type="radio"/> 16 and under (3 pts)
<b>2. Misdemeanor referrals:</b> Total number of referrals in which the most serious offense was a misdemeanor.	<input type="radio"/> One or fewer (0 pts) <input type="radio"/> Two (1 pt) <input type="radio"/> Three or more (2 pts)
<b>3. Felony referrals:</b> Total number of referrals in which the most serious offense was a felony.	<input type="radio"/> None (0 pts) <input type="radio"/> One (1 pt) <input type="radio"/> Two or more (2 pts)
<b>4. Firearms referrals*:</b> Total number of referrals for the possession or use of a firearm.	<input type="radio"/> None <input type="radio"/> One or more
<b>5. Person-to-person misdemeanor referrals*:</b> Total number of referrals in which the most serious offense was a person-to-person misdemeanor.	<input type="radio"/> None <input type="radio"/> One <input type="radio"/> Two or more
<b>6. Person-to-person felony referrals*:</b> Total number of referrals in which the most serious offense was a person-to-person felony.	<input type="radio"/> None <input type="radio"/> One or two <input type="radio"/> Three or more
<b>7. Detention:</b> Number of times a youth served at least one day confined in detention under a detention order.	<input type="radio"/> None (0 pts) <input type="radio"/> One or more (1 pt)
<b>8. Placement*:</b> Number of times a youth served at least one day in placement under commitment to DJS (including pending placement in a detention facility).	<input type="radio"/> None <input type="radio"/> One <input type="radio"/> Two or more
<b>9. Escapes:</b> Total number of referrals for escape.	<input type="radio"/> None (0 pts) <input type="radio"/> One or more (5 pts)
<b>10. Failure to appear in court warrants*:</b> Total number of failures-to-appear in court that resulted in a warrant being issued. Exclude failure-to-appear warrants for non-delinquent matters.	<input type="radio"/> None <input type="radio"/> One <input type="radio"/> Two or more

IDT Item	Responses/Scoring
<b>Part II. Social History</b>	
<b>School/Education</b>	
<p><b>1. Youth's <u>current</u> school enrollment status, regardless of attendance.*</b>            If the youth is in home school as a result of being expelled or dropping out, check <i>Expelled</i> or <i>Dropped out</i>; otherwise check <i>Enrolled full-time</i> or <i>Enrolled part-time</i>.</p>	<ul style="list-style-type: none"> <li><input type="radio"/> Graduated/ GED</li> <li><input type="radio"/> Enrolled full-time</li> <li><input type="radio"/> Enrolled part-time</li> <li><input type="radio"/> Suspended</li> <li><input type="radio"/> Dropped out</li> <li><input type="radio"/> Expelled</li> <li><input type="radio"/> Unknown</li> </ul>
<p><b>2. Youth's attendance in the most recent school term.*</b>  <i>Partial-day absence</i> means missing less than half the school day.  <i>Full-day absence</i> means missing all or most of the school day.</p>	<ul style="list-style-type: none"> <li><input type="radio"/> Not applicable (includes home schooled)</li> <li><input type="radio"/> Good attendance; few excused absences</li> <li><input type="radio"/> No unexcused absences</li> <li><input type="radio"/> Some partial-day unexcused absences</li> <li><input type="radio"/> Some full-day unexcused absences</li> <li><input type="radio"/> Chronic full-day unexcused absences or youth is currently dropped out</li> <li><input type="radio"/> Unknown</li> </ul>
<p><b>3. Youth's academic performance in the most recent school term.</b></p>	<ul style="list-style-type: none"> <li><input type="radio"/> Not applicable (0 pts)</li> <li><input type="radio"/> Above 3.5 (mostly As) (0 pts)</li> <li><input type="radio"/> Above 3.0 (mostly As and Bs) (0 pts)</li> <li><input type="radio"/> 2.0 to 3.0 (mostly Bs and Cs, no Es/Fs) (1 pt)</li> <li><input type="radio"/> to 2.0 (mostly Cs and Ds, some Es/Fs) (1 pt)</li> <li><input type="radio"/> Below 1.0 (some Ds, mostly Es/Fs) (2 pts)</li> <li><input type="radio"/> Unknown (not scored)</li> </ul>
<p><b>4. Youth is/was a special education student or has had a formal diagnosis of a special education need (in any grade).*</b>            Check all that apply.            If the specific type of special education need is not known, check <i>Other/ Unspecified</i>.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> No special education need</li> <li><input type="checkbox"/> Learning</li> <li><input type="checkbox"/> Intellectual disability</li> <li><input type="checkbox"/> Behavioral</li> <li><input type="checkbox"/> ADHD/ADD</li> <li><input type="checkbox"/> Other/unspecified</li> <li><input type="checkbox"/> Unknown</li> </ul>
<p><b>5. Youth's school conduct, most recent school term.*</b>            Check all that apply.  <i>Conduct problems</i> include things like fighting or threatening students/ teachers; overly disruptive behavior; drug/alcohol use; delinquent acts (e.g., theft, vandalism); lying; cheating.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Not applicable (includes home schooled)</li> <li><input type="checkbox"/> Recognition of good school behavior</li> <li><input type="checkbox"/> No school conduct problems</li> <li><input type="checkbox"/> Conduct problems reported by teachers</li> <li><input type="checkbox"/> Disciplinary referrals</li> <li><input type="checkbox"/> In-school suspension(s)</li> <li><input type="checkbox"/> Out-of-school suspension(s)</li> <li><input type="checkbox"/> Unknown</li> </ul>
<b>Use of Free Time</b>	
<p><b>6. Current interest and involvement in <u>structured</u> recreational activities.*</b>            Youth regularly participates in structured, supervised pro-social community-based activity, such as church, community, or cultural group, or an organized music, art, sports, or volunteer activity.</p>	<ul style="list-style-type: none"> <li><input type="radio"/> Involved in 2 or more activities</li> <li><input type="radio"/> Involved in 1 activity</li> <li><input type="radio"/> Interested but not involved</li> <li><input type="radio"/> Not interested in any structured activities</li> <li><input type="radio"/> Unknown</li> </ul>

\*Not Scored

IDT Item	Responses/Scoring
<p><b>7. Current interest and involvement in pro-social <u>un</u>structured recreational activities.*</b> Youth regularly engages in unstructured activities that positively occupy his or her time, such as reading, hobbies, unsupervised sports, etc.</p>	<ul style="list-style-type: none"> <li><input type="radio"/> Involved in 2 or more activities</li> <li><input type="radio"/> Involved in 1 activity</li> <li><input type="radio"/> Interested but not involved</li> <li><input type="radio"/> Not interested in any unstructured activities</li> <li><input type="radio"/> Unknown</li> </ul>
<b>Employment</b>	
<p><b>8. Current interest in employment.*</b></p>	<ul style="list-style-type: none"> <li><input type="radio"/> Currently employed</li> <li><input type="radio"/> Not employed but highly interested in employment</li> <li><input type="radio"/> Not employed but somewhat interested</li> <li><input type="radio"/> Not employed and not interested in employment</li> <li><input type="radio"/> Too young for employment consideration (under 14 years old)</li> <li><input type="radio"/> Unknown</li> </ul>
<b>Relationships in the Community</b>	
<p><b>9. Current positive relationships with adults (other than family).*</b> Adults who provide support and model pro-social behavior (such as a religious or youth leader, coach, neighbor, mentor, facility staff, etc.)</p>	<ul style="list-style-type: none"> <li><input type="radio"/> No positive relationships</li> <li><input type="radio"/> 1 positive relationship</li> <li><input type="radio"/> 2 positive relationships</li> <li><input type="radio"/> 3 or more positive relationships</li> <li><input type="radio"/> Unknown</li> </ul>
<p><b>10. Current friends/ companions with whom youth actually spends time, last 3 months.</b> Check all that apply. <i>Negative friends:</i> Friends who engage in delinquent behavior, belong to gangs, etc.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Positive friends (0pts)</li> <li><input type="checkbox"/> No consistent friends or companions (1 pt)</li> <li><input type="checkbox"/> Negative friends (1 pt)</li> <li><input type="checkbox"/> Gang members/ associates (2 pts)</li> <li><input type="checkbox"/> Unknown (not scored)</li> </ul>
<b>Family</b>	
<p><b>11. Number of out-of-home and shelter care placements lasting more than 30 days (youth's lifetime).*</b> Include both court-ordered placements AND voluntary placements that resulted from CPS investigation of the home. Exclude DJS detentions and commitments.</p>	<ul style="list-style-type: none"> <li><input type="radio"/> No placements ever</li> <li><input type="radio"/> 1 or more placements</li> <li><input type="radio"/> Unknown</li> </ul>
<p><b>12. Number of times youth has either run away or gotten kicked out of home (youth's lifetime).*</b> Include <u>all</u> incidents when the youth did not voluntarily return within 24 hours, even if not reported by or to law enforcement.</p>	<ul style="list-style-type: none"> <li><input type="radio"/> No incidents</li> <li><input type="radio"/> 1 incident</li> <li><input type="radio"/> 2 or more incidents</li> <li><input type="radio"/> Unknown</li> </ul>
<p><b>13. Youth has been living in the physical custody and care of a parent or legal guardian during last 3 months.*</b></p>	<ul style="list-style-type: none"> <li><input type="radio"/> No</li> <li><input type="radio"/> Yes</li> <li><input type="radio"/> Unknown</li> </ul>
<p><b>14. Youth has been living in a stable environment during last 3 months.*</b> <i>Stable environment:</i> The youth lives in a fixed, regular, and adequate environment in which the youth can stay indefinitely, such as a parent/guardian's home or his/ her own apartment. <i>Transient environment:</i> The youth and/or family is living in a homeless shelter, transitional housing, outside, couch surfing, doubled up with other families, etc.</p>	<ul style="list-style-type: none"> <li><input type="radio"/> No, living in a transient environment</li> <li><input type="radio"/> Yes, living in a stable environment</li> <li><input type="radio"/> Unknown</li> </ul>

\*Not Scored

IDT Item	Responses/Scoring
<b>15. Youth's current parenting status.*</b>	<input type="radio"/> Does not have a child <input type="radio"/> Expecting a child <input type="radio"/> Has a child and working to maintain positive relationship <input type="radio"/> Has a child and not working to maintain positive relationship <input type="radio"/> Unknown
<b>16. Youth's current compliance with guardian's/caretaker's rules and authority, last 3 months.</b>	<input type="radio"/> Not applicable (Living without adult supervision last 3 months) (0pts) <input type="radio"/> Youth usually obeys rules (0pts) <input type="radio"/> Youth sometimes obeys rules (1 pt) <input type="radio"/> Youth consistently disobeys, is hostile to parental authority (2 pts) <input type="radio"/> Unknown (not scored)
<b>Alcohol + Drugs</b> First assess whether the youth has used alcohol or drugs in the last 3 months. If there is an indication of recent use, then examine (1) whether drug use contributes or is related in some way to the youth's recent criminal behavior, and (2) whether the current/ recent use is serious enough to disrupt the youth's life, causing problems related to education, family life, social life or health.	
<b>17. Current alcohol use (within last 3 months).</b>	<input type="radio"/> No (0 pts) <input type="radio"/> Yes (1 pt) <input type="radio"/> Unknown (not scored)
<b>18. Current drug use (within last 3 months).</b>	<input type="radio"/> No (0 pts) <input type="radio"/> Yes (1 pt) <input type="radio"/> Unknown (not scored)
<b>19. Alcohol or drug use contributes to current/ recent delinquent behavior.*</b> Substance use either motivates delinquent behavior (e.g., stealing to support a habit) or is related to delinquent behavior in some other way (e.g., substance use is connected with violent, risky or impulse behaviors that get the youth into trouble).	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> Unknown
<b>20. Alcohol or drug use disrupts other areas of youth's life (e.g., school, family peers, health).</b> Substance use creates problems with any of the following: <ul style="list-style-type: none"> <li>• <b>School</b> (e.g., problems with school attendance, conduct, or grades);</li> <li>• <b>Family</b> (e.g., stealing at home to support use, withdrawing, arguing over use);</li> <li>• <b>Peers</b> (e.g., loss of pro-social friends, inability to form prosocial relationships);</li> <li>• <b>Health</b> (e.g., trips to emergency room, medical problems related to use).</li> </ul>	<input type="radio"/> No (0 pts) <input type="radio"/> Yes (1 pt) <input type="radio"/> Unknown (not scored)
<b>21. Current participation in alcohol/drug treatment, last 3 months.*</b>	<input type="radio"/> Not applicable (including treatment not warranted) <input type="radio"/> Not attending needed treatment <input type="radio"/> Attending needed treatment <input type="radio"/> Completed treatment <input type="radio"/> Unknown

\*Not Scored

IDT Item	Responses/Scoring
<b>Mental Health</b>	
<p><b>22. Victim of neglect during lifetime.*</b>            Include any history of suspected neglect, whether or not substantiated, but exclude reports of neglect proven to be false. Neglect includes negligent behavior that endangers the child’s health, welfare and safety, such as failure to provide adequate food, shelter, clothing, healthcare, nurturing or supervision. <u>If allegations of either abuse or neglect are revealed during intake process, follow your agency’s requirements for reporting allegations to the proper authorities.</u></p>	<p> <input type="radio"/> No  <input type="radio"/> Yes  <input type="radio"/> Unknown           </p>
<p><b>23. Victim of physical or sexual abuse during lifetime.*</b>            Check all that apply.            Include any history of suspected abuse, whether or not substantiated, but exclude reports of abuse proven to be false. <u>If allegations of either abuse or neglect are revealed during intake process, follow your agency’s requirements for reporting allegations to the proper authorities.</u></p>	<p> <input type="checkbox"/> No abuse  <input type="checkbox"/> Physical abuse  <input type="checkbox"/> Sexual abuse  <input type="checkbox"/> Unknown           </p>
<p><b>24. Exposure to violence during lifetime.*</b>            Check all that apply.</p>	<p> <input type="checkbox"/> Has not witnessed violence  <input type="checkbox"/> Witnessed violence in the home  <input type="checkbox"/> Witnessed violence in the community  <input type="checkbox"/> Family member or close friend killed as a result of violence  <input type="checkbox"/> Unknown           </p>
<p><b>25. Youth diagnosed with or treated for a mental health problem (ever in lifetime).*</b>            Such as schizophrenia, bi-polar, anxiety, ADD/ADHD, depression, personality, and other diagnosed disorders. <u>Exclude</u> substance abuse and special education needs. Confirm by a professional when possible.</p>	<p> <input type="radio"/> No  <input type="radio"/> Yes  <input type="radio"/> Unknown           </p>
<p><b>26. Mental health treatment currently prescribed.*</b>            Confirm by a professional when possible.</p>	<p> <input type="radio"/> No current mental health problem  <input type="radio"/> No mental health treatment currently prescribed  <input type="radio"/> Attending prescribed treatment  <input type="radio"/> Not attending prescribed treatment  <input type="radio"/> Unknown           </p>
<p><b>27. Mental health medication currently prescribed.*</b>            Confirm by a professional when possible.</p>	<p> <input type="radio"/> No current mental health problem  <input type="radio"/> No mental health medication currently prescribed  <input type="radio"/> Taking prescribed medication  <input type="radio"/> Not taking prescribed medication  <input type="radio"/> Unknown           </p>
<p><b>28. Current health insurance.*</b></p>	<p> <input type="radio"/> No health insurance  <input type="radio"/> Public insurance (Medicaid)  <input type="radio"/> Private insurance  <input type="radio"/> Unknown           </p>

IDT Item	Responses/Scoring
<b>29. Referral initiated follow-up for an assessment/mental health screening.*</b>	<input type="radio"/> I plan to pursue a referral. <i>When completion of a mental health or substance abuse screening is a condition of an informal adjustment agreement, within 15 calendar days DJS must document a discussion as to whether the parent / guardian / custodian made an appointment for the screening and/or whether the Department can be of further assistance in having the screening performed.</i> <input type="radio"/> I do not plan to pursue a referral. <input type="radio"/> My child has already had an assessment or mental health screening and/or is currently in treatment. <input type="radio"/> Place: _____

\*Not Scored

Very Low Risk: 0-2 points | Low Risk: 3-5 points | Moderate Risk: 6-9 points | High: 10+ points

### Intake Case Summary

**Risk for Reoffending**

IDT Risk Score: \_\_\_\_\_ IDT Risk Level: \_\_\_\_\_

**Offense Summary**

Most Serious New Alleged Offense: \_\_\_\_\_ Offense Category: \_\_\_\_\_

### Mitigating & Aggravating Factors

Check all that apply.

Mitigating Factors	Aggravating Factors
<input type="checkbox"/> Youth under 13 years old – refer to services <input type="checkbox"/> First referral to DJS <input type="checkbox"/> More than one year since most recent DJS referral <input type="checkbox"/> Victim preference – diversion <input type="checkbox"/> Victim impact/injury – minimal <input type="checkbox"/> Youth already participating in services <input type="checkbox"/> DJS referring to services <input type="checkbox"/> Response already provided by caregiver <input type="checkbox"/> Response already provided by another system/agency <input type="checkbox"/> Youth already under DJS supervision – AIM response applied <input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Victim preference – court <input type="checkbox"/> Victim impact/injury – more than minimal <input type="checkbox"/> Access to services requires DJS involvement (Pre-court) <input type="checkbox"/> Youth not responsive to prior DJS service referrals <input type="checkbox"/> Two prior failed pre-court cases (Forward for Petition) <input type="checkbox"/> Youth non-compliant with current DJS supervision <input type="checkbox"/> No agreement on restitution <input type="checkbox"/> Pre-Court not agreed to by youth, parent/ guardian, and victim (Forward for Petition) <input type="checkbox"/> Other (specify): _____

### Service Referrals

<b>Service Referrals</b> <i>(auto-populate from MCASP/check all that apply)</i>	<b>Service Needs</b> <i>(Check all planned referrals)</i>
<b>School/Education</b> <input type="checkbox"/> Unmet special education need <input type="checkbox"/> Currently expelled, suspended, or dropped out (IDT) <input type="checkbox"/> Chronic unexcused absences from school (IDT) <input type="checkbox"/> Below average academic performance (IDT)	<input type="checkbox"/> Academic Service <input type="checkbox"/> GED Preparation Program <input type="checkbox"/> Truancy Prevention/Intervention Program <input type="checkbox"/> Other Education Support Service (specify): _____

\*Not Scored

<p><b>Use of Free Time</b></p> <p><input type="checkbox"/> Interested but not involved in structured or unstructured pro-social recreational activities (IDT)</p>	<p><input type="checkbox"/> After School Program</p> <p><input type="checkbox"/> Civic Responsibility Program/Education</p> <p><input type="checkbox"/> Recreational Program</p> <p><input type="checkbox"/> Other Program/Activity (specify):_____</p>
<p><b>Employment</b></p> <p><input type="checkbox"/> Not employed but highly interested in employment (IDT)</p>	<p><input type="checkbox"/> Career + Technology Education Program</p> <p><input type="checkbox"/> Employment Skills Training/Certification Program</p> <p><input type="checkbox"/> Other Employment Support Service (specify):_____</p>
<p><b>Peers/Relationships</b></p> <p><input type="checkbox"/> No positive relationships with adults (IDT)</p> <p><input type="checkbox"/> Associates with negative or gang-involved peers (IDT)</p>	<p><input type="checkbox"/> Mentoring Program</p> <p><input type="checkbox"/> Gang Prevention/Intervention Program</p> <p><input type="checkbox"/> Dating Violence Prevention/Intervention Program</p> <p><input type="checkbox"/> Other Peer/Relationships Program (specify):_____</p>
<p><b>Family</b></p> <p><input type="checkbox"/> Youth is living with parent/legal guardian and transient (IDT)</p> <p><input type="checkbox"/> Disobeys caregiver rules or is hostile to parental authority (IDT)</p> <p><input type="checkbox"/> Abuse/neglect (IDT)</p> <p><input type="checkbox"/> Youth is an expecting or current parent (IDT)</p> <p><input type="checkbox"/> Crossover youth</p>	<p><input type="checkbox"/> DSS/Family Preservation</p> <p><input type="checkbox"/> Family Peer Support</p> <p><input type="checkbox"/> Family Counseling/Therapy</p> <p><input type="checkbox"/> Parenting/Teen Parent Skills Program</p> <p><input type="checkbox"/> Domestic Violence Prevention/Intervention Program</p> <p><input type="checkbox"/> Shelter</p> <p><input type="checkbox"/> Housing Support Service</p> <p><input type="checkbox"/> Other Family Support Service (specify):_____</p>
<p><b>Alcohol + Drug Use</b></p> <p><input type="checkbox"/> Alcohol/drug use contributes to current/recent delinquent behavior (IDT)</p> <p><input type="checkbox"/> Alcohol/drug use disruptive to youth's life (IDT)</p> <p><input type="checkbox"/> Not attending needed treatment (IDT)</p> <p><input type="checkbox"/> Alcohol/drug use (MAYSI)</p>	<p><input type="checkbox"/> Substance Use Assessment/Evaluation</p> <p><input type="checkbox"/> Drug Testing</p> <p><input type="checkbox"/> Substance Use Prevention Education</p> <p><input type="checkbox"/> Other Substance Use Service (specify):_____</p>
<p><b>Mental Health</b></p> <p><input type="checkbox"/> Not taking prescribed mental health medication (IDT)</p> <p><input type="checkbox"/> Not attending prescribed treatment (IDT)</p> <p><input type="checkbox"/> Angry-Irritable (MAYSI)</p> <p><input type="checkbox"/> Depressed-Anxious (MAYSI)</p> <p><input type="checkbox"/> Somatic complaints (MAYSI)</p> <p><input type="checkbox"/> Suicide ideation (MAYSI)</p> <p><input type="checkbox"/> Thought disturbance (MAYSI)</p> <p><input type="checkbox"/> Traumatic Experiences (MAYSI)</p>	<p><input type="checkbox"/> Mental Health Assessment/Evaluation</p> <p><input type="checkbox"/> Crisis Intervention/Stabilization Service</p> <p><input type="checkbox"/> Care Coordination/Wraparound</p> <p><input type="checkbox"/> Anger Management Program</p> <p><input type="checkbox"/> Other Mental Health Service (specify):_____</p>
<p><b>Other – Offense Related</b></p> <p><input type="checkbox"/> Victim-offender remediation</p> <p><input type="checkbox"/> Fire setter</p> <p><input type="checkbox"/> Shoplifter</p> <p><input type="checkbox"/> Sex offender</p> <p><input type="checkbox"/> Other (specify):_____</p>	<p><input type="checkbox"/> Community Conferencing/Mediation</p> <p><input type="checkbox"/> Community Service Program</p> <p><input type="checkbox"/> Conflict Resolution Program</p> <p><input type="checkbox"/> Restitution Program</p> <p><input type="checkbox"/> Victim Awareness Education</p> <p><input type="checkbox"/> Fire Setters Program</p> <p><input type="checkbox"/> Shoplifters Abatement Program</p> <p><input type="checkbox"/> Sex Offender Treatment</p> <p><input type="checkbox"/> Teen Court</p> <p><input type="checkbox"/> Other Offense Related Service (specify):_____</p>

<p><b>Other – Needs Related</b></p> <p><input type="checkbox"/> Youth is not living with parent/legal guardian and transient (IDT)</p> <p><input type="checkbox"/> Human trafficking victim</p> <p><input type="checkbox"/> Multiple systems involvement</p> <p><input type="checkbox"/> Medical/physical health need</p> <p><input type="checkbox"/> Other (specify):</p>	<p><input type="checkbox"/> Case Management</p> <p><input type="checkbox"/> Family Navigation</p> <p><input type="checkbox"/> Human Trafficking Service</p> <p><input type="checkbox"/> Unaccompanied Homeless Youth Services</p> <p><input type="checkbox"/> Local Care Team</p> <p><input type="checkbox"/> Physical Health Service</p> <p><input type="checkbox"/> Urgent Material Support (food, clothing)</p> <p><input type="checkbox"/> Other Needs Related Service (specify):</p>
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**Service Access Considerations**

Consideration <i>(Check all that apply)</i>	Notes
<input type="checkbox"/> Cognitive functioning	
<input type="checkbox"/> Cultural	
<input type="checkbox"/> Language/communication	
<input type="checkbox"/> Education/reading level	
<input type="checkbox"/> Health/medical	
<input type="checkbox"/> Transportation access	
<input type="checkbox"/> Other:	

**Offense-Related Case Processing Factors**

- Felony offense (must be reviewed by SAO)

Service Referral:

- No
- Yes

**Internal Documentation Only**

Risk of Removal (Please check the appropriate box that applies according to the scoring.)

- The above risk assessment is designed to assist this youth in remaining in his/her home. The Case Manager is confirming that the youth has a scoring of moderate to high and is at imminent risk of removal absent these preventative services, placement in foster care is the plan for this youth (a non-secure community based residential program).
- The above risk assessment is designed to assist the youth in remaining in his/her home. The Case Manager is confirming that the youth has a scoring of very low to low and is not at imminent risk of removal from home.