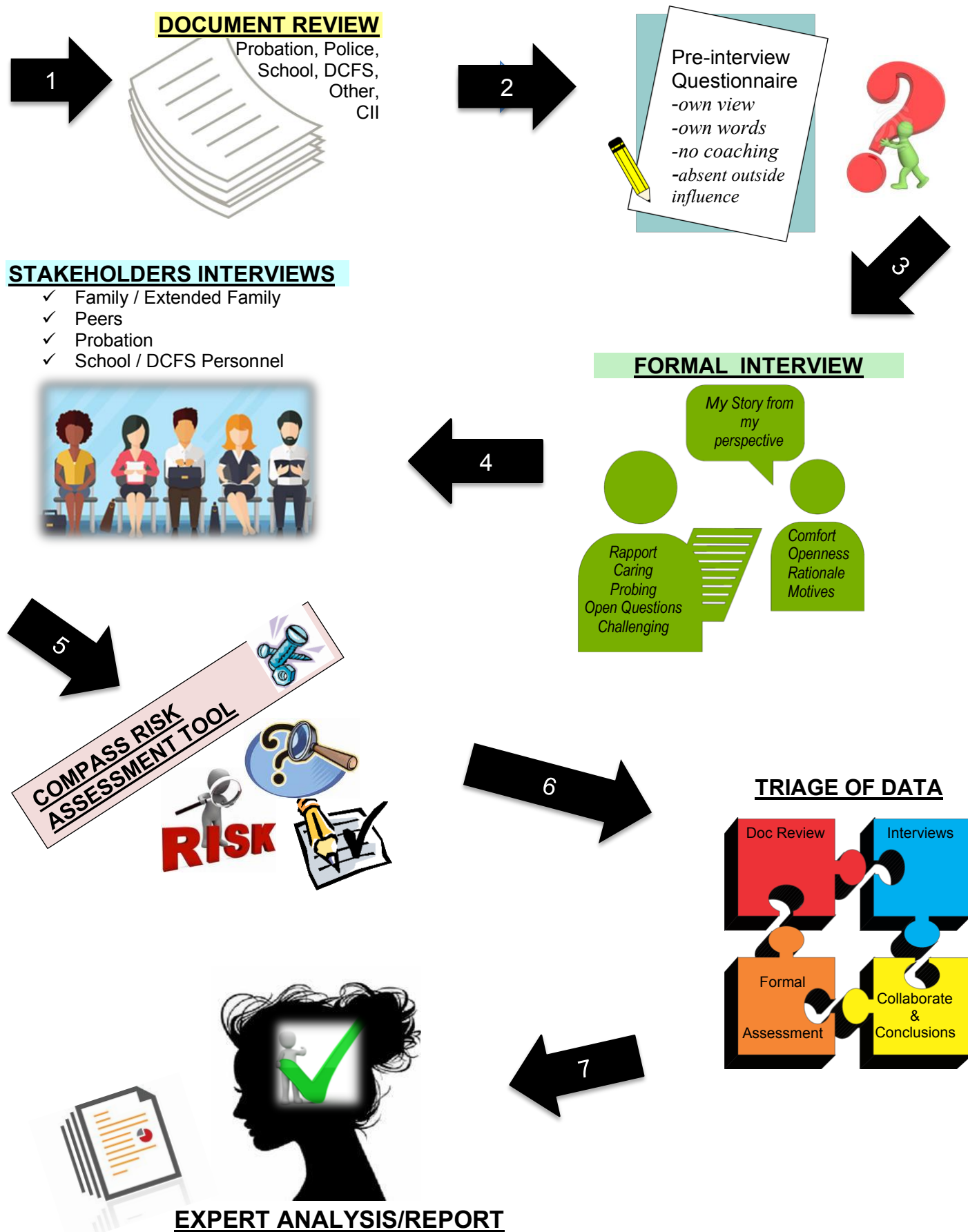


ASSESSMENT PROCESS

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PSYCHOSOCIAL ASSESSMENT

Youth Assess Expert, Inc. ©

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I. Document Review

- a. CII, Probation Report, Police Report, Other Agencies (DCFS, School etc.)
- b. Noting
 - i. Age at 1st offense/arrest/police contact
 - ii. Identifiable Risk Factors & Protective Factors
 - iii. Family (position, healthy/unhealthy members, patterns, mores)
 - iv. Responses to pro-social options, individuals and interventions
 - v. Youth & family drug use/abuse patterns
 - vi. Significant (or repeated) traumas
 - vii. Generates pertinent questions for the interview

II. Interview(s)

- a. Questionnaire – Pre-completed (maybe)
 - i. Customized to the youth, to fill gaps identified in the doc review
 - ii. *Allowing youth to give information in their own words, without coaching, structure or expectation has proven invaluable*
- b. Rapport is everything*
 - i. Comfort – allow them to be themselves and tell their story
 - ii. Validate their space and position (not judging, & not condoning)
 - iii. Care to understand their perspective – this is where you begin to identify the appropriate level of intervention/type of Case Plan
- c. Goals
 - i. Understand their perspective of the world and how they choose to present it
 - 1. Criminal thinking rating/patterns
 - 2. Family position (believer of Erikson's Stages of Development)
 - 3. Risk and Protective Factors
 - ii. Push to honesty/transparency or gain level of understanding of their ability to even be honest (reveals level of self-acceptance)
 - iii. Inventory their motivations, rationalizations, justifications (lends to understanding/identification of mental health needs)
 - iv. Identify original trauma(s) and or triggers
 - v. Identify role of drug use/abuse
- d. Stakeholders
 - i. Family, School, Probation, Friends
 - ii. This verifies/validates – gives 3-D perspective

III. COMPAS Assessment Instrument

- a. Cross-reference & validation for data gathered thus far
- b. Mapping of Risks and Strengths
- c. Provides framework for Treatment Plan recommendation**

IV. Triage of Above 3 Information Sources

- a. Solidify conclusions, backed up with statistical, evidence-based data
- b. Clear Treatment Recommendations applied to real options & resources

V. Other – Melissa’s Expertise

- a. Secondary and significant benefit of the interview is to be able to observe & experience the affect of the client as varied topics are discussed; very insightful (e.g. smug, flat, saddened, grieved, fearful, aggressive)
- b. Broad knowledge of programs/agencies effective in service delivery
- c. Knowledge/experience in implementing changes to juvenile court law/sentencing, and what the orders translate to in terms of real experience for that youth
- d. Knowledge/experience in use of DJJ assessments (STATIC 99, JSORATT II, YSR, DEQ)
- e. Passionate about research (sentencing & treatment outcomes)
- f. Long standing, close personal contacts with which to consult
 - i. DMH – Training Coordinator (MSW)
 - ii. DHS – Regional Administrator
 - iii. DCFS – Regional Administrator
 - iv. LCSW – Cedar Sinai / USC / Private Practice
 - v. LBUSD - varied
 - vi. Probation - varied
 - vii. DJJ - varied
 - viii. DAI - varied
 - ix. DJJ successes (25 years later)

*

“Rapport is everything” people shut down if felt talked at. Conversely, when allowed to “be”, they open up. They crave acceptance and understanding. That is a core need in their developmental stage {Egocentrism and Identity Acceptance}

**

Case Plan Program Built-In; The COMPAS Software links the client’s responses and conclusions with not only ratings of needs and risks, but also with comprehensive treatment plan recommendations.