This assessment asks some questions about your criminal history, education, employment, family and social support, alcohol and drug use, and attitudes about various things in your life to determine whether you are eligible for Cognitive Behavioral Intervention for Justice Involved Individuals Seeking Employment services. Answering these questions is voluntary. We hope you will answer the questions to determine if you are eligible for the available program services. The survey is estimated to take about 15 minutes to complete. Your name will not be included in any written reports and your answers will be kept private to the extent permitted by law.

OHIO RISK ASSESSMENT SYSTEM: COMMUNITY SUPERVISION TOOL (ORAS-CST)

Name: _____   Date of Assessment: _____

Case#: _____   Name of Assessor: _____

1.0 CRIMINAL HISTORY:

1.1 Most Serious Arrest Under Age 18 [ ]
    0=None
    1=Yes, Misdemeanor
    2=Yes, Felony

1.2 Number of Prior Adult Felony Convictions [ ]
    0=None
    1=One or Two
    2=Three or more

1.3 Prior Sentence as Adult to a Jail or Secure Correctional Facility [ ]
    0=No
    1=Yes

1.4 Received Official Misconduct while Incarcerated as Adult [ ]
    0=No
    1=Yes

1.5 Prior Sentence to Probation as an Adult [ ]
    0=No
    1=Yes

1.6 Community Supervision Ever Been Revoked for Technical Violation as Adult [ ]
    0=No
    1=Yes

Total Score in Criminal History: [ ]

2.0 EDUCATION, EMPLOYMENT, AND FINANCIAL SITUATION:

2.1 Highest Education [ ]
    0= High School Graduate or Higher
    1= Less than High School or GED

2.2 Ever Suspended or Expelled From School [ ]
    0=No
    1=Yes

2.3 Employed at the Time of Arrest [ ]
    0= Yes
    1= No

2.4 Currently Employed [ ]
    0=Yes, Full-time, Disabled, or Retired
    1=Not Employed or Employed Part-time

2.5 Better Use of Time [ ]
    0=No, Most Time Structured
    1=Yes, Lots of Free Time

2.6 Current Financial Situation [ ]
    0=Good
    1=Poor

Total Score in Education, Employment, Financial: [ ]

3.0 FAMILY AND SOCIAL SUPPORT

    3.1 Parents have Criminal Record

        0= No

        1=Yes

    3.2 Currently Satisfied with Current Marital or Equivalent Situation

        0=Yes

        1=No

    3.3 Emotional and Personal Support Available from Family or Others

        0=Strong Support

        1=None or Weak Support

    3.4 Level of Satisfaction with Current Level of Support from Family or Others

        0=Very Satisfied

        1=Not Satisfied

    3.5 Stability of Residence

        0=Stable

        1=Not Stable

Total Score on Family and Social Support:

4.0 NEIGHBORHOOD PROBLEMS

    4.1 High Crime Area

        0=No

        1=Yes

    4.2 Drugs Readily Available in Neighborhood

        0=No, Generally Not Available

        1=Yes, Somewhat Available

        2=Yes, Easily Available

Total Score in Neighborhood Problems:

5.0 SUBSTANCE USE

    5.1 Age First Began Regularly Using Alcohol

        0=17 or older

        1=Under Age 17

    5.2 Longest Period of Abstinence from Alcohol

        0=Six months or Longer

        1=Less than Six months

    5.3 Offender Ever Used Illegal Drugs

        0=No

        1=Yes

    5.4 Drug Use Caused Legal Problems

        0=None

        1=One Time

        2=Two or More Times

    5.5 Drug Use Caused Problems with Employment

        0=No

        1=Yes

Total Score for Substance Use:

6.0 PEER ASSOCIATIONS

6.1 Criminal Friends ⬚
- 0=None
- 1=Some
- 2=Majority

6.2 Contact with Criminal Peers ⬚
- 0=No Contact with Criminal Peers
- 1=At Risk of Contacting Criminal Peers
- 2=Contact or Actively Seeks Out Criminal Peers

6.3 Gang Membership ⬚
- 0=No, Never
- 1=Yes, but Not Current
- 2=Yes, Current

6.4 Criminal Activities ⬚
- 0=Strong Identification with Prosocial Activities
- 1=Mixture of Pro- and Antisocial Activities
- 2=Strong Identification with Criminal Activities

Total Score for Peers: ⬚

7.0 CRIMINAL ATTITUDES AND BEHAVIORAL PATTERNS

For the Following Items Please Rate the Offender:

7.1 Criminal Pride ⬚
- 0=No Pride in Criminal Behavior
- 1=Some Pride
- 2=A Lot of Pride

7.2 Expresses Concern about Others' Misfortunes ⬚
- 0=Concerned about Others
- 1=Limited Concern
- 2=No Real Concern for Others

7.3 Feels Lack of Control Over Events ⬚
- 0=Controls Events
- 1=Sometimes Lacks Control
- 2=Generally Lacks Control

7.4 Sees No Problem in Telling Lies ⬚
- 0=No
- 1=Yes

7.5 Engages in Risk Taking Behavior ⬚
- 0=Rarely Takes Risks
- 1=Sometimes Takes Risks
- 2=Generally Takes Risks

7.6 Walks Away from a Fight ⬚
- 0=Yes
- 1=Sometimes
- 2=Rarely

7.7 Believes in "Do Unto Others Before They Do Unto You" ⬚
- 0=Disagree
- 1=Sometimes
- 2=Agrees

Total Score Criminal Attitudes and Behavioral Patterns: ⬚

TOTAL SCORE: ⬚

Risk Categories for MALES			Risk Categories for FEMALES		
Scores	Rating	Percent of Failures	Scores	Rating	Percent of Failures
0-14	Low	9%	0-14	Low	7%
15-23	Moderate	34%	15-21	Moderate	23%
24-33	High	58%	22-28	High	40%
34+	Very High	70%	29+	Very High	50%

Domain Levels

1.0 Criminal History

	Score	Failure
_____	Low (0-3)	27%
	Med (4-6)	46%
	High (7-8)	53%

3.0 Family and Social Support

	Score	Failure
_____	Low (0-1)	32%
	Med (2-3)	41%
	High (4-5)	48%

5.0 Substance Use

	Score	Failure
_____	Low (0-2)	27%
	Med (3-4)	40%
	High (5-6)	45%

7.0 Criminal Attitudes and Behavioral Patterns

	Score	Failure
_____	Low (0-3)	24%
	Med (4-8)	44%
	High (9-13)	59%

2.0 Education, Employment, and Financial Situation

	Score	Failure
_____	Low (0-1)	21%
	Med (4-6)	37%
	High (7-8)	55%

4.0 Neighborhood Problems

	Score	Failure
_____	Low (0)	17%
	Med (1)	35%
	High (2-3)	45%

6.0 Peer Associations

	Score	Failure
_____	Low (0-1)	21%
	Med (2-4)	43%
	High (5-8)	64%

Professional Override:

Reason for Override (note overrides should not be based solely on offense):

Other Areas of Concern. Check all that Apply:

_____Low Intelligence*
_____Physical Handicap
_____Reading and Writing Limitations*
_____Mental Health Issues*
_____No Desire to Change/Participate in Programs*
_____Transportation
_____Child Care
_____Language
_____Ethnicity
_____Cultural Barriers
_____History of Abuse/Neglect
_____Interpersonal Anxiety
_____Other _____

*If these items are checked it is strongly recommended that further assessment be conducted to determine level or severity.