

ORAS Pretrial Assessment Tool (PAT)

The outcome used in the construction of the Pretrial Assessment Tool was either a new arrest or failure-to-appear. Failure-to-appear was included as an outcome because one of the major goals of the pretrial tool was to assist court actors in the decision to release or hold the defendant prior to trial. (Final Report on ORAS 2009)

Criminogenic risks refer to characteristics of offenders that predict poorer outcomes in standard rehabilitation programs. Importantly, in this context the term “risk” does *not* refer to a risk for violence or dangerousness, but rather to a risk of failing to respond to standard interventions, and thus for continuing to engage in the same level of drug abuse and crime as in the past. (Marlowe, Evidence-Based Sentencing, citations omitted, 2009)

FIGURE E OHIO RISK ASSESSMENT SYSTEM— PRETRIAL ASSESSMENT TOOL (ORAS-PAT)

OHIO RISK ASSESSMENT SYSTEM: PRETRIAL ASSESSMENT TOOL (ORAS-PAT)

Name: _____ Date of Assessment: _____

Case#: _____ Name of Assessor: _____

Pretrial Items		Verified
1. Age at First Arrest	<input type="text"/>	<input type="checkbox"/>
0=33 or older		
1=Under 33		
2. Number of Failure-to-Appear Warrants Past 24 Months	<input type="text"/>	<input type="checkbox"/>
0=None		
1=One Warrant for FTA		
2=Two or More FTA Warrants		
3. Three or more Prior Jail Incarcerations	<input type="text"/>	<input type="checkbox"/>
0=No		
1=Yes		
4. Employed at the Time of Arrest	<input type="text"/>	<input type="checkbox"/>
0= Yes, Full-time		
1= Yes, Part-time		
2= Not Employed		
5. Residential Stability	<input type="text"/>	<input type="checkbox"/>
0=Lived at Current Residence Past Six Months		
1=Not Lived at Same Residence		
6. Illegal Drug Use During Past Six Months	<input type="text"/>	<input type="checkbox"/>
0=No		
1=Yes		
7. Severe Drug Use Problem	<input type="text"/>	<input type="checkbox"/>
0=No		
1=Yes		
Total Score: <input type="text"/>		

Scores	Rating	% of Failures	% of Failure to Appear	% of New Arrest
0-2	Low	5%	5%	0%
3-5	Moderate	18%	12%	7%
6+	High	29%	15%	17%

Please State Reason if Professional Override:

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

Other Areas of Concern. Check all that Apply:

<input type="checkbox"/> Low Intelligence*	<input type="checkbox"/> Child Care
<input type="checkbox"/> Physical Handicap	<input type="checkbox"/> Language
<input type="checkbox"/> Reading and Writing Limitations*	<input type="checkbox"/> Ethnicity
<input type="checkbox"/> Mental Health Issues*	<input type="checkbox"/> Cultural Barriers
<input type="checkbox"/> No Desire to Change/Participate in Programs*	<input type="checkbox"/> History of Abuse/Neglect
<input type="checkbox"/> Transportation	<input type="checkbox"/> Interpersonal Anxiety
<input type="checkbox"/> Other _____	

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

Source: Center for Criminal Justice Research, University of Cincinnati School of Criminal Justice, 2010

An Example of Levels of Pretrial Supervision

(From Kentucky Pretrial Services)

An Example From Kentucky Pretrial Services

Levels of Pretrial Supervision

Minimal

- One (1) face to face contact per month
- Court notification
- Compliance Verification

Standard

- Two (2) face to face contacts per month
- One (1) additional phone contact per month
- Court notification
- Compliance Verification

Intensive

- One (1) face to face contact per week
- One (1) additional phone contact per month
- Court notification
- Compliance Verification

Risk Level	Pretrial Supervision Level
Low*	Minimal
Moderate	Standard
High	Intensive

*Although PTS does not recommend supervision for low risk defendants, if the court orders such, minimal supervision will be utilized unless the defendant is moderate or high needs.

Risk Level	Needs	Supervision Level
Low	High	Intensive
Low	Moderate	Standard
Low	Low	Minimal
Moderate	High	Intensive
Moderate	Moderate	Standard
Moderate	Low	Standard
High	High	Intensive
High	Moderate	Intensive
High	Low	Intensive

Substance Abuse Screening Tools – Examples

The following two documents are examples of screening tools that have been recommended by the SATC. They are approved evidence-based screening tools.



CAGE Substance Abuse Screening Tool

Directions: Ask your patients these four questions and use the scoring method described below to determine if substance abuse exists and needs to be addressed.

CAGE Questions

1. Have you ever felt you should cut down on your drinking?
 2. Have people annoyed you by criticizing your drinking?
 3. Have you ever felt bad or guilty about your drinking?
 4. Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover (eye-opener)?
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CAGE Questions Adapted to Include Drug Use (CAGE-AID)

1. Have you ever felt you ought to cut down on your drinking or drug use?
2. Have people annoyed you by criticizing your drinking or drug use?
3. Have you felt bad or guilty about your drinking or drug use?
4. Have you ever had a drink or used drugs first thing in the morning to steady your nerves or to get rid of a hangover (eye-opener)?

Scoring: Item responses on the CAGE questions are scored 0 for "no" and 1 for "yes" answers, with a higher score being an indication of alcohol problems. A total score of two or greater is considered clinically significant.

The normal cutoff for the CAGE is two positive answers, however, the Consensus Panel recommends that the primary care clinicians lower the threshold to one positive answer to cast a wider net and identify more patients who may have substance abuse disorders. A number of other screening tools are available.

CAGE is derived from the four questions of the tool: Cut down, Annoyed, Guilty, and Eye-opener

CAGE Source: Ewing 1984

The UNCOPE Screening Instrument for Substance Abuse

The UNCOPE consists of six questions found in existing instruments and assorted research reports. Variations in wording are noted for several of the items. The more concrete wording of the revised versions were found to be slightly better as a generic screen. Either version of the six questions may be used free of charge for oral administration in any medical, psychosocial, or clinical interview. They provide a simple and quick means of identifying risk for abuse and dependence for alcohol and other drugs.

- U** “In the past year, have you ever drank or **used** drugs more than you meant to?” or, as **revised** “Have you spent more time drinking or using than you intended to?”
- N** “Have you ever **neglected** some of your usual responsibilities because of using alcohol or drugs?”
- C** “Have you felt you wanted or needed to **cut down** on your drinking or drug use in the last year?”
- O** “Has anyone **objected** to your drinking or drug use?” Or, “Has your family, a friend, or anyone else ever told you they **objected** to your alcohol or drug use?”
- P** “Have you ever found yourself **preoccupied** with wanting to use alcohol or drugs?” or, as **revised**, “Have you found yourself thinking a lot about drinking or using?”
- E** “Have you ever used alcohol or drugs to relieve **emotional discomfort**, such as sadness, anger, or boredom?”

A CAUTION REGARDING ALL SCREENS

Screens merely provide an indication of whether or not an individual appears at risk for a given condition. Screens are inappropriate for use as treatment intake tools and insufficient for supporting diagnoses.

For further information on the UNCOPE, contact
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