

Risk/Needs Summary Report

Offender:

Period of Supv: 10/26/2011

Assigned Supervision Level: L4

Risk of Rearrest (from OTI): Low (L3)

Needs Level: Moderate (L3)

Type: Initial Assigned: 01/12/2012

Offender Traits Inventory (OTI)

Case Factor	Pts
1. Conviction (0-10) DWI: 1 Other: 0	1
3. Marital (0, 3, 5) Married/Widowed: 0	0
5. Drug Addiction (0, 5) No history of drug addiction: 0	0
7. Employment Status (0, 4) Employed, passing in school: 0	0
9. Gender OPUS Scored: 7	7
11. Punishment Type OPUS Scored: 0	0

Case Factor	Pts
2. Financial Status (0, 3, 6) No known difficulty: 3	3
4. Attitude (0, 6) Motivated to change, receptive to assistance: 0	0
6. Employment (0, 4) Employed more than 7 of the last 12 months: 0	0
8. High School Dropout High School dropout: 3	3
10. Age OPUS Scored: 4	4
Total OTI Score: 18	

Risk of Rearrest (from OTI)

This offender scored in the low risk of re-arrest range. Research has shown that offenders who scored 16-25 points have an average of 14% probability of being re-arrested within the first year of supervision.

Criminogenic Needs	Life Area in the Case Plan
Dysfunctional Family	Family Situation
Self Control	Pro-Social Behavior

Dysfunctional Family is widely accepted as one of the criminogenic need factors. The DCC assessment questions identify current and/or past history where criminal activity, substance abuse behaviors, physical, emotional, or psychological abuse may exist or have been present in the home at one time or another. The responses to the Offender Self Report give an indication of a past history or a current family situation of:

- lack of family involvement
- lack of problem solving ability
- growing up in a family that did not have established roles or support

The officer's observations indicate:

- family members are dependent on the offender for financial support
- minor children are present in the home

The officer's observations also indicate the current family environment is positive and the offender did not report experiences consistent with having a physically, emotionally or sexually abusive family as a child.

Self Control The responses to the Offender Self Report give an indication that the offender has problems controlling his own behavior and is more likely to end up with negative consequences if events or situations, people, places or things that set off certain behaviors at a particular time are not identified.

The officer's observations indicate the offender does not exhibit impulsive behavior.

Other Identified Needs or Barriers	Life Area in the Case Plan
Academic/Vocational	Academic/Vocational
Financial	Financial Situation
Legal	Legal
Physical Health	Physical Health
Transportation	Transportation

Offender Self-Reported Life Area Problems (from the DCC Self-Assessment Survey)

Problem Life Area	Interest in Improving (out of 10)	Suggestions for Improvement
Financial Situation	10	WORK MORE.
Legal	9	NOT BREAK LAW.
Pro-Social Behavior	10	
Substance Abuse	9	NOT TO DRINK.
Transportation	9	GET D.L. BACK.

Academic/Vocational

I try to make my job or school situation better.	Always true
When I was in school I was in special education classes.	Never true
I find it difficult to read.	Sometimes true
When I buy something with cash, I can figure out how much change I should get back.	Sometimes true
Are you currently enrolled in school?	No
Do you have a high school diploma/GED?	No
Do you have a trade or other professional credentials?	No
Does the offender speak English fluently?	No ENGLISH IS NOT THE LANGUAGE SPOKEN IN HIS HOME. ENGLISH IS NOT HIS PRIMARY LANGUAGE. SPANISH IS HIS PRIMARY LANGUAGE. HE DID NEED AN INTERPRETER FOR COURT. HE IS NOT ENROLLED IN ANY ESL CLASSES.
Does the offender need assistance in reading the materials related to his supervision?	Yes

Employment

I am okay with my current work or school situation.	Always true
I have the skills that I need to get a good job.	Sometimes true
Are you currently employed?	Yes
Does the offender's work/school history show a pattern of instability?	No HE SAID HE HAS NEVER BEEN FIRED FROM A JOB. HE THINKS HE WAS SUSPENDED, BUT NOT EXPELLED. HE FINISHED 6 GRADES. HE SAID HE HAS HELD DOWN A JOB FOR A WHOLE YEAR BEFORE. HE SAID HE HAS WORKED WITH CURTAINWALL FABRICATORS FOR 4 YEARS, BUT HE SAID HE GETS LAYED OFF AT LEAST ONCE A YEAR. HE IS EMPLOYED THERE NOW.

Family Situation

(Some items are used to flag the Criminogenic Need: Dysfunctional Family)

Family members were in trouble with the law.	Never true
There were fights and arguments in my home.	Never true
When I had a problem I knew someone in my family would help me solve it.	Usually true
I knew I would be punished if rules were broken.	Always true
We didn't hold to any rules or standards.	Never true
Anything goes in our family.	Always true
Did the offender report experiences consistent with having a physically, emotionally or sexually abusive family as a child?	No HE WAS NEVER PLACED IN ANY TYPE OF PROTECTIVE CUSTODY. BOTH OF HIS PARENTS TOOK CARE OF HIM WHEN HE WAS GROWING UP. HE SAID HE AND HIS SIBLINGS DID NOT HAVE TO TAKE ON ANY AGE INAPPROPRIATE PARENTING RESPONSIBILITIES. NO ADULTS IN HIS CHILDHOOD HOMOE ABUSED DRUGS OR ALCOHOL. HE DOES NOT FEEL THAT HE WAS EVER PUNISHED FOR NO REASON.
I am happy with my current family life.	Never true
My family understands my situation and problems.	Always true
Is anyone dependent on you for financial support?	Yes
Are any other members of your family currently under supervision?	No
Are any other members of your family currently incarcerated or in jail?	No
Are there any minor children in your home?	Yes
Is the offender's current family environment positive?	Yes HE SAID HE DOES FEEL THAT HIS FAMILY CAN HELP HIM COMPLETE HIS PROBATION. HE SAID THEY ARE WILLING TO HELP HIM. THEY DO NOT HAVE FREQUENT ARGUMENTS OR FIGHTING IN HIS HOUSEHOLD. NONE OF HIS FAMILY MEMBERS OR HOUSEHOLD MEMBERS USE DRUGS OR ALCOHOL. HE IS NOT CURRENTLY IN A PHYSICALLY OR EMOTIONALLY ABUSIVE RELATIONSHIP.

Financial Situation

I run out of money right before payday.	Sometimes true
I struggle to pay the rent or things like my light bill.	Always true
I have to rely on others for money.	Usually true
It's hard for me to pay for my medical needs.	Always true
Are you dependent upon public assistance or a limited pension for income?	No
Have you been homeless in the past year?	No

Friends & Associates

(Some items are used to flag the Criminogenic Need: Criminal Peers)

How many friends do you have?	10
How many of those friends are on probation, parole or post release (like you are now)?	0
How many of those friends are members of a gang?	0
How many of those friends have ever committed a crime, whether or not they were arrested?	0
How many of those friends sell or use drugs (including pot)?	0
How many of those friends are involved in community or social organizations?	0
How many of those people are your close friends?	5
Does the offender have gang markings or gang tattoos?	No
Did the offender commit the crime(s) with another person?	No

Housing/Current Living Situation

I have a permanent place to live.	Always true
How many times have you changed residences in the past year?	0
Is the offender's current residence suitable?	Yes HIS HOME IS ADEQUATELY HEATED AND COOLED AND IS HAS ADEQUATE BATHROOM FACILITIES. THEY HAVE NO INVOLVEMENT WITH SOCIAL SERVICES. HE SAID HIS RESIDENCE DOES NOT HAVE ANY HUMAN OR ANIMAL WASTE, BUG INFESTATION, OR DIRTY DISHES.

Legal

Does the offender have any pending charges or protective orders?	Yes
Has the offender ever been arrested for assaultive behavior?	No
Is the offender currently involved in civil, divorce, child custody or child support proceedings?	No
Please rate how the offender's attitude will affect their ability to complete the conditions of their release/supervision.	2 on a scale of -5 to 5
Please rate the likelihood that the offender will successfully complete this period of supervision.	7 on a scale of 0 to 10
Please rate the likelihood that the offender will be arrested for another crime after the period of supervision is complete.	6 on a scale of 0 to 10

Mental Health

(Some items are used to flag the Criminogenic Need: Anti-Social Personality)

In trouble before age 15 for Skipping school	No
In trouble before age 15 for Running away	No
In trouble before age 15 for Fighting	No
In trouble before age 15 for Having weapons	No
In trouble before age 15 for Forcing sexual activities on others	No
In trouble before age 15 for Hurting animals or people	No
In trouble before age 15 for Tearing up others' property	No
In trouble before age 15 for Starting fires	No
In trouble before age 15 for Lying	No
In trouble before age 15 for Stealing something from others	No
Sometimes I can't stop myself from doing something, even if I know it is wrong.	Never true
It's exciting to try something that might get me in trouble.	Never true
I try to stay out of situations that might get me in trouble.	Always true
I apologize to others when I do wrong.	Always true
I get in trouble because I have bad luck.	Never true
Breaking the law is not a big deal as long as you don't hurt someone.	Never true
I hear or see things that other people say they don't hear or see.	Never true
I believe that other people can control my mind by putting thoughts into my head or taking thoughts out of my head.	Never true
I have so much energy that I can go for days without sleep and thoughts just race through my head.	Never true
I feel so bad that I think of taking my own life.	Never true
Have you ever been hospitalized for emotional or mental health problems?	No
Have you ever taken medication for emotional or mental health problems?	No
Are you now on medication for emotional or mental health problems?	No
Does the offender need a mental health referral?	No HE SAID HE DOES NOT FEEL THAT HE NEEDS A MENTAL HEALTH REFERRAL. I DO NOT BELIEVE HE DOES EITHER. I WOULD HAVE TO SAY "NO" TO ALL QUESTIONS LISTED ABOVE ON THIS TOPIC.
Please rate the offender's attitude.	3 on a scale of -5 to 5

Physical Health

Because of my health, it's hard to do everyday tasks.	Always true
Are you currently under a doctor's care or taking medications?	No
Are you pregnant?	No
Do you have any chronic medical conditions that require frequent care?	No
Do you have health insurance?	No

Pro-Social Behavior

(Some items are used to flag the Criminogenic Needs: Anti-Social Values and Low Self-Control)

People would describe me as impulsive.	Rarely true
I become angry when people try to tell me what to do.	Always true
I think about what could happen before acting.	Always true
I lose my temper easily.	Always true
I blurt out whatever is on my mind.	Always true
I think the world owes me a better life.	Sometimes true
I get even with people who mess with me.	Never true
I think about how my actions will affect others.	Always true
I can control the things I say.	Always true
I do things I had not planned to do.	Always true
Are you involved in any community or social organizations? (i.e., hobbies, church or religious organization, volunteer activities, sports)	No
Is the offender involved in positive family activities?	Yes HE SPENDS TIME WITH HIS FAMILY. THEY STAY HOME TOGETHER AND DO THINGS OUTSIDE. HIS DAUGHTER IS NOT IN SCHOOL. HE DOES NOT HELP WITH ANY SCHOOL WORK BECAUSE HIS DAUGHTER DOES NOT HAVE ANY CURRENTLY. SHE SAID HE WATCHES TELEVISION WITH HIS DAUGHTER AND PLAYS WITH HER WITH HER TOYS. HIS DAUGHTER IS NOT INVOLVED IN ANY ACTIVITIES YET. SHE STAYS WITH A BABYSITTER DURING THE DAY.
Does the offender exhibit impulsive behavior?	No HE DOES NOT HAVE A REPUTATION FOR LOSING HIS TEMPER. HE DOES NOT HAVE A REPUTATION FOR ACTING ON THE SPUR OF THE MOMENT. HE HAS NOT INTERRUPTED OR ARGUED WITH ME. HE IS ONLY DIFFICULT TO COMMUNICATE WITH DUE TO THE LANGUAGE BARRIER.
Is the offender truthful in answering questions?	Yes HE SAID HE HAS BEEN HONEST IN ANSWERING MY QUESTIONS TODAY. I AGREE AND I HAVE NOT FOUND ANY EVIDENCE OF LYING. HE HAS NOT BEEN EVASIVE.
Does the offender display a lack of remorse or guilt for his/her behavior?	No HE IS REMORSEFUL. HE DOES NOT BLAME ANY OTHERS OR THE VICTIM. HE DOES NOT AGREE WITH THE LAST STATEMENT.
Has the offender indicated that they have no friends?	No

Sex Offender

Substance Abuse

(Some items are used to flag the Criminogenic Need: Substance Abuse)

How many days in a typical week do you drink alcohol or use drugs?	0 days
How many days in a typical week do you drink more than 5 drinks at one sitting?	0
At the time of the offense that I am on probation for happened, I was...	under the influence of just alcohol
When I drink alcohol or use drugs I get in arguments with others.	Never true
I feel 'hung over' or sick when I wake up.	Never true
When I drink or use drugs I get in trouble at work/school.	Never true
I think about stopping drinking or doing drugs.	Never true
Does the offender present visual or behavioral signs of substance abuse?	No I HAVE NEVER OBSERVED HIM UNDER THE INFLUENCE OF ALCOHOL OR DRUGS. I HAVE NEVER SMELLED ANY DRUGS OR ALCOHOL ON HIS PERSON. HE HAS NEVER HAD A POSITIVE DRUG TEST. HE SAID HE HAS NO POSSESSION OF DRUG PARAPHERNALIA IN HIS HOUSE, AUTO, OR ON HIS PERSON. HE HAS NO TRACK MARKS.

Transportation

Do you have a valid driver's license?	No
Do you have a reliable method of transportation?	Yes

Victims

Open/Ongoing Special Conditions/Sanctions

Sent	Condition/Sanction	Qualifier	Length	Effective
01-001	PARTICIPATE/COMPLETE TREATMENT	COURT ORDERED	36 mth	10/26/2011
01-001	PAY SUPERVISION FEES	COURT ORDERED	36 mth	10/26/2011
01-001	PAY COSTS OF COURT	COURT ORDERED	36 mth	10/26/2011
01-001	PAY FINES ORDERED BY COURT	COURT ORDERED	36 mth	10/26/2011
01-001	POSS/USE CONTROLLED SUBSTANCE	COURT ORDERED	36 mth	10/26/2011
01-001	SUB TO DRUG SCREENING	COURT ORDERED	36 mth	10/26/2011
01-001	SUBMIT TO WARRANTLESS SEARCH	COURT ORDERED	36 mth	10/26/2011
01-001	OBTAIN SUBST ABUSE ASSESSMENT	COURT ORDERED	36 mth	10/26/2011
01-001	OTHER SANCTIONS, SEE COMMENTS	COURT ORDERED	36 mth	10/26/2011
	Comments	DEFENDANT IS NOT TO OPERATE A MOTOR VEHICLE UNTIL LICENSED		
		BY DMV;		
		DEFENDANT IS NOT TO ABUSE ALCOHOL.		
		PROBATION MAY BE TRANSFERRED TP PITT COUNTY.		
		HE MAY SERVE ACTIVE SENTENCE IN PITT COUNTY IF ALLOWED BY		
		THE SHERIFF OF THAT COUNTY.		

Case Plan for:

OPUS ID:

Officer:

Last Revised: 02/07/2012

Current Address:

Employment		Goal: Determine Employment ability.			
Personal Statement:					
Action Step	Ordered* / Created	Status	Responsible Party	Start Date	End Date
Obtain and maintain full-time employment and provide monthly verification to PPO.	02/07/2012	Ongoing	OFFENDER	10/26/2011	

Financial Situation		Goal: Review/Monitor financial status.			
Personal Statement:					
Action Step	Ordered* / Created	Status	Responsible Party	Start Date	End Date
Pay supervision fees	10/26/2011*	Ongoing	OFFENDER	10/26/2011	
Pay costs of court	10/26/2011*	Ongoing	OFFENDER	10/26/2011	
Pay fines ordered by court	10/26/2011*	Ongoing	OFFENDER	10/26/2011	
PAY \$68.00 PER MONTH ON MOORE CO. CASE# 10CRS51533 BEGINNING ON 11/26/11 AND CONTINUING ON THE 26TH OF EACH MONTH THEREAFTER UNTIL PAID IN FULL.	02/07/2012	Ongoing	OFFENDER	10/26/2011	

Legal		Goal: Satisfy all pending legal matters and refrain from further criminal activities.			
Personal Statement:					
Action Step	Ordered* / Created	Status	Responsible Party	Start Date	End Date
Submit to warrantless searches	10/26/2011*	Ongoing	OFFENDER	10/26/2011	
Other Sanctions, see comments	10/26/2011*	Ongoing	OFFENDER	10/26/2011	
Complete Special Probation Active T.	10/26/2011*	Achieved	OFFENDER	10/28/2011	11/13/2011
Report all contacts with Law Enforcement or the Courts.	02/07/2012	Ongoing	OFFENDER	10/26/2011	
Commit no criminal offense in any jurisdiction.	02/07/2012	Ongoing	OFFENDER	10/26/2011	
Not be in possession of a deadly weapon as listed on G.S. 14-269.	02/07/2012	Ongoing	OFFENDER	10/26/2011	

Pro-Social Behavior		Goal: Remain crime free by developing skills for pro-social behavior.			
Personal Statement:					
Action Step	Ordered* / Created	Status	Responsible Party	Start Date	End Date
REPORT FOR ALL APPOINTMENTS AS DIRECTED BY HIS PO.	02/07/2012	Ongoing	OFFENDER	10/26/2011	

Substance Abuse		Goal: Remain alcohol and drug free. Learn techniques to avoid use.			
Personal Statement:					
Action Step	Ordered* / Created	Status	Responsible Party	Start Date	End Date
Participate in and Complete Treatment.	10/26/2011*	Projected	OFFENDER		
Obtain substance abuse assessment	10/26/2011*	Projected	OFFENDER		
Do not possess/use controlled substances	10/26/2011*	Ongoing	OFFENDER	10/26/2011	
Submit to Drug Screening.	10/26/2011*	Ongoing	OFFENDER	10/26/2011	
HE IS NOT TO ABUSE ALCOHOL.	02/07/2012	Ongoing	OFFENDER	10/26/2011	

Transportation		Goal: Locate and secure suitable transportation.			
Personal Statement:					
Action Step	Ordered* / Created	Status	Responsible Party	Start Date	End Date
Surrender license.	10/26/2011*	Achieved	OFFENDER	10/26/2011	10/26/2011
HE IS NOT TO OPERATE A MOTOR VEHICLE UNTIL RELICENSED BY DMV.	02/07/2012	Ongoing	OFFENDER	10/26/2011	