



**PREA VULNERABILITY ASSESSMENT INSTRUMENT
 RISK OF VICTIMIZATION AND/OR SEXUALLY AGGRESSIVE BEHAVIOR/OVERALL RISK**

Date of youth's admission to Sununu Youth Services Center:

YOUTH DEMOGRAPHICS

Youth name:

Date of birth:

Height:

Weight:

YouthCenter ID:

Bridges Case ID:

Bridges Client ID:

IDENTIFIED GENDER

Male Female

Other:

ETHNICITY

Check all that apply

Asian Black or African American

Native Hawaiian/Other Pacific Islander White/Caucasian

Hispanic Origin?

Yes No

American Indian/Alaskan Native?

Yes No

If yes to American Indian/Alaskan Native, Tribe?

SEXUAL IDENTITIY

Check all that apply:

Asexual Bisexual

Gay Heterosexual

Intersex Lesbian

Pansexual
 Transgender
Sexual identity: Other

Questioning
 Decline to answer

YOUTH INTERVIEW

EXPERIENCE IN PLACEMENT

No-Score 2, Yes-Score 0

Ask-Have you ever been in a locked juvenile facility?

Yes No

Score:

Comments:

SOCIAL SKILLS

No-Score 1, Yes-Score 0

Lead with-How do you feel about being placed here? Then ask the following:

Do you feel you get along well with other people?

Yes No

Do you find it easy to make friends?

Yes No

Do you feel okay about being in groups of people you don't know well?

Yes No

Score:

Comments:

PERCEPTION OF RISK

Ask-Do you feel at risk from attack or abuse from other youth and/or staff at the facility?

For example: Have you received threats, insults or harassment from other youth?

If necessary, prompt with options and if they respond "sometimes" or "often", ask for more detail and note the youth response in the comments below.

Not at all (score 0) Sometimes (score 1) Often (score 2)

Score:

Comments:

HISTORY OF VICTIMIZATION

Ask-Have you ever been attacked, bullied or abused by people your own age (peers)?

Prompt with options below, if necessary.

Not at all (score 0) A few times (score 1) Often (score 2)

Ask-Have you ever had a sexual experience that you did not want to have?

If yes, ask what and if this was reported to DCYF and/or Law Enforcement?

If the youth informs you this has not been reported, a report must be made to DCYF Central Intake.

No (score 0) Yes (score 4)

Score:

Comments:

OFFENSE TYPE

No Score 0, Yes Score 4

Ask-Have you ever been arrested for a sexual offense?

No Yes

Ask-Have you ever been arrested for a violent offense?

No Yes

Score:

Comments:

BEHAVIOR

No Score 0, Yes Score 2

Ask-Have you ever engaged in behavior you would consider violent?

No Yes

Ask-Have you ever engaged in behavior you would consider sexually aggressive?

No Yes

Score:

Comments:

AGE OF YOUTH

19 years and up-Score 0

16, 17 & 18 years-Score 1

13, 14 & 15 years-Score 2

1-12 years-Score 3

19 years and up 16, 17 & 18 years 13, 14 & 15 years 1-12 years

Score:

INTELLECTUAL IMPAIRMENT

From the file review, is there any physical evidence that this youth has been previously reported to have an intellectual impairment (low IQ), learning disability or special education?

No evidence (score 0) Evidence (score 2)

Score:

Comments:

“LACK OF FIT” WITH THE JUVENILE JUSTICE CULTURE

None or only 1 feature-Score 0

Two or three features-Score 2

Multiple features (four or more)-Score 4

This item requires judgement by the screener that the youth is unlikely to “fit in” with the mainstream juvenile offender culture.

Look for features of the youth’s physical appearance, such as:

- | | |
|---|--|
| <input type="checkbox"/> Small build | <input type="checkbox"/> Looks younger than stated age |
| <input type="checkbox"/> Impaired vision (requires glasses) | <input type="checkbox"/> Pronounced disfigurement |
| <input type="checkbox"/> Physical disability | <input type="checkbox"/> Deaf |
| <input type="checkbox"/> Appears frail, weak | <input type="checkbox"/> None |

Look for features in the youth’s presentation and behaviors, such as:

None or only 1 feature-Score 0

Two or three features-Score 2

Multiple features (four or more)-Score 4

- | | |
|---|---|
| <input type="checkbox"/> Inappropriate verbal behavior (odd remarks, giggling) | <input type="checkbox"/> Inappropriate physical behavior (sexualized) |
| <input type="checkbox"/> Hunched, fearful posture | <input type="checkbox"/> Obvious effeminate behavior |
| <input type="checkbox"/> Acts of aggression (by observation) | <input type="checkbox"/> Youth’s behavior with siblings/other youth |
| <input type="checkbox"/> Youth’s behavior in school | <input type="checkbox"/> Speech impediment |
| <input type="checkbox"/> Appears slow or “dull” | <input type="checkbox"/> Behaviors that are likely to irritate/annoy others (silly, immature) |
| <input type="checkbox"/> Behaviors that appear to be related to mental illness (jittery, crying, bizarre) | <input type="checkbox"/> Mental disabilities (conduct disorders, ADHD, PTSD) |
| <input type="checkbox"/> None | |

Look for features of the youth that makes them stand out, such as:

None or only 1 feature-Score 0

Two or three features-Score 2

Multiple features (four or more)-Score 4

- Having a lack of exposure to a criminal lifestyle
- Being from an ethnic minority that is not well represented in the offender population
- Any appearance or behavior that is atypical of the gender assigned at birth
- Identifies with a sexual minority group (gay, lesbian, transgender etc.)
- Membership in a gang that is likely to be a target of an attack from others
- None

Score:

Comments:

FILE REVIEW

Experience in institutions:

Does the file indicate the youth has been charged with a sex offense?

Information not available (score 0)

No (score 0)

Yes (score 2)

Does any information suggest prior sexual aggression or sexual victimization of others?

Information not available (score 0)

No (score 0)

Yes (score 2)

Score:

Comments:

OVERALL RISK SCORE

Vulnerability to victimization noted during youth interview

Experience in placement

Score:

Social skills

Score:

Perception of risk

Score:

History of victimization

Score:

Age of youth

Score:

Intellectual impairment

Score:

Lack of fit

Score:

Violent or sexually aggressive behavior

Offense type

Score:

Behavior

Score:

File review

Score:

OVERALL SCORE (MAXIMUM SCORE OF 20)

Risk Level: Low (1-8), Medium (9-16), High (17 & above)

Total score:

Risk level (low, medium or high):

Special accommodations due to risk level?

Yes

No

Comments:

Notified PREA Compliance Manager?

Yes

No

Comments:

Notified residential of high-risk youth?

Yes

No

Comments:

Referred to clinical for safety planning?

Yes

No

Comments:

ASSESSOR

Name of clinical staff completing assessment:

Date of assessment:

Time of assessment: