



## **A TEMPLATE FOR WRITTEN REPORTS OF PRE-DISPOSITION PSYCHOLOGICAL EVALUATIONS**

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**This document is a model outline for psychologists or psychiatrists to report the results of their evaluations of youth in delinquency cases involving assessment to address questions of disposition after adjudication. Courts often order such evaluations when there is some evidence that a youth might have special needs related to mental illness, developmental disability, or substance abuse.**

**This outline was developed within the Caddo Parish (Louisiana) juvenile court system. As part of the system's contract for services, Ms. Goodwin and Dr. Hill constructed this outline with the assistance of the National Youth Screening Assistance Project. NYSAP is a member of the National Resource Bank of technical assistants, associated with the MacArthur Foundation's Models for Change Initiative.**

**Psychologist Name  
Address  
Phone**

## Psychological Pre-Disposition Evaluation Report

**To:** The Honorable Judge  
Juvenile Court for Caddo Parish

**Regard:** Name of Youth

**Docket Number:**

**Date of Birth:**

**Date of Evaluation:**

**Age:**

This is a ***confidential*** report. Information contained in this report may not be shared with any unauthorized persons, except as required by law or as directed by Court order. Neither the written report nor any information contained therein should be shared with the above-named youth or parent/guardian without notification to the examiner, so that the information can be properly explained and any questions answered.

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### Part I: PURPOSE AND PROCESS OF EVALUATION

#### Reason for Referral

Describes circumstances that led to the youth's referral to Juvenile Court and states what questions the examiner is asked to address. Examples of specific statements within this section might include the following.

- Current legal status of the youth (“\_\_\_\_\_ is housed at Juvenile Detention while awaiting a hearing on a charge of Simple Battery that resulted from a fight with his mother at home on . . .”).
- States authority upon which the assessment is being conducted (“. . . was conducted by order of Judge \_\_\_\_\_ dated . . .”).
- Indicates how evaluation findings will be used in legal proceedings (“. . . to be considered by the Court in making decisions about case disposition.”)
- States specifically what is being requested by the Court (“. . . determine whether the youth has intellectual deficiencies”; “. . . identify

factors related to anger outbursts and make treatment recommendations.”)

### **Evaluation Objectives**

Describes more precisely (in psychological terms) what it was the examiner tried to assess in order to address or evaluate the question(s) raised by the Court. For example, if the Court wants to know whether the youth has a developmental disability (mental retardation), the following objectives might be relevant.

- Construct a comprehensive psychosocial history, with a particular emphasis on developmental functioning and attainment of developmental milestones
- Examine school and other agency records, including previous evaluation reports
- Assess current levels of intellectual functioning
- Assess current levels of academic and adaptive functioning

### **Process of Evaluation**

This section should provide a brief chronology and description of evaluation activities, including specific sources of third-party information (records and/or collateral informants), as well as names of all psychological tests or measures that were administered. Notation should be made of efforts to access any records that could not be obtained or speak with any informants that could not be contacted.

- All interviews with the youth and/or parent or guardian, including dates and length of interview (“I conducted separate interviews with \_\_\_\_\_ and her mother in my office on October 1. Each interview lasted approximately one hour.”)
- Name of all psychological tests administered (“Following the interview, \_\_\_\_\_ completed the Wechsler Intelligence Scale for Children – IV.”)
- Any interviews or phone calls with other informants (“I also spoke with her Probation Officer, \_\_\_\_\_, for 20 minutes by phone on October 3.”)
- Description of all records reviewed (“Prior to the interview on October 1, I reviewed school discipline referrals and an I.E.P. dated 4-27-08.”)

### **Notice of Limits on Confidentiality**

Describes what was disclosed to the youth (and/or the youth’s parents or guardian) regarding purpose of the evaluation and who evaluation results will be shared with.

(**NOTE:** In the event the Memorandum of Understanding is ratified, include a specific statement that information obtained from the evaluation cannot be used in adjudication of the charges.)

- Describe specific statements made to the youth (and parents/guardian).
- Describe statements made regarding any other limits of confidentiality (e.g., mandatory reporting of child abuse/neglect).
- Includes description of observable behaviors and/or verbatim statements made by youth and parent that reflect their understanding of the information presented.
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## **Part II: CLINICAL DATA**

This section should only describe the youth's current and historical social, clinical, and psychological functioning. As such, all information should be limited to observations, facts, and data. Opinions, conclusions, or case formulations based upon these data should be presented in Part III of the report.

### **History and Background Information**

*Family and Social History.* Identify family members and others currently living in the home. Provide basic description of family members (e.g., parents' employment status and/or occupations; sibling ages, problems of siblings, etc. Also, indicate if family has been stable (frequent moves; contentious relations), note significant events in family life, and list any prior referrals to or actions by Child Protective Services.

*Developmental and Medical History.* Description of youth's physical, social, and mental development and growth. Note any prenatal or perinatal complications, as well as any significant medical history.

*Educational/Employment History.* Note general academic progression, retentions, school-based evaluations, special education services/exceptionalities, and any behavior problems (including trancies and suspensions). If applicable, describe types of work youth has performed for gainful employment and briefly indicate quality of job performance/job satisfaction.

*Mental Health and Substance Use History.* Note youth's history of mental illness and mental health treatments, as well as any developmental disabilities. Describe any current mental health intervention services, and provide a sense of the overall effectiveness of past and current treatments. Also indicate youth's attitude toward any treatments provided. Detail any history of substance abuse (What substances? When onset? How much/How frequent? Periods of greatest use? Life circumstances surrounding use?) Include mental health history for family members.

## **Current Clinical Status**

*Mental Status Exam.* Report pertinent observations and findings from typical mental status interviews.

*Youth's Perceptions.* Indicate how the youth views his/her current situation. Describe attitudes/perceptions about themselves, problem or delinquent behavior, relevant family members or family circumstances, and their own expectations for the future.

**(Note: This information required by Louisiana Children's Code, Section 890)**

*Psychological Test Results.* Name and results of any psychological tests given. Also include any pertinent findings from evaluation reports by other examiners, making particular notation of important similarities or differences among test results.

*Diagnostic Impressions.* DSM-IV diagnoses

## **Risk Assessment and Rehabilitation Potential**

**(Note: If the evaluation question posed is narrow in scope, such as asking whether the youth has a learning disability, this section might be omitted entirely and the Summary and Recommendations heading would follow.)**

*Delinquent Behavior/Legal History.* Describe nature and extent of pertinent delinquent behaviors. Include age of onset and general course of problems. Indicate if behaviors are solitary or peer-involved (including any gang affiliations). If known, describe circumstances or stressors associated with delinquent behaviors. List nature and legal status of any current or previous charges against the youth, including involvement in and outcomes of any juvenile justice programs. Cite features of the current offense relevant to future risk of offending.

*Previous Rehabilitation Outcomes.* Describe any past systematic rehabilitation efforts. Note types of previous programs or placements and any apparent benefits to the youth. Also note any evidence that might indicate reasons for successes or failures of previous efforts, and that also indicate youth's current motivation to change.

*Current Stressors.* Family, community, or other factors that are viewed as either contributing directly to occurrence of delinquent behavior or as increasing the risk for delinquent behavior.

*Protective Factors.* Personal strengths and qualities of the youth, or available family/community resources, that can or do contribute to decreased likelihood of delinquent behavior.

Standardized Measures of Risk. Results from any formal measures of risk that were administered (such as Structured Assessment of Violence Risk in Youth; Youth Level of Service/Case Management Inventory).

### **Part III: SUMMARY AND RECOMMENDATIONS**

This section of the report should present the examiner's opinions about the youth and recommendations to the Court, based upon synthesis and interpretation of data contained in Part II of the report. These statements should be directly related to and follow logically from the clinical evidence.

#### **Summary and Case Formulation**

Briefly summarize clinical findings or clinical features of the youth that are most pertinent to understanding the youth's current legal situation. While this section does not introduce any clinical data not previously discussed, it does *selectively* refer to those data most relevant to understanding the author's interpretation of the youth's current situation. This should provide the reader a sense of the pertinent clinical realities as they relate to the reason for the assessment. The examiner should then explain his/her opinion about the fundamental problems, factors, and/or circumstances that led to the youth's current involvement with the Court. The logic of this explanation and important inferences can be supported by reference to assessment data, if necessary to provide clarity to the reader. Any alternative explanations or interpretations to assessment data should be discussed. Finally, specific referral questions should be briefly re-stated and directly answered.

#### **Recommendations**

**(Note: The content and scope of recommendations will vary depending upon the nature of evaluation questions to be addressed.)**

Recommendations should reflect the examiner's conclusion about what important factors or characteristics of the youth need to be changed in order to meet clinical needs of the youth and decrease the likelihood of delinquent behavior in the future. The type of services, interventions, and/or programs recommended should be as specific as possible, but should also be practical (in terms of both availability and relative ease of implementation). Recommendations should also address the following points in a straight-forward manner so as to be optimally useful to the Court.

- Be directly related to referral questions and identified needs.
- Indicate treatment options for the Court (when applicable).
- Indicate if there have been previous efforts to implement recommended services or interventions.

- Describe recommended services or treatments specifically, as generic descriptions may actually decrease the likelihood that needed services will not be obtained. (For example, “friendship skills training” or “cognitive-behavior therapy for anger arousal”, instead of “counseling services”.)
- Point out details about delivery of services/interventions that will require attention to detail in order to maximize the likelihood of implementation (such as location and accessibility, payment for services, case management needs, etc.).

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**Signature of Examiner**  
**Licensed Psychologist #**

