2020 Public Safety Solutions Guide
The Data Insights Program was developed to help institutions identify key trends in data to boost organizational strengths and overcome challenges.

DATA INSIGHTS PROGRAM
Let our team of experienced scientists analyze and interpret your data to HELP INFORM KEY ORGANIZATIONAL DECISIONS

Turn to page 30 to learn more!
Welcome to our 2020 Solutions Guide. At MHS, we continue to innovate and develop great products that help meet the needs of professionals. We’re listening to you. As a result, we continually update our processes and services and add new products to our portfolio. You may have already noticed our new website and e-commerce but that’s just the start. We have much more to come over the course of 2020 and we hope you are looking forward to it as much as we are!

MHS has worked hard over the last few years to bring new offerings to our Public Safety clients. The addition of Global Institute of Forensic Research, Inc. (GIFR) and G.E.A.R.S. brought a comprehensive suite of training programs and a modern, user friendly assessment platform to the market. In 2020 we will continue to bring new content online, adding GIFR Trainings in the very important areas of Officer Wellness and Human Trafficking, as well as expanding our assessment offerings to add new Level of Service and Youth Level of Service Booster Trainings, as well as sessions on the WAVR-21. On our G.E.A.R.S. platform look for the PCL-R, TRAP-18, and Level of Service tools to be available in 2020. Partnership is important at MHS. We believe that if we work together with our clients our combined efforts will surpass what we can each accomplish on our own. For 2020 we are expanding our Data Insights Program, a truly partner driven offering that sees us working with you and your offender data to derive insights into your programs that will help fine tune program management and delivery to better improve outcomes for offenders and for the community. For more information on how our Data Insights team can help you and your organization, please contact Tammy Holwell (Tammy.Holwell@mhs.com).

Many of our Public Safety clients use a wide variety of MHS assessments. We are thrilled that our flagship clinical product, the Conners Rating Scales, will soon be released in the Conners Fourth Edition (Conners 4™) and Conners Adult ADHD Rating Scales 2 (CAARS 2™). At MHS we are proud of the legacy of the Conners Rating Scales as the world’s premier measure of ADHD in children, adolescents and adults. The next generation version of this iconic tool will carry out the tradition of being innovative, best-in-class, and true to its original mission of helping you identify clients in need of further intervention. As we learn more, we apply that research along with suggested intervention strategies.

Thank you for your continued support of MHS. We value you as a client. Please continue letting us know how we can serve you better. We look forward to another great year!

LETTER FROM THE FOUNDER & CEO

Steven J. Stein, Ph.D.
Founder and Executive Chair

Hazel Wheldon
Chief Executive Officer
# TABLE OF CONTENTS

## ADMINISTRATION AND SCORING OPTIONS
- **SELF-APPRAISAL QUESTIONNAIRE (SAQ)**
- **HARE PSYCHOPATHY CHECKLIST: YOUTH VERSION (PCL: YV)**
- **HARE PSYCHOPATHY SCAN RESEARCH VERSION (P-SCAN RV)**
- **GUIDELINES FOR A PSYCHOPATHY-TREATMENT PROGRAM**
- **ANGERTREATMENT SCALE (AES)**

## GLOBAL INSTITUTE OF FORENSIC RESEARCH
- **GLOBAL INSTITUTE OF FORENSIC RESEARCH**
- **G.E.A.R.S.**
- **TRAININGS**
- **GIFR SPOTLIGHT TRAININGS**
- **GIFR MEMBERSHIP**

## COUNTER TERRORISM
- **TERRORIST RADICALIZATION ASSESSMENT PROTOCOL (TRAP-18)**

## RISK / NEEDS
- **LEVEL OF SERVICE/ RISK, NEED, RESPONSIVITY (LS/RNR)**
- **LEVEL OF SERVICE/ CASE MANAGEMENT INVENTORY (LS/CMI)**
- **LEVEL OF SERVICE INVENTORY-REVISED (LSI-R)**
- **LEVEL OF SERVICE INVENTORY-REVISED: SCREENING VERSION (LSI-R: SV)**
- **YOUTH LEVEL OF SERVICE/ CASE MANAGEMENT INVENTORY 2.0 (YLS/CMI 2.0)**
- **YOUTH LEVEL OF SERVICE/ CASE MANAGEMENT INVENTORY: SCREENING RESEARCH VERSION (YLS/CMI: SRV)**
- **CHILD AND ADOLESCENT FUNCTIONAL ASSESSMENT SCALE (CAFAS)**
- **JUVENILE INVENTORY FOR FUNCTIONING (JIFF)**

## PERSONALITY AND PSYCHOPATHOLOGY
- **HARE PSYCHOPATHY CHECKLIST: YOUTH VERSION (PCL: YV)**
- **JESNESS INVENTORY-REVISED (JI-R)**
- **CAARS: CORRECTION**
- **PALHAUS DECEPTION SCALES (PDS)**
- **ANER DISORDERS SCALE (ADS)**
- **ANGER REGULATION AND EXPRESSION SCALES (ARES)**

## PSYCHOPATHY
- **HARE PSYCHOPATHY CHECKLIST-REVISED™ 2ND EDITION (PCL-R™ 2ND ED.)**
- **HARE PSYCHOPATHY CHECKLIST: SCREENING VERSION (PCL: SV)**
- **SELF-REPORT PSYCHOPATHY SCALE FOURTH EDITION (SRP: 4)**

## NON-CRIMINAL CRIMINAL
- **PERSONALITY AND PSYCHOPATHOLOGY**

## DATA INSIGHTS
- **DATA INSIGHTS**
- **SUBSTANCE ABUSE SUBTLE SCREENING INVENTORY (SASSI)**
- **OFFICER CANDIDATE SELECTION**
- **MATRIX-PREDICTIVE UNIFORM LAW ENFORCEMENT SELECTION EVALUATION INVENTORY (M-PULSE)**
- **DEPRESSION**
- **CHILDREN’S DEPRESSION INVENTORY REVISED (CDI-2)**
- **NEUROPSYCHOLOGY**
- **COMPREHENSIVE EXECUTIVE FUNCTION INVENTORY (CEFI) ADULT**
- **ADHD**
- **CONNERS CONTINUOUS PERFORMANCE TEST 3RD EDITION (CPT3)**
- **CONNERS CONTINUOUS AUDITORY TEST OF ATTENTION (CATA)**
- **CONNERS 3**
- **REP CONTACT INFORMATION**

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**ICON LEGEND**
Look for these icons throughout the catalog and use them to identify product information quickly and easily.

- **MHS Online Assessment**
- **MHS Online Assessments**
- **Scoring Software**
- **Handscored**
- **Spanish**
- **DSM-5 Updates**
- **Learn Center**

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**REPORTS**

- **Assessment/Interpretive**
  Provides information about a single administration, presented numerically and graphically, including the individual’s scores, how he/she compares to others, and which scales and subscales are elevated.

- **Comparative**
  Combine the results of up to five different raters to provide an overview of an individual’s scores from a multi-rater perspective. This highlights potentially important inter-rater differences in scores.

- **Progress**
  Compare the results of two to four administrations for the same individual to measure changes over time. These reports are ideal to use when monitoring treatment and intervention.

- **Profile**
  Summarize the results of an individual administration, providing scores for all scales.
ADMINISTRATION & SCORING OPTIONS

ONLINE

MHS Online Assessment Center +
https://assess.mhs.com/

Access an updated experience of our online assessment platform. We have created a streamlined new portal that helps simplify all the tasks in your assessment workflow, from adding a client to generating a report.

New Features:
- Uses are consumed upon scoring
- Manage your clients and their assessments through an intuitive client management system
- Send an assessment link to an off-site client, keep track of incomplete assessment links, and send reminder emails to clients all in one spot
- Access and keep track of your inventory information through your Account Balance and Usage History

MHS Online Assessment Center
mhsassessments.com/MAC

Access assessment forms, administration, scoring, and reports from anywhere. From three easy administration options including, online entry, email, or printed paper forms. Once administration is completed, scoring is done automatically and reports can be generated.

The FAS Outcomes online platform has unique administration, scoring, and reporting options and contains all four FAS assessments.
- View family-based reports that are automatically created and contain research-driven clinical indicators and alerts.
- Separate client, clinician, and supervisor dashboards summarize the most recent assessment along with any changes.
- Monitor overdue and unfinished assessments.
- The supervisor’s dashboard allows for review of aggregate data and “drill down” to specific cases.
- Administrators can run short and long term aggregate reports for program evaluation and progress monitoring.

MHS SCORING SOFTWARE

MHS Scoring Software is licensed to an individual user but can be installed on an unlimited number of computers (excluding Conners CPT 3/CATA/K-CPT 2); however, the MHS USB key must always be connected to the computer. After administering the instrument, enter responses into the software program to score and generate reports. Assessment tools can be quickly installed onto your current MHS Scoring Software USB key. For information on system requirements please visit mhs.com

HANDSCORED

Administered using paper and pencil, with MHS QuikScore™ Forms. Responses automatically transfer through to a scoring grid. After completing calculations on the scoring grid, you then plot the scores on profile sheets for conversion to standardized scores.

<table>
<thead>
<tr>
<th>ADMINISTRATION</th>
<th>Online</th>
<th>Software</th>
<th>QuikScore</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paper &amp; pencil</td>
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<td></td>
<td>✔</td>
</tr>
<tr>
<td>Computer entry</td>
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<td></td>
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<tr>
<td>Email form via link</td>
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<td>Item prompts when fields are missing</td>
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<td>Save responses</td>
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<tr>
<td>Send email reminders to off-site clients and raters</td>
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<td>Manage client and assessment information</td>
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<tr>
<td>Import assessment data from previous assessment centers</td>
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<tr>
<td>No software or download required</td>
<td>✔</td>
<td>Purchase software separately</td>
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<td>Generate reports</td>
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<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Intervention strategies (*available on select assessments)</td>
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<table>
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<tr>
<th>Other Features</th>
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<th>QuikScore</th>
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<td>Create folders for multiple users or accounts</td>
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<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Create accounts for multiple users</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Access from any computer including mobile</td>
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<td>✔</td>
<td>✔</td>
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<tr>
<td>Access a variety of MHS assessments in one program</td>
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<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Instant access to new purchases</td>
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<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Manage and track inventory usage</td>
<td>✔</td>
<td>✔</td>
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</table>

Please note: The following delivery platforms are currently being retired (alternatives are available in paper or online formats): Version 5 (V5), Psychmanager
G.E.A.R.S. is a fully digital configurable assessment and case management platform.

- Highly configurable dashboards to help users better understand their organization
- Better manage caseloads and caseplans with full visibility into a user’s workload
- Ability to manage user access and seamlessly transfer clients from one user to another and from one institution to another
- Access available through all web browsers or fully integrated into any case management system
- Real time risk calculator increases assessment transparency and the evaluator’s understanding of assessment results
- Off the shelf customizable goals, interventions, reports, and case management module with ability to track clients through treatment (for select assessments)

ASSESSMENTS AVAILABLE ON G.E.A.R.S.

STATIC-99R
The STATIC-99R is a risk assessment tool for adult male sex offenders.
Age: 18+
Items: 10

VRAG-R
The VRAG-R is an actuarial violence risk assessment tool.
Age: 18+
Items: 12

STABLE-2007 & ACUTE-2007
The STABLE-2007 & ACUTE-2007 are dynamic risk assessment tools used for adult males who have sexually offended.
Age: 18+
Items (STABLE-2007): 13
Items (ACUTE-2007): 7

TRAP-18
The TRAP-18 is used to plan for a person of concern risk management to reduce the threat of targeted violence.
Age: 18+
Items: 18
To learn more about the TRAP-18 please see page 10.

LSI-R:SV™
The LSI-R:SV is used to provide an initial screening of risk and need levels in adults who have offended.
Age: 16+
Items: 8
To learn more about the LSI-R:SV please see page 14.

YLS/CMI™ 2.0
The YLS/CMI 2.0 is used to reliably and accurately classify and predict re-offending within male and female juvenile populations.
Age: 12-18
Items (Section 1): 42
Items (Section 2): Varies
To learn more about the YLS/CMI 2.0 please see page 15.

YLS/CMI™:SRV
The YLS/CMI: SRV is used to quickly screen recidivism risk among juvenile populations.
Age: 12-18
Items: 8
To learn more about the YLS/CMI:SRV please see page 16.

PCL-R™: 2nd Ed.
The PCL-R is used to assess psychopathy in adults.
Age: 18+
Items: 20
To learn more about the PCL-R please see page 20.

ONLINE

<table>
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<td>G.E.A.R.S. Site Fee (Annually, per assessment)</td>
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<tr>
<td>G.E.A.R.S. Use</td>
<td>$10.00 ea.</td>
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</tbody>
</table>

Discounted pricing available when ordering 500+ uses. Prices are subject to change.
Trainings on Essential Public Safety Topics and Criminal Justice Tools

GIFRinc.com

The Global Institute of Forensic Research® (GIFR) trainings advise front line agents on how to effectively use assessments and to share progressive knowledge and insights about issues facing the criminal justice and public safety community. Trainings are offered in 4 accessible formats including in-person, on-demand, book based, and live webinars. Over 400 hours of Continuing Education (CE) trainings are available that are approved by the American Psychological Association, the Canadian Psychological Association, the American Nurses Credentialing Center, the Association for Social Work Boards, the National Board of Certified Counselors, the National Association for Alcohol and Drug Abuse Counselors, the Australian Psychological Society, the Australian Association of Social Workers, the New Zealand Psychologists Board, and over 150 additional national and state-specific boards.

Training Topics Include:

- Risk Assessment (Sexual Offenses)
- Risk Assessment (Violence)
- Risk Assessment (Recidivism Risk/Needs)
- Sexual Offenses Evaluation & Treatment
- Psychopathy
- Threat Assessment
- Personality Assessment
- Officer Wellness
- Trauma & Eye Movement Desensitization and Reprocessing (EMDR)
- Investigative Interviewing
- Malingering Assessment
- Corrections
- Criminal Thinking
- Expert Witness Training Series
- Mental Disability Law
- Domestic Violence
- Human Trafficking
- Supervisor Trainings
- Immigration/Asylum Seeking

Pricing ranges from $30.00 to $499.00 for GIFR Trainings. Please contact a representative for a full list of trainings and prices at 1 (855) 747-3360 or services@gifrinc.com or visit www.GIFRinc.com

Check out our Spotlight Trainings on the next page!
Spotlight Trainings

LS/CMI
This workshop led by co-author of the tool, Dr. Stephen Wormith, will not only teach you how to use the LS/CMI but will also show you how to reliably score and interpret its findings. Case studies will be utilized to practice using the tool's coding manual and to learn how to avoid common administration errors.

To learn more: gifrinc.com/ls-cmi

LS/CMI BOOSTER
This booster training was developed to help you brush up on your understanding of administering and scoring the LS/CMI.

To learn more: gifrinc.com/ls-cmi-booster

YL/CMI 2.0
Presented by master trainer, Dr. Ralph Fretz, this workshop will teach you how to use the YLS/CMI 2.0. This tool is a gender-informed, culturally-informed, strengths-focused risk/needs assessment that reliably and accurately classifies and predicts re-offending within male and female juvenile populations.

To learn more: gifrinc.com/yls-cmi

YL/CMI 2.0 BOOSTER
This booster training was developed to help you brush up on your understanding of administering and scoring the YLS/CMI 2.0.

To learn more: gifrinc.com/yls-cmi-booster

PCL-R & PCL:SV
The PCL-R is the international gold standard for the diagnosis of psychopathy in adults. Comprised of an on-demand presentation by the instrument’s renowned author, Professor Robert D. Hare, as well as a 2-day live and interactive webinar by leading figure in the field of psychopathy, Dr. J. Reid Meloy, this innovative program will train you in the use of both the PCL-R and PCL:SV.

To learn more: gifrinc.com/pcl-r

STABLE-2007 & ACUTE-2007
This workshop, presented by certified instructor Dr. Robin Wilson, will train you in the use of the STABLE-2007 & ACUTE 2007. The development of the assessment will be discussed, item-by-item instructions will be given on how to reliably score the measures and interpret their findings, and guidance will be provided on how to apply reporting conventions.

To learn more: gifrinc.com/stable-acute-live

STATIC-99R
Recent surveys suggest that the most widely-researched and commonly-used risk assessment tool for those who have committed a sexual offense is the Static-99R (formerly Static-99). Presented by certified trainer, Dr. Erik Fox, this live and interactive workshop will train you in the use of the Static-99R.

To learn more: gifrinc.com/static-99r
Spotlight Trainings

**TRAP-18**
The Terrorist Radicalization Assessment Protocol-18 (TRAP-18) provides a means by which mental health, intelligence, law enforcement, and security professionals can organize accumulating operational data on a person of concern, and plan for his or her risk management to reduce the threat of targeted violence. This exclusive training presents the development and utility of the TRAP-18 and will teach you how to apply the tool in practice.

To learn more: gifrinc.com/Trap-18-advanced

**HUMAN TRAFFICKING AWARENESS, ADVOCACY & ACTION TRAINING SERIES**
This innovative on-demand training series, led by Human Rights expert Joy Kelleher, will teach attendees evidence based best practices proven to prevent human trafficking efforts. Covering key topic areas, such as screening, assessment, treatment planning, using coaching strategies in supervision contexts, and much more, this training series will equip you with new skills and professional insights.

To learn more: gifrinc.com/human-trafficking

**MITIGATING THE THREAT OF CAMPUS AND CORPORATE VIOLENCE WITH THE WAVR-21 V3**
This training was designed to help you identify and assess risk, frequency, and severity of violence in work and higher education settings.

To learn more: gifrinc.com/wavr-21

**OFFICER SUCCESS TRAINING SERIES**
Police work is physically, emotionally, and mentally demanding and it is important that healthy coping strategies are taught to help officers better deal with these pressures. To help support the wellness needs of those in the field we have developed a training series, comprised of five online webinars, aimed to improve the emotional and wellness needs of officers, corrections staff, their supervisors, and first responders.

To learn more: gifrinc.com/officer-success
GIFR Membership

GIFRinc.com

GIFR Members are elite mental health, correctional, and legal professionals dedicated to the rapid dissemination and implementation of evidence-based best practices. Benefiting from hundreds of hours of Continuing Education trainings designed to maximize the efficacy of their case management plans and fidelity of their evaluations, GIFR Members receive monthly research bulletins and preferred access to all training opportunities.

Why should you become a GIFR Member?

- Access to 400+ CE Hours in On Demand and Book Based Trainings
- Monthly Executive Bulletin Subscription on Risk Assessment Tools
- Exclusive Access to Training Archive
- $25 Discount on all GIFR Trainings
- Preferred Registration for All GIFR Trainings
- ...and much more!

Trainings

GIFR members have access to over 400 hours of Continuing Education trainings on trending topics in the field approved by the American Psychological Association and a number of other associations.

Executive Bulletin

As a GIFR member you will receive comprehensive one-page summaries of risk assessment tool studies published each month in over 150 scientific journals. Use research to increase the reliability and accuracy of your risk assessments, integrate ground-breaking research into practice immediately after publication, and save over 400 hours and $6,000 each year.

MEMBERSHIP PRICING

<table>
<thead>
<tr>
<th>Membership Code</th>
<th>Pricing</th>
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</thead>
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<tr>
<td>GFR001</td>
<td>Monthly</td>
</tr>
<tr>
<td>GFR002</td>
<td>Annually</td>
</tr>
<tr>
<td>GFR003</td>
<td>Student (Annually)</td>
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</tbody>
</table>

Please contact a representative for any further information at 1(855) 747-3360 or services@gifrinc.com or visit www.GIFRinc.com

Ask us about our FREE Essential GIFR Membership that includes access to complimentary trainings for CEUs.
Brush up on your understanding of administering and scoring the LS/CMI or YLS/CMI 2.0

Introducing the

LS/CMI and YLS/CMI 2.0 Online Booster Trainings

YLS/CMI 2.0 Booster Training!

Learn More

LS/CMI Booster Training!

Learn More
The TRAP-18 on G.E.A.R.S. is an automated platform that provides a means by which mental health, intelligence, law enforcement, and security professionals can organize accumulating operational data on a person of concern and plan for his or her risk management to reduce the threat of targeted violence. The instrument is designed to code for eight proximal warning behaviors and 10 longer term distal characteristics. Research around the TRAP-18 is ongoing in both North America and Europe, and findings are demonstrating both reliability and validity.

**VARIABLES**

The TRAP-18 consists of two sets of variables: eight warning behaviors to identify patterns of proximal risk for intended or targeted violence and 10 distal characteristics of lone actor terrorists.

**PROXIMAL WARNING BEHAVIORS**

- Pathway
- Fixation
- Identification
- Novel Aggression
- Energy Burst
- Leakage
- Last Resort
- Directly Communicated Threat

**DISTAL CHARACTERISTICS**

- Personal Grievance and Moral Outrage
- Framed by an Ideology
- Failure to Affiliate with an Extremist or Other Group
- Dependence on the Virtual Community
- Thwarting of Occupational Goals
- Changes in Thinking and Emotion
- Failure of Sexually Intimate Pair Bonding
- Mental Disorder
- Creativity and Innovation
- Criminal Violence

---

**TRAP-18 ON G.E.A.R.S.**

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- Mental Disorder
- Creativity and Innovation
- Criminal Violence

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**ONLINE GFR793 Site Fee (Annually)**

| $545 |

**GFR775 TRAP-18 Use**

| $10.00 ea. |

Discounted pricing available when ordering 500+ uses. Prices are subject to change.

To learn about TRAP-18 Training:

visit gifrinc.com/trap-18

To learn about Mitigating the Threat of Campus and Workplace Violence with the WAVR-21 V3 Training:

visit gifrinc.com/wavr-21-live-webinar

Prices are subject to change.
The LS/RNR™ was developed for public safety organizations who want to use the most current research when conducting their level of service risk assessment but already have a case management process that they are comfortable with. It assesses the rehabilitation needs of offenders, their risk of recidivism, and the most relevant factors related to supervision and programming. It is gender-informed and focuses on offender strengths. Additionally, this tool captures the risks, needs, and responsibility of the offender. The LS/RNR combines selected assessment sections from the LS/CMI™ and makes them available in one easy form.

The LS/RNR assessment captures general risk/need factors including Criminal History, Education/Employment, Family/Marital, Leisure/Recreation, Companions, Alcohol/Drug Problem, Procriminal Attitude/Orientation, and Antisocial Pattern. It also captures specific risk/need factors including Personal Problems with Criminogenic Potential and History of Perpetration, including sexual and non-sexual assault and other forms of violence and anti-social behavior. Special Responsivity Considerations are also included.

HOW TO USE THE ASSESSMENT

The LS/RNR consists of eight sections. In order to administer and score the handscored assessment you will require an LS/RNR Interview Guide, an LS/RNR QuikScore Form, and the LS/RNR ColorPlot™ Profile Form.

SCALES

- Criminal History
- Education/Employment
- Family/Marital
- Leisure/Recreation
- Companions
- Alcohol/Drug Problems
- Procriminal Attitude/Orientation
- Antisocial Pattern

WHEN TO USE

The LS/RNR should be used when a public safety organization is assessing risk in an offender but already has a case management process in place.

NORMATIVE DATA

The LS/RNR normative sample consisted of 157,947 North American youth and adult offenders—60,156 American adult and youth offenders from 10 jurisdictions, and 97,791 Canadian community and institutionalized adult and youth offenders.

For an online version of LS/RNR, see LS/CMI (page 12).
The LS/CMI™ combines risk assessment and case management in one convenient evidence-based system for probation officers, psychologists, and correctional workers. It assesses the rehabilitation needs of offenders, their risk of recidivism, and the most relevant factors related to supervision and programming requirements. It is gender-informed and focuses on offender strengths.

**KEY AREAS MEASURED**

**Full Level of Service/Case Management Inventory**
- Criminal History
- Education/Employment
- Family/Marital
- Companions
- Leisure/Recreation
- Alcohol/Drug Problem
- Antisocial Pattern
- Procriminal Attitude/orientation
- Barriers to Release
- Case Management Plan
- Progress Record
- Discharge Summary
- Prison Experience–Institutional Factors
- Specific Risk/Needs Factors
- Special Responsivity Considerations

**HOW TO USE THE ASSESSMENT**

The LS/CMI consists of 11 sections. Full LS/CMI administration materials include the LS/CMI Interview Guide, an Offender History Form, a QuikScore Form for recording responses, a Case Management Protocol, and a ColorPlot™ Profile Form.

**NORMATIVE DATA**

The LS/CMI normative sample consisted of 157,947 North American youth and adult offenders—60,156 American adult and youth offenders from 10 jurisdictions, and 97,791 Canadian community and institutionalized adult and youth offenders.
The LSI-R™, the most widely used and widely researched risk/need assessment in the world, is a quantitative survey of offender attributes and their situations relevant to level of supervision and treatment decisions. Suitable for individuals 16 years of age and older, the LSI-R helps predict parole outcome, success in correctional halfway houses, institutional misconducts, and recidivism.

The 54 items are based on legal requirements and include relevant factors needed for making decisions about risk/need and treatment. The LSI-R Manual explains the use of the LSI-R and summarizes research studies on its reliability and validity.

The LSI-R can be used by probation and parole officers and correctional workers at jails, detention facilities, and correctional halfway houses. It assists with the allocation of resources, helps to make decisions about probation and placement, makes appropriate security level classifications, and assesses treatment progress.

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B-Level Prices are subject to change

To learn about LSI-R On-Demand Training: visit GIFRinc.com/LSI-R

PROFESSIONAL RESOURCES

The Psychology of Criminal Conduct, 6th Edition
James Bonta, Ph.D. & Don Andrews, Ph.D.

The authors focus on understanding individual differences in criminal conduct and recognizing the importance of personal, interpersonal and community factors. What results is a truly interdisciplinary general personality and social psychology of criminal behavior that is open to a wide variety of factors that relate to individual differences—a perspective with both theoretical and practical significance that is reshaping correctional policy and practice.

PCC1R6 Softcover (2016, 470 pages) $95.00
The LSI-R:SV™ is a screening instrument commonly used in organizations where case loads are high. It is ideal to use in situations where it may not be feasible to complete an LSI-R™ or LS/CMI™ assessment for every offender. Research with the LSI-R:SV shows that it is predictive of a variety of outcomes that are important in offender management. Among probation samples, LSI-R:SV scores predicted violent recidivism and violations while under community supervision. Among incarcerated offenders, LSI-R:SV scores have predicted institutional misconduct. Results from the LSI-R:SV also indicate those offenders who may require a complete LSI-R or LS/CMI assessment.

**KEY AREAS MEASURED**
- Criminal History
- Education/Employment
- Family/Marital
- Companions
- Alcohol/Drug Problems
- Personal/Emotional
- Attitudes/Orientation

**HOW TO USE THE ASSESSMENT**

The LSI-R:SV consists of eight items that were selected from the LSI-R (page 13). Results provide a complete summary of dynamic risk areas that may require further assessment and possibly intervention. The LSI-R:SV is available in a handscored format. With the handscored format, you use an Interview Guide to complete the interview component and QuikScore™ Forms to record your ratings based on interview and file information.

**WHEN TO USE**

The LSI-R:SV should be used in preliminary classification to indicate offenders who require a complete risk and needs assessment such as the LSI-R or LS/J/CMI.
The Youth Level of Service/Case Management Inventory 2.0™ (YLS/CMI 2.0™) is a gender- and culturally-informed, strength-focused risk/needs tool that reliably and accurately classifies and predicts re-offending within male and female juvenile populations. Created for both genders, the YLS/CMI 2.0 includes new features to address the needs of a growing adolescent offender population.

- Large U.S. sample of over 12,000 youth with significant minority representation
- U.S. norms by gender and setting
- Guidelines that instruct users to consider gender-specific factors, as well as the importance of minor risk/need factors and non-criminogenic needs
- Assessment items that address gender- and culturally informed responsivity factors such as pregnancy and motherhood issues
- Opportunity to evaluate positive offender attributes so that strengths may be highlighted and built upon in service delivery
- Updated literature review
- An online system that includes automated, customized treatment planning and program/placement decisions

**SCALES**

- Prior and Current Offenses/Dispositions
- Family Circumstances/Parenting
- Education/Employment
- Peer Relations
- Substance Abuse
- Leisure/Recreation
- Personality/Behavior
- Attitudes/Orientation

**OTHER REPORTS**

Follow-Up Report is used to document major events for the offender such as reoffending or successful completion of treatment/supervision.

**REPORTS**

- Profile Report
- Comparative Report

**Benefits of Using the NEW LS/CMI 2.0 Assessment System**

- Highly configurable dashboards to help users better understand their organization
- Better manage caseloads and caseplans with full visibility into a user’s workload
- Ability to manage user access and seamlessly transfer clients from one user to another from one institution to another
- Access available through all web browsers or fully integrated into any case management system
- Real time risk calculator increases assessment transparency and the evaluator’s understanding of the assessment results

**ONLINE**

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**GIFRinc.com/YLS-CMI**
The Youth Level of Service/Case Management Inventory: Screening Research Version (YLS/CMI:SRV) is designed to provide an initial screening of risk and need levels in 12–18 year olds for purposes of determining the level and nature of interventions required by the youth.

This eight item online assessment is a screening version of the full length Youth Level of Service/Case Management Inventory 2.0 (YLS/CMI 2.0), which is a gender and cultural-informed, strength-focused risk/needs tool that reliably and accurately classifies and predicts re-offending within male/female juvenile populations. The YLS/CMI:SRV is successfully used in conjunction with the YLS/CMI 2.0 by many statewide organizations to assess youth for their risk to reoffend.

### KEY AREAS MEASURED
- History of delinquency/conduct disorders
- Current school or employment problems
- Antisocial peer associations
- Substance abuse problems
- Leisure/recreation problems
- Personality/behavior disorders
- Antisocial attitudes/values

### WHEN TO USE
The YLS/CMI:SRV is designed to provide an initial screening of risk and to indicate those who require a complete risk and needs assessment such as the YLS/CMI 2.0.

### ONLINE

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Discounted pricing available when ordering 500+ uses.

The YLS/CMI:SRV is not designed as the sole basis for decisions, but it can be an aid in the preliminary classification of the client. Additional information will be required for final decisions, and, with higher risk cases, an assessment with the full YLS/CMI 2.0 will be indicated.

### BENEFITS OF USING THE NEW LS/CMI 2.0 ASSESSMENT SYSTEM
- Highly configurable dashboards to help users better understand their organization
- Better manage caseloads and caseplans with full visibility into a user’s workload
- Ability to manage user access and seamlessly transfer clients from one user to another and from one institution to another
- Access available through all web browsers or fully integrated into any case management system
- Real time risk calculator increases assessment transparency and the evaluator’s understanding of the assessment results
- Accessible from a computer, Android, or iOS tablet

Prices are subject to change.

Discounted pricing available when ordering 500+ uses.
Designed for youth aged 5 to 19, the CAFAS® is the gold standard tool used by social workers for assessing a youth's day-to-day functioning and for tracking changes in functioning over time. It is designed to identify outcomes of disruptive behavior across a variety of settings. The CAFAS is backed by over 20 years of research supporting its validity and sensitivity to detecting change in behaviors. It is widely used to inform decisions about type and intensity of treatment, level of care, placement and need for referral. The CAFAS can be quickly completed by a practitioner based on information from routine evaluation providing a comprehensive and objective assessment focusing on observable behaviors.

FEATURES AND BENEFITS

- Correlate with actual intensity of treatment, involvement with juvenile justice, school related problems and child and family risk factors.
- Predict restrictiveness of care, total cost of all services received, number of bed days and number of days of service six and twelve months post-intake.
- Predict future contact with the law and poor school attendance.

KEY AREAS MEASURED

The CAFAS assesses functioning across 8 critical life subscales assessing the youth as well as two scales to assess caregiver functioning.

Youth: School, Home, Community, Behavior Towards Others, Moods, Self-harm, Substance Use, and Rational Thinking.

Caregiver: Material Needs and Social Support

The total score represents the total level of dysfunction and can be used to recommend intensity of treatment required. The individual subscale scores can be used to inform the focus of treatment and to monitor change in behavior over time.

HOW TO USE THE ASSESSMENT

For each subscale the rater reads through the items at each level, starting at the Severe level until they find a description of the youth. Once a description has been found, the youth is assigned the item's corresponding score for the subscale. After assigning the subscale score, the rater moves on to the next subscale.

WHEN TO USE

This assessment should be used to track a youth's level of functioning across various life domains such as in school or in the community.

SCIENTIFIC SUPPORT

The psychometric properties of the CAFAS have been investigated extensively with diverse samples of youth. Studies have found considerable evidence of the reliability and validity of the CAFAS. The measure has demonstrated both concurrent and predictive validity in studies operating in applied clinical settings.

### MANUALSES & ADDITIONAL MATERIALS

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<td>CAF103</td>
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<td>CAF105</td>
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<td>CAF117</td>
<td>Parent Goals for Their Family and Children (25/pkg)</td>
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Set-up and Maintenance fee will apply. Prices are subject to change.
Derived from the CAFAS®, the JIFF® is a hands-on, interactive, computerized interview that is self-administered by the client or caregiver(s). The interview covers 10 life domains, represented in the 10 subscales. The JIFF is used to rapidly assess youth, evaluate outcomes, and assist with service coordination. Juvenile justice, foster care, child protective services, schools, prevention programs, and residential settings currently use the JIFF. No training is required, making the JIFF the perfect tool for frontline staff.

KEY AREAS MEASURED

HOW TO USE THIS ASSESSMENT
The computer reads the JIFF interviewer questions aloud (in English or Spanish) at a 2nd to 3rd grade reading level. The interviewee selects the appropriate answer on the computer screen, or at times responds to open-ended questions. Usually the interview can be completed by the youth, caregiver or both in only 15 to 30 minutes.

REPORTS
Summary Report: Immediately view key JIFF results such as risk behaviors, mental health concerns, and the extent of a youth’s needs across the 10 domains.

Service Plan: The software automatically starts a service plan with suggested goals for the youth. Staff select the goals they would like included in the service plan and assign services and interventions.

WHEN TO USE
This self-report assessment should be used to gather information from both the youth and their caregiver about the youth’s current level of functioning across various life domains.
The SAQ™ is the first multidimensional, self-report questionnaire designed to predict violent and nonviolent offender recidivism among adult correctional and forensic populations. It assists with the assignment of these populations to appropriate treatment or correctional programs, as well as the assignment of institutional security levels. The SAQ can be used as a pre- and post-treatment measure to help you gauge progress and make decisions. With its short administration time, approximately 15 minutes, the SAQ is ideal for inmates with short sentences who would not normally warrant a lengthy assessment, or in combination with the LS/CMI™, for a multi-rater evaluation of risk.

KEY AREAS MEASURED
- Criminal Tendencies
- Antisocial Personality Problems
- Conduct Problems
- Criminal History
- Alcohol/Drug Abuse
- Antisocial Associates
- Anger

HOW TO USE THE ASSESSMENT
The SAQ is a handscored, self-report assessment. From a total score, risk is assessed as low, low-moderate, high-moderate, or high. Scale scores flag case management or program concerns, and responses to certain items indicate specific needs.

NORMATIVE DATA
The normative sample for the SAQ consisted of nearly 5,000 inmates from American and Canadian institutions.

COMPONENTS
The SAQ QuikScore form™ is completed by the respondent and includes the necessary elements for administering and scoring the instrument. The QuikScore forms contain special aids that make scoring of the test very quick and efficient, while minimizing potential for key errors.

Handscored

HANDSCORED
SAQ001  SAQ Complete Kit (SAQ Technical Manual and 25 QuikScore Forms)  $138.00
SAQ002  SAQ Technical Manual  $83.00
SAQ030  SAQ QuikScore Forms (25/pkg)  $66.00

To learn about SAQ On-Demand Training: visit GIFRinc.com/SAQ

PROFESSIONAL RESOURCES
Treating the Juvenile Offender
Edited by Robert D. Hegge, Ph.D., Nancy G. Guerra, Ed.D., & Paul Boxer, Ph.D.

This reference text is grounded in the latest knowledge on how antisocial and criminal behavior develop in youth and how it can be effectively treated. It reviews programs and discusses theoretical, empirical and practical issues in assessment and intervention. The book also provides best-practice recommendations for working with special populations such as violent offenders, those with mental health problems, and female offenders.

JUVE01  Hardcover  (2008, 294 pgs)  $46.00
The PCL–R™ 2nd Edition is the leading assessment of psychopathic personality disorder in adult forensic populations. It provides a systematic evaluation based on ironclad data and research. This second edition draws upon the large number of articles, reports, presentations, and dissertations that have appeared since the original version was published.

**KEY AREAS MEASURED**

**Factor 1: Interpersonal/Affective**
- Facet 1: Interpersonal
- Facet 2: Affective

**Factor 2: Lifestyle/Antisocial**
- Facet 3: Lifestyle
- Facet 4: Antisocial

**HOW TO USE THE ASSESSMENT**

The PCL–R 2nd Edition provides a total score for the overall assessment of psychopathy. This total score can be interpreted dimensionally in terms of degree of match to the prototypical psychopath, or it can be used categorically to make practical decisions. Ratings are made using a structured interview and a review of collateral information. Scoring is based on the degree to which an individual’s personality and behavior match the items in the Rating Booklet.

The PCL–R 2nd Edition is available in a handscored format. With the handscored format, you complete the assessment with an Interview Guide, a Rating Booklet, and a QuikScore™ Form.

**NORMATIVE DATA**

New large-sample descriptive and validation data are provided for use with male and female offenders, substance abusers, sex offenders, African-American offenders, and forensic psychiatric patients.

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Discounted pricing available when ordering 500+ uses.

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B-Level Prices are subject to change

**Benefits of Using the NEW PCL–R™ 2nd Ed. Assessment System**

- **Highly configurable dashboards** to help users better understand their organization
- **Better manage caseloads** with full visibility into a user’s workload
- **Ability to manage user access** and seamlessly transfer clients from one user to another and from one institution to another
- **Access available through all web browsers** or fully integrated into any case management system
- **Real time risk calculator** increases assessment transparency and the evaluator’s understanding of the assessment results
**PCL:SV™** HARE PSYCHOPATHY CHECKLIST: SCREENING VERSION™

Stephen D. Hart, Ph.D., David N. Cox, Ph.D., & Robert D. Hare, Ph.D.

The PCL:SV™ is an abbreviated version of the original PCL–R™ that takes approximately half the amount of time to administer. It is highly correlated with the PCL–R, which makes it an effective screening instrument for psychopathic personality disorder. It can be used with individuals from the general population, as well as individuals from forensic or psychiatric populations. It is a cost-effective way to determine whether or not a complete PCL–R assessment is necessary.

**KEY AREAS MEASURED**
- Interpersonal/Affective
- Social Deviance
- Impulsive Lifestyle
- Antisocial Behavior

**NORMATIVE DATA**
The normative sample for the PCL:SV consisted of 586 people, including male and female offenders, university students, and civil and forensic psychiatric patients.

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**SRP 4™** SELF-REPORT PSYCHOPATHY SCALE FOURTH EDITION

Delroy L. Paulhus, Ph.D., Craig S. Neumann, Ph.D., and Robert D. Hare, Ph.D., with Kevin M. Williams, Ph.D., and James F. Hemphill, Ph.D.

The SRP 4 is the only official self-report version of the world-renowned Psychopathy Checklist–Revised. It is based on a four-factor structure and three large reference samples. The SRP has good reliability and correlates well with PCL-R scores, criminal behavior, academic cheating, sexual promiscuity, peer ratings, aggression, vengeance, stalking and many facets of psychopathy.

**SCALES**
- Interpretive scales:
  - Interpersonal
  - Affective
  - Lifestyle
  - Antisocial

**FORMATS**
- SRP 4™ Full length (64 item QuikScore™)
  This form is used to record ratings for an individual across each of the 64 SRP 4 items. The QuikScore™ Form automatically transfers the rating to a scoring grid. Scores can then easily be obtained and converted into T-scores.

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Prices are subject to change

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**SRP 4: Short Form™ (29 item QuikScore™)**
The SRP 4 offers a Short Form for use in settings where the administration of the full assessment may not be feasible or possible. This form is used to record ratings from an individual for each of the 29 SRP 4 items. The QuikScore™ Form automatically transfers the ratings to a scoring grid. Scores can then easily be obtained and converted into T-scores.

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Prices are subject to change

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HARE PSYCHOPATHY CHECKLIST: SCREENING VERSION™

MHS.com/PCLSV

MHS.com/SRP4

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The P–SCAN™ gathers and organizes information about psychopathy and antisocial, violent, or criminal behavior in just 15 minutes. Suitable for individuals 13 years of age and older, the P–SCAN is a useful tool in instances when it is not possible to conduct a complete PCL–R™ 2nd Edition (see page 20) or PCL:SV™ assessment (see page 21); however, it does not provide a clinical diagnosis.

The P–SCAN is a 90-item checklist that refers to relatively specific behaviors and low-level inferences to help you form impressions and draw conclusions on the basis of your knowledge and experience. Items are scored on four key facets of psychopathy: Interpersonal, Affective, Lifestyle, and Anti-social. The complete kit includes Dr. Hare’s book, Without Conscience: The Disturbing World of the Psychopaths Among Us.

**KEY AREAS MEASURED**
- Interpersonal
- Affective
- Lifestyle
- Antisocial

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**Guidelines for a Psychopathy Treatment Program**

Stephen Wong, Ph.D. & Robert D. Hare, Ph.D.

The Guidelines for a Psychopathy Treatment Program focus on adult and adolescent psychopathic offenders. Rather than attempting to modify personality characteristics, the proposed treatment is a strategy of self-management that helps the participant develop a prosocial lifestyle, reducing the frequency and the extent of violent behavior.
Based on the widely used PCL–R™, the PCL:YV helps identify potential patterns of cheating, fighting, bullying, and other antisocial acts in adolescents. Early identification of these traits is critical to the development of these individuals as they move into adulthood. Results from the PCL:YV provide a strong basis for interventions and treatment.

**FEATURES AND BENEFITS**
- Can be used to help you understand the factors that contribute to the development of adult antisocial behavior and psychopathy
- Uses an expert-rater format that emphasizes the need for multidomain and multisource information
- Adapted from the Hare Psychopathy Checklist–Revised (PCL–R)
- Measures interpersonal, affective, and behavioral features related to a widely understood, traditional concept of psychopathy
- Yields dimensional scores for clinical purposes, but it can also be used to classify individuals into groups for research purposes

**NORMATIVE DATA**
The normative sample for the PCL:YV included 2,438 youth from North America and the United Kingdom. The sample includes institutionalized offenders; offenders on probation, in open custody, or arrested youth referred for outpatient evaluation; conduct-disordered youth; and youth from the general community.

**KEY AREAS MEASURED**
- Interpersonal
- Affective
- Behavior
- Antisocial

**HOW TO USE THE ASSESSMENT**
The PCL:YV is a clinician-rated instrument that uses a structured interview and collateral information to assess psychopathic traits in youth. The Interview Guide outlines questions for the structured interview. The clinician rates items on a scale of 0 to 2 (No, Maybe, and Yes) indicating whether the statement is true of the individual. Ratings should be made while reviewing the criteria provided in the PCL:YV Rating Booklet or the PCL:YV Technical Manual.
The JI-R is a personality classification system for adults and delinquent, conduct disordered youths. Suitable for males and females aged 8 years and older, the JI-R assists caseworkers, psychologists, counselors, and probation and parole officers assessing offenders’ unique personalities and behaviors. An easy-to-understand, true/false questionnaire, the JI-R provides valuable information about functioning across a variety of different areas. It has 11 personality scales that measure key traits and attitudes, and 9 subtype scales that further determine personal characteristics. Results provide insight into potential causes of behavior, and are particularly useful when differentiating between social maladjustment and emotional disturbance.

**KEY AREAS MEASURED**
- Personality: Social Maladjustment, Value Orientation, Immaturity, Autism, Alienation, Manifest Aggression, Withdrawal-Depression, Social Anxiety, Repression, and Denial
- Subtypes: Undersocialized, Active/Unsocialized, Aggressive (AA); Undersocialized, Passive/Unsocialized, Passive (AP); Conformist/Immature Conformist (CF); Group-Oriented/Cultural Conformist (CFC); Pragmatist/Manipulator (MP); Autonomy-Oriented/Neurotic, Acting Out (NA); Introspective/Neurotic, Anxious (NX); Inhibited/Situational Emotional Reaction (SE) Adaptive/Cultural Identifier (CI)
- Oppositional Defiant Disorder
- Conduct Disorder
- Random Response (validity)
- Lie (validity)

**NORMATIVE DATA**
The JI-R normative sample included 4,380 individuals from across North America—3,421 were nondelinquent and 959 were delinquent.

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Contact MHS for information about Spanish JI–R materials. Prices are subject to change.

**KEY AREAS MEASURED**
- Personality: Social Maladjustment, Value Orientation, Immaturity, Autism, Alienation, Manifest Aggression, Withdrawal-Depression, Social Anxiety, Repression, and Denial
- Subtypes: Undersocialized, Active/Unsocialized, Aggressive (AA); Undersocialized, Passive/Unsocialized, Passive (AP); Conformist/Immature Conformist (CF); Group-Oriented/Cultural Conformist (CFC); Pragmatist/Manipulator (MP); Autonomy-Oriented/Neurotic, Acting Out (NA); Introspective/Neurotic, Anxious (NX); Inhibited/Situational EmotionalReaction (SE) Adaptive/Cultural Identifier (CI)
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Contact MHS for information about Spanish JI–R materials. Prices are subject to change.
Studies show that ADHD is found in correctional populations at a relatively high rate and that adults with ADHD are at an especially high risk of recidivism. The CAARS™ helps to detect ADHD symptoms promptly so that you can develop the best rehabilitation and release plan. This supplement discusses the role of ADHD in the context of recidivism, and includes data on correctional populations.

KEY AREAS MEASURED

- Factor-Derived Subscales: Inattention/Memory Problems, Hyperactivity/Restlessness, Impulsivity/Emotional Lability, and Problems with Self-Concept
- DSM-IV™ ADHD Symptom Subscales: Inattentive Symptoms, Total ADHD Symptoms, and Hyperactive-Impulsive Symptoms
- Inconsistency Index (validity)
- ADHD Index

COMPONENTS

The CAARS provide a multiple-informant assessment with self-report (CAARS–S) and observer ratings (CAARS–O). Both address the same behaviors and contain identical scales, subscales, and indices. Long, short, and screening versions are available for each. With the handscored format, raw scores and T-scores are produced for each scale, subscale, and index, and are then plotted on Profile Forms. The online Profile Reports and Interpretive Reports can be instantly generated.

Long Versions
The long self-report (CAARS–S:L) and observer (CAARS–O:L) forms provide scores for all subscales, the ADHD index, and Inconsistency Index. The long versions provide the most detailed information upon which to base treatment plans.

Short Versions
The short self-report (CAARS–S:S) and observer (CAARS–O:S) forms examine and highlight key dimensions, making them ideal when time with a respondent is limited. The short versions are also often used during treatment to track progress over time. They include abbreviated versions of the factor-derived subscales that are in the long versions. The ADHD Index and the Inconsistency Index are included as well.

Screening Versions
The screening versions of the self-report (CAARS–S:SV) and observer (CAARS–O:SV) forms focus on DSM-IV™ criteria for quick ADHD identification. They include the DSM-IV™ ADHD subscales and the ADHD Index to screen for the possibility of ADHD.

REPORTS

NORMATIVE DATA

The normative sample for the self-report forms included 1,026 nonclinical adults, while the normative sample for the observer forms included spouses, other family members, or friends of 943 nonclinical adults. Separate norms are available by gender and age-group intervals (18–29, 30–39, 40–49, and 50+).
The PDS™ is a self-report instrument that identifies individuals who, when responding to assessments and rating scales, distort their responses. It is designed to be administered concurrently with other instruments to indicate the validity of the results of the other instruments. It contains 40 items that use contemporary, gender-neutral language.

The PDS is designed to assess socially desirable responding both as a response set and a response style. The PDS has extensive empirical confirmation of reliability and validity, and is appropriate for both clinical and nonclinical samples. The measure has been used successfully to identify individuals who might have distorted their responses when completing other clinical and/or personality diagnostic instruments. The PDS may also be used in educational and human resource settings and can provide an index for comparing the power of different administration conditions to elicit desirable responding. The scales are also useful in instrument development and evaluation.

**KEY AREAS MEASURED**

In contrast to a wide variety of measures that have been used to index socially desirable responding, the PDS is a multidimensional scale. Based on substantial theoretical and empirical analyses, the PDS has two subscales:

- **Self-Deceptive Enhancement (SDE):** the tendency to give honest but inflated self-descriptions
- **Impression Management (IM):** the tendency to give inflated self-descriptions because of contextual factors

These two subscales allow the PDS to capture both principal forms of socially desirable responding. This approach accepts that respondents may display only one kind of desirable responding, or neither, or both.

**NORMATIVE DATA**

The normative sample for the PDS consisted of 1,457 individuals—441 from the general North American population, 289 college students, 603 prison entrants, and 124 military recruits.

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Prices are subject to change

**REPORTS**

Online scoring instantly generates PDS Reports that provide statistical, textual, and graphical interpretations of a respondent’s results.
The SARA™ helps criminal justice professionals predict the likelihood of domestic violence by screening for risk factors in individuals who are suspected of, or who are being treated for, spousal abuse. It is a quality control checklist that determines the extent to which you have assessed risk factors of crucial predictive importance. The SARA helps you determine the degree to which an individual poses a risk to his or her spouse, children, another family member, or any other person involved.

The instrument can be used by members of various boards or tribunals (e.g., parole and review boards, professional ethics committees, etc.), lawyers, victims’ rights advocates, and also prisoners’ rights advocates.

**FEATURES AND BENEFITS**

- Determine the extent to which risk factors of crucial predictive importance have been assessed with a quality control checklist
- Helps determine the degree to which an individual poses a risk to his or her spouse, children, another family member, or any other person involved
- Can be used by members of various boards or tribunals (e.g., parole and review boards, professional ethics committees, etc.), lawyers, victims’ rights advocates, and also prisoners’ rights advocates

**SCALES**

- Spousal Assault History
- Criminal History
- Alleged/Most Recent Offense
- Psychosocial Adjustment

**HOW TO USE THE ASSESSMENT**

The SARA is an interview-based, paper-and-pencil assessment.

The assessment is based on:

- Interviews with the accused and the victim(s)
- Standardized measures of physical and emotional abuse
- Standardized measures of drug and alcohol abuse
- Review of collateral records, including police reports, victim statements, and criminal records
- Other psychological assessments as required or as available

**FORMATS**

**SARA Checklist of Information Sources**

The SARA Checklist of Information Sources is a checklist designed to ensure that all possible information resources have been tapped.

**SARA QuikScore™ Form**

The clinician-completed QuikScore™ form is a self-scoring form designed to screen for risk factors of spousal or family-related assault.

**NORMATIVE DATA**

Norms were established using data collected from 2,309 adult male offenders. This sample included 1,671 probationers, as well as 638 inmates serving custodial sentences of 2 years or longer for various offenses.
The APSD™ is an instrument that detects antisocial characteristics and processes in young children (6 to 13 years) so that preventative measures can be taken at an early age. Early identification and intervention can prevent these tendencies from leading to crime and other destructive behaviors.

**KEY AREAS MEASURED**
- Callous/Unemotional
- Narcissism
- Impulsivity

**HOW TO USE THE ASSESSMENT**
Parents and teachers rate the child on a dimensional scale that probes interpersonal, affective, and behavioral traits. The normative-based APSD—Combined form (APSD–C) allows you to integrate and reconcile responses from parents and teachers after they have completed the APSD—Parent (APSD–P) and APSD—Teacher (APSD–T) Forms. Each form takes approximately 10 minutes to complete.

**HANDSCORED**
- APS03 APSD Technical Manual $90.00
- APS04 APSD–P QuikScore Forms (25/pkg) $71.00
- APS06 APSD–C QuikScore Forms (25/pkg) $71.00

**ONLINE, SCORING ORGANIZER**
- ADS600 ADS Online Interpretive Report Kit (ADS Manual and 25 Interpretive Reports) $215.00
- ADS610 ADS Online Interpretive Reports $7.25 ea.
- ADS620 ADS Online Profile Reports $6.25 ea.

**ONLINE, SCORING ORGANIZER**
- ADS01 ADS Complete Kit (ADS Technical Manual, 10 ADS Item Booklets, 25 ADS QuikScore Forms, and 25 ADS:S QuikScore Forms) $238.00
- ADS04 ADS Technical Manual $95.00
- ADS100 ADS Item Booklets (reusable; 10/pkg) $36.00
- ADS070 ADS:S QuikScore Forms (25/pkg) $61.00

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- APS06 APSD–C QuikScore Forms (25/pkg) $71.00

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- ADS04 ADS Technical Manual $95.00
- ADS100 ADS Item Booklets (reusable; 10/pkg) $36.00
- ADS070 ADS:S QuikScore Forms (25/pkg) $61.00

The ADS™ measures clinically dysfunctional anger by assessing anger as an independent problem, rather than as a secondary symptom of another issue. It uses an Anger-In/Anger-Out model—which not only examines the physical aggression resulting from anger, but also the cognitions associated with anger that may be a part of affective aggression. ADS results provide a strong basis for developing appropriate intervention and treatment plans.

**KEY AREAS MEASURED**
- Provocations Domain
- Arousal Domain
- Cognitions Domain
- Motives Domain
- Behaviors Domain

**NORMATIVE DATA**
The ADS and ADS:S normative sample included more than 1,400 people between the ages of 18 and 76 who were recruited through educational and work environments, as well as through the Internet. The clinical sample included aggressive drivers, general outpatients, individuals seeking mental health services for anger problems, and individuals who were referred to a court intervention program.

**ASSESSING ANGER IN YOUTH?**
Try the Anger Regulation and Expression Scale (ARES) on page 29.
The ARES is a comprehensive, self-report assessment of the expression and regulation of anger in youth. Derived from the Anger Disorder Scale (ADS™; DiGiuseppe & Tafrate, 2004; page 28), the ARES has been designed specifically for children and adolescents aged 10 to 17 years.

**FEATURES AND BENEFITS**

- Assesses tendencies towards inward and outward expressions of anger, along with the range and duration of anger experiences
- Based on more features and expressions of anger than any other measure
- Offers treatment and intervention suggestions based on respondent’s ARES scores
- Excellent reliability and validity
- Easy administration, scoring, and report interpretation

**KEY AREAS MEASURED**

**COMPONENTS**

The ARES has both a full-length and a short version. A decision concerning which version to administer will largely depend on the assessor’s needs and the rater’s availability.

**ARES Full-Length**

Consists of 75 items that yield 25 scores that assess aspects of anger that contribute to poor functioning and maladjustment (i.e., the Total Score, the Cluster Scores, and the Scale and Subscale scores). This comprehensive version is recommended for use when a thorough evaluation of behaviors is desired.

**ARES Short**

Contains a subset of 17 items from the full-length form, and provides information across three major domains of anger (i.e. Internalizing Anger, Externalizing Anger, and Extent of Anger). This form can be used as a screener and is also suitable for monitoring the impact of a treatment or intervention program.

**Scales and Subscales**

Internalizing Anger Scales:
- Arousal
- Physical Arousal
- Cognitive Arousal
- Rejection
- Anger-In
- Bitterness
- Rejection
- Suspiciousness

Externalizing Anger Scales:
- Overt Aggression/Expression
- Physical Aggression
- Verbal Aggression
- Covert Aggression
- Revenge
- Subversion
- Relational Aggression
- Passive Aggression
- Bullying
- Impulsivity

Extent of Anger Scales:
- Scope of Triggers
- Problem Duration
- Episode Duration

**Reading Level**

Full-Length: 5.5 grade
Short: 5.2 grade

**Complementary Assessments**

ADS, page 28
CEFI, page 34
CDI 2, page 23
JI-R, page 24

**Format(s)**

Online (administration and scoring), page 3
Software (scoring only), page 3
Paper-and-Pencil (administration only), page 3

**Age**

10-17

**Number of Items**

ARES: 75
ARES Short: 17

**Administration Type**

Self-Report

**Administration Time**

ARES: 15 minutes
ARES Short: 5 minutes

**Qualification Level**

B-level

**Prices are subject to change**
Data Insights Program

As a public safety agency you have an overwhelming amount of data on the offenders you manage and your staff. How can you use this data to better inform decisions in your organization? Let our team of experienced scientists work with you to customize a data insights program that will help inform key decisions. This program was designed to validate the assessments you are using, help identify organizational challenges and opportunities, and most importantly provide you with an action plan to overcome these obstacles.

FEATURES AND BENEFITS

• Identify important trends in your data
• Better allocate funds to the specific needs of your organization
• Improve the rehabilitation of your clients
• Enhance the validity, reliability, and legal defensibility of practices and procedures
• Compare your organization to national standards
• Evaluate the effectiveness of the services and/or treatments provided to your clients

COMPONENTS

A customized Data Insights Report that is tailored to your organization including:

• Local validation study
• Sophisticated data visualizations
• Institution-specific analytics
• Data informed action plan

DATA

Any past and current offender and staff data can be analyzed including:

• Assessment and case management plan records
• Offender demographics
• Follow up data (e.g., recidivism, rearrest, technical violations, institutional infractions, etc.)
• Employee Health Record (EHR) data
• Treatment and services data

Sign up for a FREE Consultation
SASSI-4™ SUBSTANCE ABUSE SUBTLE SCREENING INVENTORY

SASSI Institute

The SASSI-4 is a self-report screening instrument for substance dependency. Objective decision rules classify individuals as chemically dependent or as not chemically dependent. It is especially effective in identifying early-stage chemically dependent individuals who are either in denial or who are trying to conceal their chemical dependency. In addition to being used as a screening instrument, the SASSI-4 also provides clinical insights into a respondent's defensiveness, as well as other characteristics.

NEW TO THE SASSI-4:

• A brief new scale, Prescription Drug (Rx), was added to accurately identify individuals likely to be abusing prescription medications
• Validated to screen for multiple levels of Substance Use Disorder (SUD) severity: The SASSI-4 screens for SUD along the full DSM-5 continuum of severity: mild, moderate, and severe SUD
• Distinguishes likely Substance Use Disorder from other psychological disorders: The SASSI-4 can accurately identify the presence and the absence of SUD, even when other psychological symptoms are present
• Enhanced SUD identification through subtle items that have been added to the SASSI-4 SAT scale
• Additional face valid items to identify symptoms represented in the DSM-5 diagnostic criteria

KEY AREAS MEASURED

• Face Valid Alcohol
• Face Valid Other Drug
• Symptoms
• Obvious Attributes
• Subtle Attributes
• Defensiveness
• Correctional
• Family vs. Control Subjects
• Random Answering Pattern
• Supplemental Addiction Measure

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<td>SASSI-4 Small Handscoring Starter Kit (SASSI-4 Manual, SASSI-4 User Guide/Manual, scoring key, and 25 questionnaire forms and profiles) $150.00</td>
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B-Level Prices are subject to change
The M-PULSE™ Inventory is an effective pre-conditional screening instrument designed for law enforcement officer selection. The inventory can be used either pre-offer to identify a candidate’s liability potential, or post-offer as part of a total assessment battery that includes historical, interview, and observational data.

**FEATURES AND BENEFITS**
- Save Time
- Fast, easy, and accurate administration with automated scoring
- Improve Efficiency and Accuracy
- When items are absent, prompts appear to ensure information is not missed
- Assess From Anywhere
- View reports with an online connection
- Work With Ease
- User-friendly interface for administrators and respondents

**HOW TO USE THE ASSESSMENT**
Results are produced for 18 liability scales which help predict officer misconduct, and 16 empirical scales that measure attitudes, values and beliefs. The M-PULSE Inventory also includes two validity scales—Impression Management and Test Attitude that when elevated indicate if a candidate is trying to make a good impression or has a negative attitude towards the testing process.

**KEY AREAS MEASURED**
- Interpersonal Difficulties
- Chemical Abuse/Dependency
- Off-Duty Misconduct
- Property Damage
- Misuse of Vehicle
- Motor Vehicle Accidents
- Discharge of Weapon
- Inappropriate Use of Weapon
- Unprofessional Conduct
- Excessive Force
- Racially Offensive Conduct
- Lawsuit Potential
- Criminal Conduct
- Potential for Resignation
- Potential for Termination
- Sexually Offensive Conduct
- Potential for Reprimand/Suspension
- Procedural and Conduct Mistakes

**OTHER REPORTS**
**Follow-Up Reports**
Provide an opportunity to track officers’ conduct since their critical M-PULSE Inventory assessments were completed.

**ONLINE**
- **MPUL04** M-PULSE Inventory Online Profile Reports $26.00

**HANDSCORED**
- **MPUL01** M-PULSE Inventory Technical Manual $78.00
- **MPUL02** M-PULSE Inventory Item Booklets (10/pkg) $61.00
- **MPUL05** M-PULSE Inventory Data Entry Sheets (50/pkg) $41.00

Set-up and Maintenance fee will apply. Prices are subject to change.
A comprehensive multi-rater assessment of depressive symptoms in youth aged 7 to 17 years. The measure quantifies the presence and severity of depressive symptomatology in order to support early identification, diagnosis, and treatment planning and monitoring.

**FEATURES AND BENEFITS**

- Items that target core aspects of childhood depression
- Multi-rater assessment with parent, teacher, and self-report ratings provide a comprehensive evaluation
- Self-Report form includes Emotional and Functional Problem scales to mirror Teacher and Parent forms, creating more ways to compare scores across informants
- Normative data is representative of the U.S. population
- Strong psychometric properties
- CDI and CDI 2 Raw Score Conversion Chart

**COMPONENTS**

**CDI 2: Self-Report.** Completed by the youth, this form contains age-appropriate manifestations of depression symptoms. It is recommended for use in initial evaluation and is appropriate when there is a need for a comprehensive assessment of a child’s depressive symptoms.

**CDI 2: Self-Report Short.** Completed by the youth, this form contains key items from the CDI 2: Self-Report form. It is ideal for measuring changes in symptom severity and monitoring treatment progress. It is also useful as a screening instrument.

**CDI 2: Parent.** Completed by parents or primary caregivers, this form contains items suitably rephrased from the CDI 2: Self-Report form. Its purpose is to gather information about the child’s behavior at home and in family situations.

**CDI 2: Teacher.** Completed by teachers, this form contains items suitably rephrased from the CDI 2: Self-Report form. Its purpose is to gather information about the child’s behavior in academic and social situations at school.

**KEY AREAS MEASURED**

- Emotional Problems (including Negative Mood/Physical Symptoms and Negative Self-Esteem)
- Functional Problems (including Interpersonal Problems and Ineffectiveness)

**ONLINE**

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<td>CD2006</td>
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<td>CD2010</td>
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**SCORING SOFTWARE**

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**HANDBSCORED**

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**MHS CE/CPD TRAINING PROGRAM**

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<tr>
<td>CD2002</td>
<td>MHS CE/CPD Training Program (CDI 2 CE Online Workshop)</td>
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Prices are subject to change.
The Comprehensive Executive Function Inventory™ (CEFI®) is a comprehensive behavior rating scale of executive function strengths and weaknesses in youth aged 5 to 18 years. Executive function is important for problem solving and reasoning. Problems with executive function can often make simple tasks challenging. Assessing a youth’s executive function is an important step to formulate a diagnosis and treatment plan.

- **PROVIDE SCORES YOU CAN TRUST**
  The most representative nationally standardized behavior rating scale of executive function. The large scale normative sample is representative of the U.S. population on a number of key demographic variables including U.S. Census region.

- **MEASURE STRENGTHS AND WEAKNESSES IN EXECUTIVE FUNCTION SCORES**
  across nine CEFI Scales. A comprehensive evaluation of executive function behaviors.

- **IMPLEMENT INTERVENTION STRATEGIES**
  When scores on the CEFI Scales are below average, intervention strategies are provided within the Interpretive Report.

- **FEEL CONFIDENT WITH ACCURATE RESULTS**
  Multi-rater reports present an expansive view of the youth’s behavior.

- **USE IN A VARIETY OF SETTINGS**
  Diagnostic evaluations, planning & monitoring for intervention programs, and for use in research.

**EXECUTIVE FUNCTION FULL SCALE**

- **Attention**
  Measures how well a youth can avoid distractions, concentrate on tasks, and sustain attention.

- **Inhibitory Control**
  Reflects a youth’s control over behavior or impulses.

- **Planning**
  Reflects how well a youth develops and implements strategies to accomplish tasks.

- **Emotion Regulation**
  Measures a youth’s control and management of emotions.

- **Initiation**
  Describes a youth’s ability to begin tasks or projects without being prompted.

- **Self-Monitoring**
  Describes a youth’s self-evaluation of his/her performance or behavior.

- **Flexibility**
  Describes how well a youth can adapt to circumstances, including problem solving ability.

- **Organization**
  Describes how well a youth manages personal effects, work, or multiple tasks.

- **Working Memory**
  Reflects how well a child/youth can keep information in mind that is important for knowing what to do and how to do it, including remembering important things, instructions, & steps.

NORMATIVE DATA
Providing scores you can depend on, the CEFI is the most representative nationally standardized behavior rating scale of executive function. The large scale normative sample was stratified to match the U.S. Census on a number of key demographic variables including region, race/ethnicity, and parental education level. The proportion of the demographic variables in the normative samples fell within 1% of Census target at each year of age. Data from males and females were collected for each form resulting in 1,400 rated youth for the parent and teacher normative samples and 700 youth for the self-report. Additionally, the normative samples included ratings of children who had clinical diagnoses, or were eligible to receive special educational services according to IDEA criteria.

REPORTS
Interpretive Report
Progress Report
Comparative Report

MANUAL
CEF000 CEFI Manual $102.00

LIFESPAN EXECUTIVE FUNCTION SOLUTIONS

MHS CE/CPD TRAINING PROGRAM
CEF01 CEFI Online Manual Quiz (3 CE Credits) $45.00
CEF02 CEFI Online Workshop (15 CE/CPD Credits) $25.00

ONLINE
CEF001 CEFI Complete Online Kit (Manual & 25 CEFI Self-Report/Parent/Teacher Online Forms) $385.00
CEF003 CEFI (5-18 Years) Parent Online Form $4.25 ea.
CEF004 CEFI (5-18 Years) Teacher Online Form $4.25 ea.
CEF002 CEFI (12-18 Years) Self-Report Online Form $4.25 ea.
Spanish CEFI Complete Online Kit (Manual & 25 Spanish CEFI Self-Report/Parent/Teacher Online Forms) $385.00
CEF017 Spanish CEFI (5-18 Years) Parent Online Form $4.25 ea.
CEF018 Spanish CEFI (5-18 Years) Teacher Online Form $4.25 ea.
Spanish CEFI (12-18 Years) Self-Report Online Form $4.25 ea.

SOFTWARE
CEF005 CEFI Complete Scoring Software Kit (Manual & 25 CEFI Self-Report/Parent/Teacher Response Forms) $659.50
CEF006 CEFI Software Scoring Program (USB Key) $357.00
CEF007 CEFI Software Scoring Program (Installation Only) $357.00
CEF009 CEFI (5-18 Years) Parent Response Forms (25 pkg) $73.50
CEF010 CEFI (5-18 Years) Teacher Response Forms (25 pkg) $73.50
CEF008 CEFI (12-18 Years) Self-Report Response Forms (25 pkg) $73.50
Spanish CEFI Complete Scoring Software Kit (Manual, CEFI Scoring Software Program (USB Key) & 25 Spanish CEFI Self-Report/Parent/Teacher Response Forms) $644.50
CEF021 Spanish CEFI (5-18 Years) Parent Response Forms (25 pkg) $73.50
CEF022 Spanish CEFI (5-18 Years) Teacher Response Forms (25 pkg) $73.50
Spanish CEFI (12-18 Years) Self-Report Response Forms (25 pkg) $73.50

HANDSCORED
CEF01 CEFI Complete Handscored Kit (Manual & 25 CEFI Self-Report/Parent/Teacher Quikscore Forms) $297.00
CEF013 CEFI (5-18 Years) Parent Quikscore Forms (25 pkg) $72.00
CEF014 CEFI (5-18 Years) Teacher Quikscore Forms (25 pkg) $72.00
CEF012 CEFI (12-18 Years) Self-Report Quikscore Forms (25 pkg) $72.00
CEF023 CEFI (12-18 Years) Self-Report Quikscore Forms (25 pkg) $297.00
Spanish CEFI Complete Handscored Kit (Manual & 25 Spanish CEFI Self-Report/Parent/Teacher Quikscore Forms) $297.00
CEF025 Spanish CEFI (5-18 Years) Parent Quikscore Forms (25 pkg) $72.00
CEF026 Spanish CEFI (5-18 Years) Teacher Quikscore Forms (25 pkg) $72.00
Spanish CEFI (12-18 Years) Self-Report Quikscore Forms (25 pkg) $72.00

ASSESSING EXECUTIVE FUNCTION IN ADULTS?
Try the Comprehensive Executive Function Inventory Adult (CEFI Adult) on page 36
The Comprehensive Executive Function Inventory Adult (CEFI Adult™) is a comprehensive assessment of executive function strengths and weaknesses in adults aged 18 years and older. Intended to be used professionals in clinical, educational, and research settings, the CEFI Adult is an effective and reliable tool for evaluating executive function to guide diagnosis, intervention, and treatment planning as well as to evaluate the success of the intervention program.

**WHY MEASURE EXECUTIVE FUNCTION?**

Executive function skills are important for problem solving, reasoning, and adaptive behavior. Impairment in executive function can often make simple tasks problematic. The CEFI Adult helps highlight an adult’s strengths and weaknesses in executive function and can be used during the assessment and diagnostic process as one component of a comprehensive assessment battery.

**FEATURES AND BENEFITS**

- Identifies executive function strengths as well as weaknesses
- Easy to understand reports with clear visuals and interpretations
- Guides diagnosis, intervention, and treatment planning as well as evaluating the success of an intervention program
- Scores you can trust with the most representative nationally standardized behavior rating scale of executive function in adults

**KEY AREAS MEASURED**

In addition to a Full Scale score, calculated by adding responses to 72 items, the CEFI Adult utilizes 9 scales that focus on different areas of executive function and pinpoint targets for intervention.

**EXECUTIVE FUNCTION FULL SCALE**

<table>
<thead>
<tr>
<th>Area</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attention</td>
<td>Measures how well an adult can avoid distractions, concentrate on tasks, and sustain attention</td>
</tr>
<tr>
<td>Inhibitory Control</td>
<td>Reflects an adult’s control over behavior or impulses</td>
</tr>
<tr>
<td>Planning</td>
<td>Reflects how well an adult develops and implements strategies to accomplish tasks</td>
</tr>
<tr>
<td>Emotion Regulation</td>
<td>Measures an adult’s control and management of emotions</td>
</tr>
<tr>
<td>Initiation</td>
<td>Describes an adult’s ability to begin tasks or projects without being prompted</td>
</tr>
<tr>
<td>Self-Monitoring</td>
<td>Describes an adult’s self-evaluation of his/her performance or behavior</td>
</tr>
<tr>
<td>Flexibility</td>
<td>Describes how well an adult can adapt to circumstances, including problem solving ability</td>
</tr>
<tr>
<td>Organization</td>
<td>Describes how well an adult manages personal effects, work, or multiple tasks</td>
</tr>
<tr>
<td>Working Memory</td>
<td>Reflects how well an adult can keep information in mind that is important for knowing what to do and how to do it, including remembering important things, instructions, &amp; steps</td>
</tr>
</tbody>
</table>
NORMATIVE DATA
The CEFI Adult is standardized on a nationally representative sample stratified according to U.S. Census data for race/ethnicity, education level, and region. The CEFI Adult is the most representative nationally-standardized behavior rating scale of executive function currently available. Reliability and validity data indicate strong psychometric qualities.

HOW TO USE THE ASSESSMENT
With 80 items on a 6-point Likert-type scale, the CEFI Adult offers a multi-rater perspective of an individual’s executive function, with Self-Report and Observer forms. The CEFI Adult can be administered and scored online or by hand (QuikScore forms).

REPORTS
Generate up to three user-friendly reports using the MHS Scoring Software or the MHS Online Assessment Center+.

CONTINUING EDUCATION
Visit MHS.com/Learn to see how you can earn APA CE/NASP CPD credits.

ASSESSING EXECUTIVE FUNCTION IN CHILDREN?
Try the Comprehensive Executive Function Inventory (CEFI) on page 34

ONLINE

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<td>CEFA02</td>
<td>CEFI Adult Complete Online Kit (Manual &amp; 25 Self Report)</td>
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<td></td>
<td>CEFI Adult Self Report and Observer Online Forms</td>
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<td>$4.00 ea.</td>
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<td>CEFA04</td>
<td>CEFI Adult Observer Online Form</td>
<td>$4.00 ea.</td>
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<td>CEFA08</td>
<td>Spanish CEFI Adult Complete Online Kit (Manual &amp; 25 Self Report/Observer Online Forms)</td>
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MHS CE/CPD TRAINING PROGRAM

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LIFESPAN EXECUTIVE FUNCTION SOLUTIONS

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<td>CEFI and CEFI Adult Bundle - Intro Special Online Kit</td>
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ASSESSING EXECUTIVE FUNCTION IN CHILDREN?

Try the Comprehensive Executive Function Inventory (CEFI) on page 34

PROFESSIONAL RESOURCES

Special Offer!
Receive a FREE copy of Dr. Goldstein and Dr. Naglieri’s “Handbook of Executive Functioning” ($119 value) with purchase of any CEFI Adult Kit or Lifespan Executive Function Bundle.*

*Go to mhs.com/CEFIAdult for more details or contact your MHS consultant

Available for a limited time while supplies last.
The Conners Continuous Performance Test Third Edition™ (Conners CPT 3™) measures attention-related problems in individuals aged eight years and older. By indexing the respondent’s performance in areas of inattentiveness, impulsivity, sustained attention, and vigilance, the Conners CPT 3 can aid in the assessment of Attention-Deficit/Hyperactive Disorder (ADHD) and other neurological conditions related to attention. The Conners CPT 3 provides objective information about an individual’s performance in attention tasks, complementing information obtained from rating scales such as the CAARS.

**FEATURES AND BENEFITS**
- Updated normative data representative of the United States population
- Rigorously tested on a variety of computer models and operating systems to ensure consistency across platforms
- Improved test sensitivity for impulsivity problems: percentage of non-targets (X) in the paradigm increased from 10% to 20%
- Enhanced look and feel of the program designed to reduce glare and reflection
- Updated dimensions of attention measured include Inattentiveness, Impulsivity, Vigilance, and Sustained Attention
- New concise clinical likelihood statements based on T-scores

**HOW IT WORKS**
The Conners CPT 3™ is a task-oriented, computerized assessment of attention-related problems in individuals aged 8 years and older. During the 14-minute, 360-trial administration, respondents are required to respond when any letter, except “X”, appears. By indexing the respondent’s performance in areas of inattentiveness, impulsivity, sustained attention, and vigilance, the Conners CPT 3 can be a useful adjunct to the process of diagnosing attention-deficit/hyperactivity disorder (ADHD), as well as other psychological and neurological conditions related to attention.

**COMPREHENSIVE DIMENSIONS OF ATTENTION**
New scores and scoring algorithms have been developed to help assessors pinpoint the exact nature of the respondent’s attention problems. The Conners CPT 3 uses both standardized and raw scores to determine not only the respondent’s performance overall but also in four different aspects of attention: Inattentiveness, Impulsivity, Sustained Attention, and Vigilance.

**THE MOST REPRESENTATIVE CPT NORMATIVE SAMPLES COLLECTED**
The updated normative sample consists of 1,400 cases and is representative of the United States (U.S.) population in terms of key demographic variables such as gender, race, geographical region, and (parental) education level.

**CONNERS CPT 3 Continuing Education Online Manual Quiz**
This user-friendly online tool allows you to satisfy your CE Requirements. Based on the assessment manual, users are asked to study the manual, then complete an online questionnaire. A score is calculated, and with a passing grade a PDF certificate of completion is generated and saved which can be printed or emailed. Submit the certificate to the American Psychological Association as required for CE credit.

**CONNERS CPT 3, CONNERS CATA and CONNERS K-CPT 2 Online Workshop**
Simply view the pre-recorded workshop video, then successfully complete the questionnaire and a short feedback survey to receive your certificate of completion for either APA CE or NASP CPD credits.

Visit MHS.com/Learn to see how you can earn APA CE/NASP CPD credits
HOW IT WORKS

The Conners CATA® assesses auditory processing and attention-related problems in individuals aged 8 years and older. During the 14-minute, 200-trial administration, respondents are presented with high-tone sounds that are either preceded by a low-tone warning sound (warned trials) or played alone (unwarned trials). Respondents are instructed to respond only to high-tone sounds on warned trials, and to ignore those on unwarned trials. By indexing the respondent’s performance in areas of inattentiveness, impulsivity, sustained attention, auditory laterality, and auditory mobility, the Conners CATA® can be a useful adjunct to the process of diagnosing attention-deficit/hyperactivity disorder (ADHD) and other neurological and psychological conditions related to auditory attention.

COMPREHENSIVE DIMENSIONS OF ATTENTION

The scores and scoring algorithms help assessors pinpoint the exact nature of the respondent’s attention problems. The Conners CATA® uses both standardized and raw scores to determine not only the respondent’s performance overall but also in five different aspects of attention: Inattentiveness, Impulsivity, Sustained Attention, Auditory Laterality and Auditory Mobility.

NORMATIVE DATA

The normative sample consists of 1,080 cases and is representative of the United States (U.S.) population in terms of key demographic variables such as gender, race, geographical region, and (parental) education level.

CONNERS CATA® Continuing Education Online Manual Quiz

See previous page.

CPT COMBO KITS

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<td>CPT302 Conners CPT 302 Software, Unlimited CPT 3 &amp; CATA Uses)</td>
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<tr>
<td>CPT304 Conners CPT 304 (CPT Manual, CPT Software, Unlimited CPT 3 &amp; CATA Uses)</td>
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<td>CPT301 Conners CPT Manual</td>
<td>$104.00</td>
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<tr>
<td>CPTCE2 Conners CPT 3/CATA/K-CPT 2 Online Workshop (1 CE/CPD Credit)</td>
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Prices are subject to change.
The Conners 3® is a thorough assessment of attention-deficit/hyperactivity disorder (ADHD) and its most common comorbid problems and disorders in children and adolescents aged 6 to 18 years. It is a multi-informant assessment that takes into account home, social, and school settings, with rating forms for parents, teachers, and youth.

- Assists in the diagnostic process
- Helps identify students for potential eligibility in special education programs
- Assists in the development of intervention and treatment strategies
- Monitors youth’s response to intervention and its effectiveness
- Spanish version available for Parent and Self-Report Forms

**FEATURES AND BENEFITS**

- Addresses comorbid disorders such as Oppositional Defiant Disorder and Conduct Disorder
- Fast and easy to use administration and scoring, combined with easy to interpret reports, lets you spend more time with the youth and less time on paperwork
- Learn more with impairment items which indicate how the youth functions in home, school and social settings
- Designed with direct connections to DSM-5 and IDEA 2004
- Excellent reliability and validity with a large representative normative sample
- Validity scales detect response bias and inconsistent response style which reduces error

**KEY AREAS MEASURED**

**Content Scales**
- Inattention
- Hyperactivity/Impulsivity
- Learning Problems
- Family Relations
- Executive Functioning
- Defiance/Aggression
- Peer Relations
- Validity scales

**DSM-5 Symptom Scales**
- ADHD Inattentive
- ADHD Hyperactive-Impulsive
- ADHD Combined
- Oppositional Defiant Disorder
- Conduct Disorder
- Severe Conduct Critical items

**COMPONENTS**

A thorough and informative table outlining the structure and content of the Conners 3 is available for your reference on page 40. The Conners 3 instrument consists of three standard forms—Parent (Conners 3–P), Teacher (Conners 3–T), Self-Report (Conners 3–SR). All forms include the Conners 3 ADHD Index (Conners 3AI), and the Parent and Teacher forms also include the Conners 3 Global Index (Conners 3GI). Both indices also exist as stand-alone forms. All components can be administered using online and paper-and-pencil formats. All forms can be handscored, scored online, or using scoring software.

**Conners 3 Full-Length**

The Conners 3 Parent, Teacher, and Self-Report full-length forms closely parallel each other and include every Conners 3 item. These forms convey the most detailed information of all the forms and include Content scales, DSM-5 Symptom scales, Conners 3AI, Conners 3GI, Anxiety and Depression Screener items, Severe Conduct Critical items, Validity scales, Impairment items, and Additional Questions. Conners 3 Parent and Teacher forms are used to rate youth 6–18 years, and the Self-Report form can be completed by youth 8–18 years.

**Conners 3 Short**

Conners 3 Short Parent, Teacher, and Self-Report forms closely parallel each other, and are a subset of items from the full-length forms. Short forms include a subset of items from the Conners 3 Content scales, the Positive Impression and Negative Impression scales, and the Additional Questions. These forms can be used as screeners and are also suitable for monitoring the impact of treatment or intervention programs.

**Conners 3AI**

This index contains the 10 items that best differentiate youth with ADHD from youth in the general population. It is useful as a quick check to see if further ADHD evaluation is warranted, particularly for pre-evaluation or group screening purposes. This index is available in parent, teacher, and self-report formats.

**Conners 3GI**

This index contains the 10 most predictive items from the original Conners Parent and Teacher Rating Scales with updated normative data. This index is useful for monitoring treatment effectiveness and changes over time. This index is available in parent and teacher formats.
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Caroline Gauvin
EMAIL: caroline.gauvin@mhs.com
PHONE: 1.800.456.3003 (x438)

UNITED STATES WEST
AK, AZ, AR, CA, CO, HI, ID, IA, KS, LA, MN, MO, MT, NE, NV, NM, ND, OK, OR, SD, TN, TX, UT, WA, WY

Dominic Guay
EMAIL: dominic.guay@mhs.com
PHONE: 1.800.456.3003 (x295)

CANADA & INTERNATIONAL
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