Juvenile Disposition Assessment

Training Manual

Courtesy of Behavior Data Systems, Ltd. and its subsidiaries
Risk & Needs Assessment, Inc.
and Professional Online Testing Solutions, Inc.

Preface

Juvenile Disposition Assessment ((JDA) research and development began in 1985 and has continued to the present. **JDA is the acronym for the Juvenile Disposition Assessment.**

The Juvenile Disposition Assessment presents both treatment and probation recommendations. It is appropriate for use in juvenile courts and juvenile probation.

The Juvenile Disposition Assessment contains 9 scales, which include a Violence Scale and Stress Coping Abilities Scale, for pre-sentence, court, probation and community corrections use.

The JDA's are self-report tests that are administered individually or in group testing settings. There are no forms or questionnaires to be completed by staff. JDA's are computer scored and reports are printed on-site within three minutes of test completion. These reports eliminate tedious, time consuming and error prone hand scoring. Staff report writing, substantiation of decision making and record keeping needs are met with JDA reports.

The purpose of this manual is to describe the JDA and explain how it works. As noted earlier, the acronym JDA refers to the Juvenile Disposition Assessment.

JDA Table of Contents

The **Juvenile Disposition Assessment** is designed for juvenile pre-sentence, disposition (pre and post), probation and parole, court-related services and corrections programs. The Juvenile Disposition Assessment report provides probation and treatment-oriented recommendations. The Juvenile Disposition Assessment is appropriate for troubled youth between the ages of 12 and 17 years. It can be used to evaluate misdemeanor and felony charged defendants.

Product Description

JDA is the acronym for the Juvenile Disposition Assessment. The Juvenile Disposition Assessment presents both treatment and probation recommendations. It is appropriate for use in juvenile courts and juvenile probation.

9 Empirically Based Measures

1. TRUTHFULNESS SCALE: The Truthfulness Scale is a measure of how truthful the offender was while completing the JDA. This scale identifies self-protective, recalcitrant and guarded offenders who minimize or even conceal information. This scale is designed to detect denial and faking.

2. ALCOHOL SCALE: The Alcohol Scale is a measure of the juvenile's alcohol proneness and alcohol-related problems. Offender risk evaluation and screening programs need an objective, reliable and accurate measure of alcohol proneness, use and abuse. Alcohol refers to beer, wine or other liquor.

3. DRUGS SCALE: The Drugs Scale is an independent measure of the adolescent's "other drug" abuse proneness, use and drug-related problems. Without a Drugs Scale, many drug (marijuana, cocaine, crack, heroin, amphetamines, barbiturates, etc.) abusers would remain undetected. The JDA differentiates between licit (legal) and illicit (illegal) drug use.

4. RESISTANCE SCALE: The Resistance Scale measures defensiveness, uncooperativeness and resistance. Some youths resist help; whereas other accept.

5. SELF-ESTEEM SCALE: Self-Esteem refers to a person's perception of self. It reflects an explicit valuing and appraisal of oneself. Self-Esteem incorporates an attitude of acceptance-approval versus rejection-disapproval of oneself. The Self-Esteem Scale score is descriptive of the person one believes oneself to be. Many believe that a person's behavior is a reflection or expression of their self-concept. Negative self-esteem has been related to maladjustment and victim self-concepts. The theory goes, "the client sees himself/herself as bad or worthless and acts accordingly."

6. VIOLENCE SCALE: The Lethality Scale measures the juvenile's use of physical force to injure, damage or destroy. In brief, it identifies the youth's danger to self and others. This is a unique scale in the Juvenile Disposition Assessment.

7. STRESS COPING ABILITIES SCALE: Measures the juvenile's ability to cope with stress. Stress exacerbates mental health and emotional problems. A Stress Coping Abilities Scale score at the 90th percentile or above reflects identifiable emotional or mental health problems. Referral for a more comprehensive evaluation would be appropriate with juveniles scoring in the 90th or above percentile range.

8. DISTRESS SCALE: The Distress Scale measures experienced anxiety and depression. Distress is the most common reason for troubled youth counseling. The Distress Scale consists of items symptomatic of anxiety and depression. The blending of these symptom clusters is clear in the definition of dysphoria, i.e., a generalized feeling of anxiety, restlessness and depression. Distress incorporates unhappiness, discontent, dissatisfaction, worry, apprehension, etc. Distress has broad applicability in adjustment, intervention and outcome.

9. SUICIDE SCALE is important because suicide has ranked tenth as a leading cause of death among adults and third among college students. Victims of emotional, mental and physical abuse react in different ways. No single group (age, gender, ethnicity or socioeconomic status) is free from self-inflicted death. Studies have shown that suicidal persons give many clues and warnings regarding their intentions. **Almost no one commits suicide without letting others know how they are feeling.** Sometimes these warnings are broad hints, sometimes subtle changes in behavior and sometimes verbal statements of intent. All verbal indications of potential suicide should be taken seriously. The suicidal decision is usually not impulsive. Most often, it is premeditated. Although it might be done impulsively and appear capricious, it is in fact a decision that is given long consideration. And once a person decides to kill himself or herself they begin to act differently, e.g., withdrawal, preoccupied, changed eating or sleeping patterns, give gifts, etc.

The JDA profile summarizes the respondent's percentile scores on each of these empirically based measures (scales). The JDA profile makes this information available at a glance by graphically presenting scale scores and their related risk level classification category, for each of these scales.

Specific probation and treatment (as warranted) recommendations are made for each attained scale score. The JDA is a highly individualized test with recommendations included that are appropriate to each scales severity score.

Risk Level Classification

Each JDA scale score is classified in terms of the risk range it represents. These risk level classifications are calculated individually for each of the empirically based scales as follows:

PERCENTILE RANGE	RISK RANGE
0 to 39th percentile	Low Risk
40 to 69th percentile	Medium Risk
70 to 89th percentile	**Problem Risk**
90 to 100th percentile	**Severe Problem Risk**

A person who does not presently engage in alcohol or other drug abuse may score above zero, but would score in the low risk range. In addition, an elevated score (above the 70th percentile) on the Alcohol or Drugs Scale could be obtained by a recovering alcoholic or recovering drug abuser, consequently the offender should be asked if he or she is recovering, and if recovering, "how long have they been abstaining" from alcohol or other drug use.

Validity

Definition: Within the context of assessment, validity is a general term for accuracy of measurement. Valid test results are essentially free from error. They are accurate. In contrast, invalidity refers to distortion of test results due to troubled youth's attitude or test taking behavior. Invalidity may be due to guardedness, denial, faking, reading things into questions, emotional instability, reading impairments, etc. An invalid test means test results are distorted and not accurate. **When handed a JDA report, staff should check the Truthfulness Scale score.** If the Truthfulness Scale score is below the 70th percentile--test results are valid and accurate. Truthfulness Scale scores between the 70th and 89th percentile are likely valid, but should be interpreted cautiously. Truthfulness Scale scores above the 90th percentile are invalid or inaccurate.

Truthfulness Scale

Self-report tests and interviews are subject to the danger of respondents not telling the truth. An important advance in testing is the Truthfulness Scale, which measures how honest the juvenile is while completing the test. It would be naive to believe that all people taking tests always answer questions truthfully. Truthfulness Scales identify self-protective and guarded people who attempt to deny, minimize or even conceal information. These scales can also detect functionally illiterate and visually impaired individuals. This feature is of special importance in court-related, probation and treatment settings, since the outcome of a juvenile's test results could affect their level of supervision, nature of intervention and life situation. **The Truthfulness Scale identifies attempts to fake or under report problems and concerns.**

Truth-Corrected Scores

Another sophisticated psychometric technique involves "truth-corrected" scores which are individually calculated for each of the JDA scales every time a test is scored. **The Truthfulness (Validity) Scale establishes how truthful the offender was while completing the JDA.** Correlations between the Truthfulness Scale and all other scales have been statistically determined. This procedure enables the JDA to identify and add back into each scale score the amount of error variance associated with a person's untruthfulness, resulting in "truth-corrected" scores. Raw scores may only reflect what the offender wants you to know. Truth-corrected scores reveal what the offender is trying to hide. **Truth-Corrected scale scores are more accurate than raw scores because they account for the measured amount of untruthfulness of the offender while completing the JDA.**

Professionals across the country have endorsed the benefits of truth-corrected scores, calling it a "high tech solution to a very common, down-to-earth need." **This methodology is easy to use because the computer does all the work, actually calculating these truth-corrected scores every time a test is scored**. In the past, many evaluators were "turned off" on self-report tests because they were too easy to fake.

Staff Should Not Take These Tests

Sometimes a staff member wants to simulate the defendant taking the JDA. It is strongly recommended that staff do **not** take the JDA. The JDA is not standardized on staff. And staff do not have the same mental set as a defendant. Staff would likely invalidate, distort or otherwise compromise their JDA profile. The JDA is standardized on the juvenile (12 to 17 years) population itself.

Alcohol Scale

The Alcohol Scale measures a youth's alcohol proneness and alcohol-related problems. This is an important area of inquiry when evaluating risk. Alcohol refers to beer, wine and other liquor.

A juvenile's scale score is determined by his or her pattern of responding to that scale's items or test questions. For example, the Alcohol Scale has 21 scale items, and the offender's score is obtained by adding up the number of scale items that were answered in a negative or deviant direction.

In summary, this empirically based scale is a measure of a person having alcohol-related problems. Alcoholism is a significant problem in our society. Alcoholism has been related to arrest records, illicit substance (drugs) abuse, emotional problems and impaired adjustment. The Alcohol Scale

correlates (in the positive direction) with other recognized objective measures of alcohol use and abuse.

Drugs Scale

A drug may be broadly defined as any chemical substance that affects living processes. This definition includes alcohol as well as marijuana, cocaine, crack, ice, heroin, amphetamines, barbiturates, LSD, etc. An important distinction between these substances is legality. The major licit (or legal) drugs are caffeine, nicotine and alcohol. These are generally socially accepted and legally marketed substances.

Increased public awareness of illicit (or illegal) substance abuse and its effects on people's lives is a growing concern. The burgeoning awareness of marijuana and cocaine abuse are but two examples of this concern about illicit substance use and abuse.

It is apparent that many people have been exposed to drugs in our society. Frequency and magnitude of drug use or abuse are important factors. The degree of severity of drug use or abuse is measured with the Drugs Scale. The Drugs Scale is scored by adding the number of Drugs Scale items that were answered in a deviant or negative direction. The Drugs Scale correlates significantly (in the positive direction) with other objective measures of drug use and abuse.

Violence Scale

The Violence Scale measures the probability of a juvenile using physical force to injure, damage, or destroy. This scale establishes whether or not the juvenile is a danger to self or others.

Although conflict and its consequences are inescapable parts of human existence, individuals differ widely in both the ease in developing conflict, and in the nature and severity of its results. The Lethality Scale identifies the extreme, i.e., the troubled youth that is considered dangerous or potentially violent. Pathologically violent juveniles are a threat to themselves and society.

Control of Reports

The JDA report is designed for probation and parole departments, as well as for court-related use. It is **not** recommended that JDA reports be given to the juvenile offender. It is **not** recommended that the juvenile offender take any JDA materials, including the report, out of the office. Juveniles should **not** be given their JDA reports to read, nor should they take any JDA materials out of the staff member's office.

Check Answer Sheet for Completeness

Check the juvenile's answer sheet for completeness when it is turned in and before the offender leaves. No items should be skipped and both true and false should not be answered for the same question. In these instances the juvenile should be informed that each question must be answered in accordance with the instructions, and be given the opportunity to correct or complete their answer sheet. **Skipped answers are scored by the computer in the deviant direction, since it is assumed that these items were omitted to avoid admitting a "negative" response**.

Present, Past or Future Tense

Juveniles should answer questions as the questions are stated -- in present tense, past tense or future tense. Questions are to be answered literally as they are presented. **There are no trick questions**. If an item wants to know about the past, it will be stated in the past tense. If the item inquires about the

present, it will be stated in the present tense. And, if an item asks about the future, it will be stated in the future tense. Just answer each question as it is stated.

Special (99% Scores) Reports

When the Truthfulness Scale score is at or above the 95th percentile all other scale scores are automatically set to the 99th percentile. In other words the JDA report is modified due to the extremely inaccurate test protocol. And in place of the scale descriptions or paragraphs explaining scale scores, a one-page explanation of validity or accuracy/inaccuracy - invalidity is printed. A test protocol is inaccurate and invalid when the Truthfulness Scale score is at or above the 90th percentile. This modified report dramatizes the extremely high Truthfulness Scale score (95th percentile or higher). We will await user feedback before deciding to implement this 99th percentile procedure for Truthfulness Scale scores at the 90th (as compared to the 95th) and above percentile score.

Accurate - Inaccurate Profiles

The term "inaccurate" is being used instead of invalid. The term validity refers to accurate assessment. In contrast, invalidity refers to distortion of test results due to defendant's attitude, reading abilities, minimization of problems, reading things into the questions, denial and faking. However, many people do not understand the terms valid or invalid. Consequently we are substituting the terms **accurate** and **inaccurate** for valid and invalid.

Inaccuracy is defined in terms of a defendant's Truthfulness Scale score being at or above the 90th percentile. **A Truthfulness Scale score at the 90th percentile or above results in inaccurate tests results, and all scale scores should be considered inaccurate.** Yet, different accurate - inaccurate JDA profiles can be identified. Five examples are discussed.

Example #1. **An elevated (at or above the 90th percentile) Truthfulness Scale score with all other scale scores at or above the 90th percentile**. This profile is often associated with impaired reading skills, acute emotional turmoil, or a very deviant response set . . . Further inquiry is needed with the juvenile before deciding whether to retest. If emotionally upset, you may want to settle the youth down before retesting. Although rare, some juvenile's do not take the testing situation seriously and randomly respond. Regardless of the reason this JDA profile is inaccurate and invalid.

Example #2. **An elevated Truthfulness Scale score with at least one other scale score above the 69th percentile and one other scale score below the 40th percentile**. This may be an accurate profile where the defendant was either inadvertently "reading things into the questions" or attempting to be "absolutely honest" . . . After reviewing the instructions with the juvenile this person would likely be retestable. However, a "focused interview" may be all that is needed to complete this assessment.

Example #3. **An elevated Truthfulness Scale score with all scale scores at or below the 39th percentile.** This defendant was attempting to minimize problems and "look good" but was detected by the Truthfulness Scale . . . **This is a classically invalid profile.** This defendant can be expected to be defensive and manifest denial. A direct approach is recommended, e.g., you were attempting to minimize your problems or you were reading things into questions that weren't there. Retest would be contingent upon the juvenile's attitude.

Example #4. A low risk Truthfulness Scale score with other scale scores variable is usually considered a valid profile. However, in very rare cases this represents a "test wise" defendant or staff member playing "beat the test." Earlier it was noted the JDA was not standardized on staff and it was recommended they do not take the JDA. Yet, some do. And it would be very rare or unusual for a juvenile to be that "test wise." First year college students in psychology classes were asked to "lie but don't get caught" and were detected. This respondent's motivation needs to be established in interview.

Example #5. In very rare instances a defendant might answer all test items true or false. **If all items are answered true** the Truthfulness Scale would automatically be set to the maximum score. This response set is very rare. Similarly, **if all items were answered false** the Truthfulness Scale score would be very high. The very high Truthfulness Scale score shows the test protocol is inaccurate or invalid . . . Should either of these situations occur, straightforward inquiry is all that is usually needed to clarify the matter. Contingent upon the juvenile's attitude, retesting might be considered after the oral instructions are reviewed.

Significant Items

Multiple Choice Items represent self-admissions or important self-report responses. They are provided for reference and do not determine the respondent's scale score. For example, a person could have a high scale score and few significant items or vice versa. Significant items are printed on the last page of JDA reports. Significant Items augment scale scores and sometimes provide a more complete understanding of the offender. Significant items permit comparison of the offender's self-perception and attitude with their objective scale scores.

Evaluator's Recommendations

Space has been provided in JDA reports for staff member's observations and recommendations. In most instances, these observations and recommendations will be consistent with JDA findings. However, in some instances staff members will have an observation or recommendation that differs from the JDA report. This is OK! The staff member may obtain important information from another source (offender, relative, records, etc.) which influences their recommendations. In these situations it is recommended that the staff member document in writing this additional source of information along with related recommendations in the space provided.

Multiple Choice Items

Multiple Choice Items responses reflect important self-report motivational, attitudinal and perceptual information. Responses to the last sequence of test items include the multiple choice items. These offender responses are always printed on the last page of the JDA report. They represent the juvenile's perception of his or her situation and needs; therefore, they may differ from empirically based and objective scale scores. This enables further comparison of offender's motivation and attitudes with the offender's objectively attained scale scores. For example, persons may report "no problem" with regard to their alcohol-related drinking pattern, even though their score on the Alcohol Scale is above the 90th percentile (severe problem) range. On the other hand, it is also important to note when the multiple choice item responses are consistent with their corresponding objective scale scores.

Expanding Database

Proprietary JDA software was designed with the capability of "saving" the data from each test in a confidential (no names) manner for ongoing research and analysis. The "delete names" procedure is

discussed later in this document. **No offender names appear in JDA research or annual program summary reports**. Data is downloaded into the JDA database for subsequent analysis and offender names are removed. The expanding JDA database is statistically analyzed each year. This feature represents a unique advantage of the JDA. The database ensures ongoing research at no additional cost to the JDA user. As the JDA database continues to grow, new and exciting research discoveries and innovative software remedies are anticipated.

Database

A database of offender information and test data is very useful. It makes possible ongoing cost-effective research and also provides the capability to summarize results for administrative, budgeting and planning purposes. Professional Online Testing Solutions, Inc.'s copyrighted built-in expanding database provides both a research and program summary capability. Copyrighted software "saves" the test data from each test that is administered. This data is downloaded in a confidential (no names) manner to the JDA database.

The JDA database provides a cost effective approach to ongoing research. The JDA database is analyzed annually. This means that on an annual basis the JDA is essentially restandardized. This ensures accuracy and fairness. JDA databases are established on a state as well as departmental basis. Small volume test users incorporate their databases with others, while large volume agencies can have their own databases.

These same databases provide a cost effective means by which testing programs can be summarized-again in a confidential (no names) manner. Annual summary reports describe the population that was tested. Population statistics, demographics, emerging trends and much more can be provided in these reports on an annual basis.

Oral Instructions

It is now clear that juvenile probation offenders minimize their alcohol and/or other drug-related problems by substantially under-reporting their alcohol and/or other drug use. However, the oral instructions to the juvenile before he or she begins the JDA are important. A straightforward approach is recommended. For example:

"This test contains a truthfulness measure to determine how cooperative and truthful you are while completing it. Please answer all of the questions honestly. It is also important that you do not read anything into the questions that is not there. Your court records may be checked to verify the accuracy of your answers. Just answer each question truthfully."

Giving the offender an example often helps them understand. The example that you use will be influenced by your offender population, experience, and intent. It should be individualized to your situation and needs. Although not recommended for use with juveniles, the following example is presented for clarification as to how an example might be included in your oral instructions to the offender:

"Last week an offender told me while taking the MMPI that he could not answer this true-false question, 'I am attracted to members of the opposite sex.' When asked why, the offender replied, 'If I answer True, you will think I am a sex maniac. If I answer False, you will think I am a homosexual.' I told the offender that this test item does not ask you about being a sex maniac or a homosexual. It simply asked if you are attracted to members of the opposite sex. When you interpreted it to refer to sex maniacs or homosexuals, you were answering a different question. Do not read anything into these questions that isn't there, because if you do, you will invalidate the test

and you may have to take it over. Simply answer the questions True or False. There are no trick questions or hidden meanings. If you misinterpret or change the questions in the test, you will invalidate the test."

A few minutes of oral instructions can put the offender at ease while providing structure and clarifying expectations. Such procedures can greatly reduce the number of invalid tests while making the assessment procedure more acceptable to the offender. Some agencies type out oral instructions for the staff so that they can have them as a ready reference.

Retest

Test results are invalidated (not accurate, often due to problem minimization, denial and untruthful answers) when the test's Truthfulness Scale is at or above the 90th percentile. When this occurs, it is recommended that the client be given the opportunity to be retested. Retest interval is determined by the assessor's opinion of the client's attitude, behavior, emotional and mental state. Retesting can occur immediately or several days or weeks later.

Prior to retesting, the test administrator should review the retest instructions with the client. A straightforward approach is recommended. For example,

Please answer all questions truthfully. It is important that you do not read anything into a question that isn't there. Last week, while completing another test, a client involved in a custody case said, "I cannot answer this question true or false." The question was "There are times when I worry about my court case or the charges made against me." When asked why not, the client replied, "If I answer true, you'll tell the judge that I am guilty because I'm worried; if I answer false you'll tell the judge that I don't care and I'll never get my kids."

*I told the client, "This test item doesn't ask you about your guilt or caring for your kids. The question simply asked if you are worried about your court case. When you interpreted the question to refer to your guilt or innocence, you were answering a different question. **Do not read anything into these questions that isn't there**, because if you do you will invalidate the test. Simply answer the question as instructed, (i.e., True or False). There are no trick questions or hidden meanings. If you misinterpret or change questions you will invalidate the test.*

A few minutes of oral instructions can put the client at ease while providing structure and clarifying the client's expectations. Do not tell the client they were lying – you will never win that argument. Note the above example reframes the issue from denial, problem minimization and noncompliance to reading questions correctly.

That said, nobody wants an invalid test. That is why problem tests (tests whose truth-corrected scores are in the problem risk range) are "truth-corrected" so test results are accurate and usable. Truthfulness Scale scores at or below the 89th percentile are accurate. **Truthfulness Scale scores at or above the 90th percentile are inaccurate due to client denial or attempts to fake good.**

If this was a retest, this person may not be "testable" at this time. However, an alternative approach includes using the Human Voice Audio program. Human Voice Audio is an automated computer presentation in which the questions are verbally read to the client (in English, Spanish, etc.) while simultaneously being presented on the computer monitor (screen). The Human Voice Audio program

is available to you free or at no additional cost. For more information on the Human Voice Audio program it is discussed in this Training Manual. And additional information can be provided upon request. Our email address is info@bdsltd.com and our toll free number is 1 (800) 231-2401.

Time Savings

The JDA is specifically designed for offender risk evaluation and assessment. It provides a vast amount of relevant information quickly and accurately. The JDA facilitates a "focused" interview that can result in significant savings in time with no compromise in the quality of the service being provided.

Test Data Input Verification

This procedure allows the person that is inputting the test data from the answer sheet into their computer to verify the accuracy of their data input. **In brief, the test data is input twice and any inconsistencies between that first and second data entries are highlighted until corrected.** When the first and second data entry match (or are the same) you may continue. This data input verification procedure is optional.

You may enter offender test data and print reports until the diskette is filled, or if you wish, you may check to verify that data entries from the answer sheet were accurate. You have the option of verifying any data that you enter, whether you wish to verify all tests or randomly pick a few tests to verify that were entered. The choice is yours. To perform the test data input verification procedure: **choose the verify option from the Supervisor Options menu**.

Delete Offender Names

You have the option to delete offender names. This is optional. **If you want to use this option, remember that once you delete offender names -- they are gone and cannot be retrieved.** Deleting offender names does not delete demographic or test data. When you use this option it only deletes juvenile names. The juvenile's Identification Number will automatically be deleted.

This option is provided to protect offender confidentiality. Once the names have been deleted, there is no way for you to retrieve them. This ensures the JDA is HIPAA compliant.

When prompted your secret code is "y"

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How to Login

With your Username and Password you are now ready to login and begin testing. To login click the LOGIN button in the upper right corner.

Type in your username and password (both are case sensitive). Below these boxes click on the Login button, this takes you to your account page. On your first visit to this page you will see that you have 1 test credit in your account. We give you one free test credit to enable you to familiarize yourself with our tests and our website.

Click on the "Continue" button or the "Account Summary" button to go to your Account Summary Page.

The Account Summary Page shows Account History, Test Credits Used and Test Credits Available.

There is a drop down box to show the list of available tests and a link to print test booklets and answer sheets.

How to Administer a Test

Before you proceed, please be aware that there are *two test administration options described.*

1. Paper/Pencil Test Administration (Data Entry Method)

The first option is to print the test booklet and answer sheet, both of which are available in English and Spanish. The client then answers the questions on the answer sheet in pencil. The paper-pencil test administration option allows you to test in groups which can save considerable time. Some evaluators do not want to tie up their computers administering tests and prefer paper-pencil testing. When testing is completed the answer sheet data is entered online and a report is generated.

If the paper-pencil method is selected, click on the "Print Test Booklets" link on the screen and print the test booklet and answer sheet; both are available in English, Spanish and other languages.

2. On Screen Online (Internet) Test Administration

The second option is online (on the screen) test administration. This allows the client to sit at the computer and answer the test questions on the screen. Regardless of how tests are administered, all tests are scored and reports generated and printed while online.

Click on the name of the test to be administered. This takes you to the Main Menu page for the test selected.

How to Score a Test and Print a Report

When you have selected your preferred method of test administration click either "Administer Test to Client" (in which case the client would enter his/her answers on the screen), or "Enter Test from Answer Sheet" (client will use the paper/pencil method).

The next screen will be "Client Information" (name, age, sex, education etc.). When you have completed this information, click the "Information Correct" button which will take you to the "Court History" page. Depending on the test you have chosen some tests have a court history section, some do not. Each screen allows the option to choose "Cancel" or "Information Correct" to proceed.

After completing Court History, the next screen is for client answers to the test questions. If the client has used the on-screen method, the questions and answers will be displayed to the client on the screen. If the paper/pencil method was used to test the client, you may enter the answer sheet data at your convenience by typing 1 for true, 2 for false, etc. For multiple choice questions, enter 1, 2, 3 or 4.

Again, this screen allows the option to choose "Cancel" or "Information Correct." If "Information Correct" is chosen the option is still available to cancel or abort the entry and not charge the account. At the end of the test a notice will appear alerting you that one test credit is about to be used. To save the test record to the database click "Yes." To cancel or discard the test entry, click "No." ***When "Yes" is selected, your account will then be charged 1 test credit.***

Highlight the client's name and click on the "Supervisor Options" button to proceed to that client's supervisor options page. Here you can print the report, verify the answer sheet data entered and delete the client's name. The default page that appears is the Print Report page. To print the report, click the "Continue" button. To verify the data entered or delete the client's name, click on the appropriate tab at the top and follow the instructions.

In summary, procedures are designed to be concise, easily followed and swiftly executed, so that they will not detract from test administration.

When prompted your secret code is "y"

How to Verify Data Entry

The Verify Data Input procedure allows you to enter the answers a second time for any particular client. This feature insures that the responses are input into the computer correctly.

From the main menu select the client's name and then click on the "Supervisor Options" button. This will take you to the Supervisor Options page. Click on the tab labeled "Verify Data Entry" and then click on the "Continue" button. You will now be presented with the answer grid so that you can re-input the answers.

As you input each answer, the computer will verify that it matches the answer you originally entered. If it does, the computer will automatically move on to the next response. However, if the answer you input does not match the original answer, you will be immediately alerted to the discrepancy between the two responses via a message box.

The message box will notify you as to which answer did not match the original input. The message box will display what the current answer is and what the original response was.

At this point you should review the answer sheet to verify what the correct response for that particular question is. You will then click "OK" if the answer input this second time is correct and the computer will accept this response and move on to the next answer.

If, after reviewing the answer sheet, you discover that you have erroneously input the wrong answer, click the "Cancel" button and the computer will allow you to enter the response again.

Continue with these steps until all answers have been input. Using this feature insures the accuracy of the data input.

How to Delete Client Names

This procedure allows the user to delete the client's name from the test record. Use this option to protect client confidentiality once you are done with the test record.

From the main menu select the client' name and then click on the "Supervisor Options" button. This will take you to the Supervisor Options page. Click on the tab labeled, "Delete Client Name" and then

click on the "Continue" button. You will be given the opportunity to cancel this procedure at this time. USE WITH CAUTION! Once the name has been deleted it CANNOT be restored. When you are absolutely certain that you are ready to proceed, click on the "Continue" button. That's all there is to it. The name will be deleted from the record and you will be returned to the main menu. Notice that the name you just deleted is no longer visible in the client list.

Live Support Chat

Throughout our site, after you have logged in, you will find "Live Support" buttons. Clicking on these buttons will open a "Live Support" chat window that puts you in touch with an Online-Testing.com technical support staff member.

Support staff is available for these "Live Support" sessions between the hours of 8:00 a.m. and 4:00 p.m. Mountain Standard Time, Monday through Friday. If you need to leave your computer during the chat session, you can return within 24 hours and resume your online conversation.

TECHNICAL SUPPORT

If you have any questions Professional Online Testing Solutions, Inc. is only a telephone call away. Our telephone number is **(800) 231-2401**, fax **(602) 266-8227**, and E-mail **info@online-testing.com**. Our offices are open 8:00 a.m. to 4:00 p.m. Mountain Standard Time, Monday through Friday.