

## Static-99R – TALLY SHEET

Assessment date: XX/XX/2019 Date of release from index sex offence: Feb 2019

Item #	Risk Factor	Codes	Score										
1	Age at release from index sex offence	Aged 18 to 34.9 Aged 35 to 39.9 Aged 40 to 59.9 Aged 60 or older	1 0 X -1 -3										
2	Ever lived with a lover	Ever lived with a lover for at least two years? Yes No	0 X 1										
3	Index non-sexual violence- Any convictions	No Yes	0 X 1										
4	Prior non-sexual violence- Any convictions	No Yes	0 X 1										
5	Prior sex offences	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; border-bottom: 1px solid black;">Charges</th> <th style="width: 50%; border-bottom: 1px solid black;">Convictions</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>0</td> </tr> <tr> <td>1,2</td> <td>1</td> </tr> <tr> <td>3-5</td> <td>2,3</td> </tr> <tr> <td>6+</td> <td>4+</td> </tr> </tbody> </table>	Charges	Convictions	0	0	1,2	1	3-5	2,3	6+	4+	0 1 X 2 3
Charges	Convictions												
0	0												
1,2	1												
3-5	2,3												
6+	4+												
6	Four or more prior sentencing dates (excluding index)	3 or less 4 or more	0 X 1										
7	Any convictions for non-contact sex offences	No Yes	0 X 1										
8	Any unrelated victims	No Yes	0 X 1										
9	Any stranger victims	No Yes	0 X 1										
10	Any male victims	No Yes	0 X 1										
	<b>Total Score</b>	<b>Add up scores from individual risk factors</b>	<b>X</b>										

<b>Nominal Risk Levels (2016 version)</b>	<b>Total</b>	<b>Risk Level</b>
	-3, -2	<b>I – Very Low Risk</b>
	-1, 0	<b>II – Below Average Risk</b>
	1, 2, 3	<b>III – Average Risk</b>
	4, 5	<b>IVa – Above Average Risk</b>
	6 and higher	<b>IVb – Well Above Average Risk</b>

There [was, was not] sufficient information available to complete the Static-99R score following the coding manual (2016 version). I believe that this score [fairly represents, does not fairly represent] the risk presented by Inmate XXXX at this time. Comments/Explanation: \_\_\_\_\_

Dr. S. Caldwell-Barr  
(Evaluator name)

\_\_\_\_\_  
(Evaluator signature)

\_\_\_\_\_  
(Date)

## Sex Offender Treatment Intervention and Progress Scale (SOTIPS)

Individual: \_\_\_\_\_ Scorer: \_\_\_\_\_

Evaluation Date: \_\_\_\_\_ Setting:  Community  Residential

Months in Weekly Treatment: \_\_\_\_\_ Time of Evaluation:  Initial

Months in Aftercare Treatment: \_\_\_\_\_  During Treatment

Total: \_\_\_\_\_  End of Treatment

Rating Guide (use definitions in scoring manual):

0 = minimal or no need for improvement  
 1 = some need for improvement  
 2 = considerable need for improvement  
 3 = very considerable need for improvement

<b>Sexuality and Risk Responsibility</b>	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
1. Sexual Offense Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Sexual Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Sexual Attitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Sexual Interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Sexual Risk Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Criminality</b>	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
6. Criminal and Rule-Breaking Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Criminal and Rule-Breaking Attitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Treatment and Supervision Cooperation</b>	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
8. Stage of Change	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Cooperation with Treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Cooperation with Community Supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Self-Management</b>	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
11. Emotion Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Problem Solving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Impulsivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Social Stability and Supports</b>	<i>0</i>	<i>1</i>	<i>2</i>	<i>3</i>
14. Employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Social Influences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Sub-totals</b>				
<b>Total</b>				