


# Appendix A: Paper version on the 2018 Jail Survey Cognitive Test

OMB No. ####-#### Approval Expires 00/00/0000

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|---|----------------------|--|----------------------|--|----------------------|
|  |                      | <b>2018 JAIL SURVEY<br/>COGNITIVE TEST</b> |                      | U.S. DEPARTMENT OF JUSTICE<br>BUREAU OF JUSTICE STATISTICS<br>AND ACTING AS COLLECTION AGENT:<br>RTI INTERNATIONAL |                      |
| <b>FORM COMPLETED BY—</b>   |                      |  |                      |  |                      |
| Name  | <input type="text"/> |  |                      | Title  | <input type="text"/> |
| Official Address  | <input type="text"/> |  |                      | Telephone  | <input type="text"/> |
| City  | <input type="text"/> |  |                      | FAX  | <input type="text"/> |
| State   | <input type="text"/> | Zip  | <input type="text"/> | Email  | <input type="text"/> |
| Facility Name   | <input type="text"/> |  |                      |  |                      |

## General Instructions

### FOR EACH ITEM—

- Please complete the questionnaire online at [jailsurveytest.rti.org](http://jailsurveytest.rti.org).
- If you have questions about this cognitive test form, please call RTI, the collection agent for BJS, at 919-541-6249, or e-mail [acsmith@rti.org](mailto:acsmith@rti.org).

## What to include and exclude in this data collection

### INCLUDE—

- ✓ Confinement facilities usually administered by a local law enforcement agency, intended for adults but sometimes holding juveniles.
- ✓ All jails and city/county correctional centers that hold inmates beyond arraignment. Report data on all inmates, including those held in separate holding or lockup areas within your facilities.
- ✓ Special jail facilities (e.g., medical/treatment/release centers, halfway houses, and work farms).
- ✓ Temporary holding or lockup facilities if they are part of your combined function.
- ✓ Inmates held for other jurisdictions, including federal authorities, state prison authorities, American Indian or Alaska Native tribal governments, and other local jail jurisdictions.

### EXCLUDE—

- X Facilities that are exclusively used as temporary holding or lockup facilities, where inmates are generally held for less than 72 hours and not held beyond arraignment.
- X Privately operated jails and facilities operated by two or more jurisdictions (i.e., multi-jurisdictional facilities). These jails will be contacted directly for this data collection.

### BURDEN STATEMENT

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 30 minutes per response, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. Do not send your completed form to this address.

«AGENCY ID»

**Section I. CONFINED POPULATION**

If the answer to a question is "none" or "zero," write "0" in the space provided.

When exact numeric answers are not available, provide estimates and mark (X) in the checkbox beside each number that is estimated. For example 1234

Questions 1 through 6 and 9 ask about your inmate population on May 31, 2018.

1. On May 31, 2018, how many persons were CONFINED in your jail facility?

INCLUDE—

- Persons on transfer to treatment facilities but who remain under your jurisdiction
- Persons held for other jurisdictions
- Persons in community-based programs (e.g., work release, day release, or drug/alcohol treatment) who return to jail at night
- Persons out to court while under your jurisdiction.

EXCLUDE—

- Persons under your jurisdiction who are boarded elsewhere
- Inmates who are AWOL, escaped, or on long-term transfer to other jurisdictions
- Persons in community-based programs run by your jails (e.g., electronic monitoring, house arrest, community service, day reporting, or work programs) who do NOT return to jail at night.

2. On May 31, 2018, how many persons CONFINED in your jail facility were—

If you cannot provide counts by age and sex, please complete 2a (age 17 or younger by sex) and 2g (total counts by sex).

|   | Male  | Female  | Total   |
|---|---|---|---|
| a. Age 17 or younger                                  | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> |
| b. 18–24  | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> |
| c. 25–34  | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> |
| d. 35–44  | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> |
| e. 45–54  | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> |
| f. 55 or older  | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> |
| g. TOTAL (Sum of items 2a to 2f should equal item 2g) | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> | <input type="text"/> <input type="checkbox"/> |

3. On May 31, 2018, how many persons CONFINED in your jail facility were—

a. U.S. citizens?

b. Not U.S. citizens?

Check box if the number of non-U.S. citizens is unknown.

Of the non-U.S. citizens in item 3b, how many were—

- For persons with more than one status, report the status associated with the most serious offense.
- For convicted inmates, include probation and parole violators with no new sentence.

1. Convicted

2. Unconvicted

3. TOTAL (Sum of items 3b1 and 3b2 should equal item 3b)

Check box if the numbers of convicted and unconvicted non-U.S. citizens are unknown.

4. On May 31, 2018, how many persons CONFINED in your jail facility were born—

a. In the United States?

INCLUDE—

- Anyone born in the United States, Puerto Rico, Guam, the U.S. Virgin Islands, and Northern Marianas.
- Anyone born abroad of U.S. citizen parent or parents.

b. Outside the United States?

INCLUDE—

- Anyone born in a foreign country, except the following:

EXCLUDE—

- Anyone born in Puerto Rico, Guam, the U.S. Virgin Islands, and Northern Marianas.
- Anyone born abroad of U.S. citizen parent or parents.

Check box if the number of foreign-born inmates is unknown.

Of the foreign-born inmates in item 4b, how many were—

- For persons with more than one status, report the status associated with the most serious offense.
- For convicted inmates, include probation and parole violators with no new sentence.

1. Convicted

2. Unconvicted

3. TOTAL (Sum of items 4b1 and 4b2 should equal item 4b)

Check box if the numbers of convicted and unconvicted foreign-born inmates are unknown.

5. On May 31, 2018, how many persons CONFINED in your jail facility were—

a. Bench warrants/detainer .....

✓ INCLUDE failure to appear and contempt of court.

b. Other pretrial release violators .....

✓ INCLUDE persons released on bond/bail, their personal recognizance, house arrest/ electronic monitoring, and other pretrial release violations.

c. Probation violators .....

d. Parole violators .....

e. Other conditional release violators .....

6. On May 31, 2018, how many persons CONFINED in your jail facility, regardless of conviction status, had as their most serious offense, the one crime for which the person could receive the longest jail/prison sentence—

For probation and parole violators, please include the most serious original or new charge.

a. Violent offense .....

✓ INCLUDE homicide, rape/sexual assault, robbery, domestic violence, aggravated and simple assault, and other violent offenses

b. Property offense .....

✓ INCLUDE larceny/theft, burglary, vandalism, fraud, motor vehicle theft, stolen property offenses, arson, forgery and counterfeiting, and other property offenses

c. Drug law violation .....

✓ INCLUDE offenses relating to the unlawful possession, distribution, sale, use, growing, or manufacturing of narcotic drugs

d. Driving while intoxicated or driving under the influence of alcohol or drugs .....

e. Weapons offense .....

f. All other known offenses and infractions not specified in 6a to 6e .....

g. Not known .....

h. TOTAL (Sum of items 6a to 6g should equal item 1) .....

**Section II. FACILITY PROGRAMS, OPIOID TESTING, SCREENING AND TREATMENT**

The following questions are about opioids. Opioids are a class of drug that include heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin), hydrocodone (Vicodin), codeine, and morphine.

7. As a matter of policy or practice, does your jail facility –

✓ INCLUDE testing, screening, and treatment that are conducted either on or off facility grounds.

a. Conduct routine urinalysis tests on inmates during intake for the detection of opioids .....  Yes  No

b. Screen inmates during intake for opioid use disorder with a questionnaire or interview .....  Yes  No

c. Provide overdose education to inmates with opioid use disorders .....  Yes  No

d. Provide behavioral or psychological treatment for inmates identified as having opioid use disorders .....  Yes  No

e. Provide medication-assisted treatment (e.g., methadone, buprenorphine, naltrexone) to inmates who are admitted with a current prescription or were getting services from a methadone clinic prior to admission....  Yes  No

f. Provide medication-assisted treatment for those identified as having opioid use disorders .....  Yes  No

g. Provide medication-assisted treatment for inmates identified as experiencing opioid withdrawal .....  Yes  No

h. Provide prescription opioids to inmates with acute or chronic pain admitted to your facility with a current prescription from a health care professional prior to admission .....  Yes  No

i. Provide opioids to inmates to relieve acute or chronic pain .....  Yes  No

j. Provide overdose reversal medications such as naloxone (Narcan) to inmates with opioid use disorders to take with them at the time of release from jail .....  Yes  No

k. Link inmates with opioid use disorder to medication-assisted treatment in community care upon release .....  Yes  No

*If NO to item 7b and 7g, SKIP to item 9.*

If the answer to a question is "none" or "zero," write "0" in the space provided.

When exact numeric answers are not available, provide estimates and mark (X) in the checkbox beside each number that is estimated. For example 1234

**8. During the 31-day period between May 1, 2018, and May 31, 2018—**

a. How many persons were new admissions to your jail facility?.....

INCLUDE—

- ✓ Persons officially booked into and housed in this facility by formal legal document and by the authority of the courts or some other official agency
- ✓ Repeat offenders booked on new charges
- ✓ Those persons serving a weekend sentence coming into the facility for the first time.

EXCLUDE—

- X Returns from escape, work release, medical appointments/treatment facilities, furloughs, bail/bond releases, and court appearances.

b. Of those persons admitted in item 8a, how many were screened with a questionnaire or interview (7b) for opioid use disorder? .....

1. How many screened positive for opioid use disorders? .....
2. How many screened positive were unique individuals? .....

c. Of those persons admitted in item 8a, how many did your jail facility treat for opioid withdrawal (7g)? .....

1. How many treated for opioid withdrawal were unique individuals? .....

If NO to item 7e and 7f, END survey.

9. On May 31, 2018, how many inmates CONFINED in your jail facility were receiving medication-assisted treatment for opioid use disorders? Be sure to include persons on transfer to treatment facilities but who remain under your jurisdiction.....