

Appendix D: CJRP Questionnaire

All changes from the 2019 CJRP instrument are denoted with red font. Variable names and question numbering may be different.

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INTRO PAGES

LOGIN	
ASK	<i>All Respondents</i>
<p>Welcome to the 2021 Census of Juveniles in Residential Placement (CJRP) Pilot Study. Your participation in this census pilot study will help improve the ongoing CJRP data collection. The CRJP makes it possible to provides comprehensive and reliable statistical data on the residential placement of juvenile offenders; facilitates the needs of juvenile justice agencies and social service organizations that address the many problems faced by today's youth; and gathers the most complete and accurate information regarding issues of juvenile detention, correction, and placement. Thank you for your participation in this endeavor.</p> <p>Please enter the username and password provided in the mailing packet sent to your facility. <i>Please note that the username and password are is case sensitive.</i></p>	

INTRO	
ASK	<i>All Respondents</i>
<p>Important Instructions</p> <ul style="list-style-type: none">• Complete this questionnaire only for [FACILITY_NAME]. We are not requesting forms for any additional facilities in this current round of data collection.• Sessions will expire (requiring you to log back in) after 30 minutes of inactivity.• A juvenile residential facility is a place where young persons who have committed offenses may be housed overnight. A facility has living/sleeping units, such as wings, floors, dorms, barracks, or cottages on one campus or in one building.• Any buildings with living/sleeping units that are not on the same campus should be considered separate facilities and should not be included in this questionnaire.	

SECTION 0: FACILITY AND CONTACT INFORMATION

SO_NAME_CONFIRM	
ASK	All Respondents
<p>Facility and Contact Information</p> <p>Please update the facility name below if corrections are needed. We have the following name listed for this facility.</p> <p>[FACILITY_NAME]</p> <p>Is this the correct name for this facility?</p> <p>1 Yes, the name listed above is correct for this facility.</p> <p>2 No, the name list above is not the name of this facility. (Enter corrections below.)</p>	

SO_NAME_UPDATE	
ASK	If SO_NAME_CONFIRM = 2
<p>What is the correct name of this facility?</p>	

SO_MAILADDR_CONFIRM	
ASK	All Respondents
<p>We have the following mailing address listed for this facility.</p> <p>[FACILITY_MAILADDR]</p> <p>Is the address below Is this the correct mailing address for this facility?</p> <p>1 Yes, the address listed above is the mailing address for this facility.</p> <p>2 No, the address listed above is not this facility's mailing address. (Enter corrections below.)</p>	

SO_MAILADDR_UPDATE	
ASK	If SO_MAILADDR_CONFIRM = 2
<p>What is the correct mailing address for your facility?</p>	

S0_PHYSADDR_CONFIRM	
ASK	All Respondents
<p>We have the following physical address listed for this facility. [FACILITY_PHYSADDR]</p> <p>Is the address below Is this the correct physical address for this facility?</p> <ol style="list-style-type: none">1 Yes, the address listed above is the physical address for this facility.2 No, the address listed above is not this facility's physical address. (Enter corrections below.)	
S0_PHYSADDR_UPDATE	
ASK	If S0_PHYSADDR_CONFIRM = 2
What is the correct physical address for your facility?	

SECTION 1: GENERAL INFORMATION

S1_AGENCY	
ASK	All Respondents
<p>1a. Is this facility part of a larger agency?</p> <p>1 Yes</p> <p>2 No</p>	

S1_AGENCY_NAME	
ASK	If S1_AGENCY = 1
<p>1b. What is the name of this agency?</p>	

S1_OWN	
ASK	All Respondents
<p>NOTE: Questions 2 and 3 ask who OWNS this facility. Later you will be asked who OPERATES this facility.</p> <p>2a. Is this facility OWNED by one or more of the following? <i>Select all that apply.</i></p> <p>1 A private non-profit agency</p> <p>2 A for profit agency</p> <p>3 A government agency</p>	

S1_OWN_NAME	
ASK	If S1_OWN = 1, 2 or missing
<p>2b. What is the name of the private non-profit or for-profit agency that OWNS this facility?</p>	

S1_OWN_GOVLEVEL	
ASK	If S1_OWN = 3 or missing
<p>3. What is the level of the government agency that OWNS this facility? <i>Select all that apply</i></p> <p>1 A Native American Tribal Government</p> <p>2 Federal</p> <p>3 State</p> <p>4 County</p> <p>5 Municipal (includes Washington, DC)</p> <p>6 Other - Please specify:</p>	

S1_OPERATE	
ASK	All Respondents
<p>NOTE: Questions 4 and 5 ask who OPERATES this facility.</p> <p>4a. Is this facility OPERATED by one or more of the following? <i><i>Select all that apply.</i></i></p> <ul style="list-style-type: none"> 1 A private non-profit agency 2 A for profit agency 3 A government agency 	

S1_OPERATE_NAME	
ASK	If S1_OPERATE = 1, 2 or missing
<p>4b. What is the name of the private non-profit or for-profit agency that OPERATES this facility?</p>	

S1_OPERATE_GOVLEVEL	
ASK	If S1_OPERATE = 3 or missing
<p>5. What is the level of the government agency that OPERATES this facility (either directly or under a contract with)? <i><i>Select all that apply.</i></i></p> <ul style="list-style-type: none"> 1 A Native American Tribal Government 2 Federal 3 State 4 County 5 Municipal (includes Washington, DC) 6 Other - Please specify: 	

S1_CLASSIFY_A	
ASK	If FORM = A
<p>6. What type of residential facility is the one listed on the front cover? <i>Select all that apply</i></p>	
1	<p>Detention center: A short-term facility that provides temporary care in a physically restricting environment for juveniles in custody pending court disposition and, often, for juveniles who are adjudicated delinquent and awaiting disposition or placement elsewhere, or are awaiting transfer to another jurisdiction. In some jurisdictions, detention centers may also hold juveniles committed for short periods of time as part of their disposition (e.g., weekend detention).</p>
2	<p>Training school/Long-term secure facility: A specialized type of facility that provides strict confinement and long-term treatment generally for post-adjudication committed juvenile offenders. Includes training schools, juvenile correctional facilities, youth development centers.</p>
3	<p>Reception or diagnostic center: A short-term facility that screens juvenile offenders committed by the courts and assigns them to appropriate correctional facilities.</p>
4	<p>Group home/Halfway house: A long-term facility that is generally non-secure and typically intended for post-adjudication commitments in which young persons are allowed extensive contact with the community, such as attending school or holding a job.</p>
5	<p>Residential treatment center: A facility that focuses on providing some type of individually planned treatment program for youth (substance abuse, sex offender, behavioral/mental health, etc.) in conjunction with residential care. Such facilities generally require specific licensing by the state that may require that treatment provided is Medicaid-reimbursable.</p>
6	<p>Boot camp: A secure facility that operates like military basic training. It is designed to combine elements of basic military training programs, correctional components and treatment programs. The emphasis is on strict discipline, drills, and work.</p>
7	<p>Ranch, forestry camp, wilderness or marine program or farm: These are long-term generally non-secure residential facilities often located in a relatively remote area. The juveniles participate in a structured program that emphasizes outdoor work, including conservation and related activities.</p>
8	<p>Runaway and homeless shelter: A short-term facility that provides temporary care in a physically unrestricted environment. It can also provide longer-term care under a juvenile court disposition order.</p>
9	<p>Other type of shelter: This includes emergency non-secure shelters where juveniles are housed short-term until another placement can be found.</p>
10	<p>Other: This includes independent living programs and anything that cannot be classified above. – Please specify:</p>

S1_CLASSIFY_B	
ASK	If FORM = B
<p>6. What type of residential facility is the one listed on the front cover? <i>Select all that apply</i></p>	
1	Detention center: A short-term facility that provides temporary care in a physically restricting environment for juveniles in custody pending court disposition and, often, for juveniles who are adjudicated delinquent and awaiting disposition or placement elsewhere, or are awaiting transfer to another jurisdiction. In some jurisdictions, detention centers may also hold juveniles committed for short periods of time as part of their disposition (e.g., weekend detention).
2	Training school/Long term secure facility: A specialized type of facility that provides strict confinement and long-term treatment generally for post-adjudication committed juvenile offenders. Includes training schools, juvenile correctional facilities, youth development centers.
3	Reception or diagnostic center: A short-term facility that screens juvenile offenders committed by the courts and assigns them to appropriate correctional facilities.
4	Group home/Halfway house: A long-term facility that is generally non-secure and typically intended for post-adjudication commitments in which young persons are allowed extensive contact with the community, such as attending school or holding a job.
5	Residential treatment center: A facility that focuses on providing some type of individually planned treatment program for youth (substance abuse, sex offender, behavioral/mental health, etc.) in conjunction with residential care. Such facilities generally require specific licensing by the state that may require that treatment provided is Medicaid-reimbursable.
6	Boot camp: A secure facility that operates like military basic training. It is designed to combine elements of basic military training programs, correctional components and treatment programs. The emphasis is on strict discipline, drills, and work.
7	Ranch, forestry camp, wilderness or marine program or farm: These are long-term generally non-secure residential facilities often located in a relatively remote area. The juveniles participate in a structured program that emphasizes outdoor work, including conservation and related activities.
8	Runaway and homeless shelter: A short-term facility that provides temporary care in a physically unrestricted environment. It can also provide longer-term care under a juvenile court disposition order.
9	Other type of shelter: This includes including emergency non-secure shelters where juveniles are housed short-term until another placement can be found.
10	Other: This includes including independent living programs and anything that cannot be classified above. - Please specify:

S1_CLASSIFY_SCREENPROG	
ASK	All Respondents
<p>Does this facility screen young persons to assign them to the appropriate program within this facility?</p>	
1	Yes
2	No

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S1_CLASSIFY_SCREENLIV	
ASK	All Respondents
Does this facility screen young persons to assign them to the appropriate living arrangement within this facility?	
1	Yes
2	No

S1_CLASSIFY_SCREENOTH	
ASK	All Respondents
Does this facility screen young persons to assign them to another facility?	
1	Yes
2	No

S1_CLASSIFY_SCREENCOMM	
ASK	All Respondents
Does this facility screen young persons to assign them to a community-based program?	
1	Yes
2	No

S1_CLASSIFY_POP	
ASK	All Respondents
Which of the following types of young persons does your facility house? <i>Select all that apply.</i>	
1	Young persons awaiting adjudication
2	Young persons awaiting disposition
3	Young persons post disposition awaiting placement
4	Young persons post disposition in placement
5	Young persons awaiting transfer to another facility within this jurisdiction
6	Young persons awaiting transfer to another jurisdiction
7	None of the above

S1_CLASSIFY_CONTACT	
ASK	All Respondents
Are any young persons in this facility allowed contact with the community, such as attending school or vocational training, or working outside this facility?	
1	Yes
2	No

CJRP Questionnaire

S1_CLASSIFY_TREATPROG	
ASK	All Respondents
Does this facility provide an individually planned treatment program for youth in conjunction with residential care?	
1	Yes
2	No

S1_CLASSIFY_OUTDOOR	
ASK	All Respondents
Does this facility provide a structured program for youth emphasizing outdoor experiences, such as through outdoor work or conservation training?	
1	Yes
2	No

S1_CLASSIFY_JOBTRAIN	
ASK	All Respondents
Does this facility provide a vocational training program, workforce development services, or job training?	
1	Yes
2	No

CJRP Questionnaire

S1_INSTRUCT	
ASK	All Respondents
<p> IMPORTANT INSTRUCTIONS </p> <p>The following items ask you to use your records to provide counts of persons who had assigned beds in this facility at the end of the day on [REF_DATE]. This date has been chosen carefully to give a standardized count of persons in facilities like yours across the country. You will be asked to classify your facility population into two age groups:</p> <ol style="list-style-type: none"> 1. those persons under age 21; and 2. those persons age 21 and older. <p>You will then be asked to classify each person UNDER THE AGE OF 21 into one of the two following categories:</p> <ol style="list-style-type: none"> 1. those here because they have been charged with or court-adjudicated for an offense. An offense is any behavior that is illegal in your state for underage persons alone or for both underage persons and adults. 2. those here for reasons other than offenses. <p>Please classify each person under age 21 into just one of these categories. Detailed descriptions of the above categories are provided in the questions themselves and on the Offense Codes on Pages 19 and 20 of the CJRP form. You may also view the descriptions here.</p> <p>Please use your records to answer the following questions.</p>	

S1_COUNT	
ASK	All Respondents
<p>According to your records, at the end of the day on [REF_DATE], how many persons had assigned beds in this facility in each of the following categories?</p> <p><i><i>Include persons who were temporarily away (such as such as those released for medical care at a hospital), but had assigned beds on [REF_DATE_SHORT]. Please write "0" if there are NO persons in a category.</i></i></p> <ol style="list-style-type: none"> a. Under the age of 21 _____ b. 21 or older _____ c. Total _____ 	

S1_DEFINE	
ASK	If S1_COUNT (a) > 0 or missing
<p>NOTE:</p> <p>For all remaining questions, "young persons" refers to "young persons under the age of 21 who have assigned beds" unless otherwise specified in the question.</p>	

S1_COUNTCATS	
ASK	If S1_COUNT (a) > 0 or missing
<p>At the end of the day on <[REF_DATE]>, how many young persons did this facility have for each of the following categories?</p> <p><i>Include persons who were temporarily away (such as those released for medical care at a hospital), but had assigned beds on [REF_DATE_SHORT]. Please write "0" if there are NO persons in a category.</i></p>	
a.	<p>Young persons charged with or court adjudicated for an offense. <i>An offense is any behavior that is illegal in your state for underage persons alone or for both underage person and adults. See the Offense Codes here for reference.</i></p> <p>INCLUDE:</p> <ul style="list-style-type: none"> • ANY offense that is illegal for both adults and underage persons. • ANY offense that is ILLEGAL IN YOUR STATE for underage persons but not for adults. Examples are running away, truancy, incorrigibility, curfew violation, and underage liquor violations. Count persons with these behaviors here ONLY IF THE BEHAVIORS ARE ILLEGAL IN YOUR STATE. This includes those CHINS (Children in Need of Services) and PINS (Persons in Need of Services) who are here BECAUSE of an offense. • ANY offense being adjudicated in juvenile or criminal court, including a probation or parole violation. <p>EXCLUDE:</p> <ul style="list-style-type: none"> • Young persons who have committed one or more offenses in the past BUT are here FOR REASONS OTHER THAN OFFENSES. • Young persons here BECAUSE OF REASONS OTHER THAN OFFENSES, such as neglect, abuse, dependency, abandonment, behavioral/mental health problems, substance abuse problems, etc. • Young persons who have run away, been truant or incorrigible, or violated curfew, if these behaviors are NOT considered illegal in your state. • Young persons who are PINS (Persons in Need of Services) or CHINS (Children in Need of Services) who are here because of REASONS OTHER THAN OFFENSES.
b.	<p>Young persons assigned beds for other reasons</p> <p>INCLUDE:</p> <ul style="list-style-type: none"> • Young persons here for NON-OFFENSE REASONS such as neglect, abuse, dependency, abandonment, behavioral/mental health problems, substance abuse problems, or another NON-OFFENSE reason. • Young persons who have committed one or more offenses in the past BUT are here FOR REASONS OTHER THAN OFFENSES. • Young persons who have run away, been truant or incorrigible, or violated curfew, if these behaviors are NOT considered illegal in your state. • Young persons here due to voluntary or non-offense related admissions. <p>EXCLUDE:</p> <ul style="list-style-type: none"> • Young persons here BECAUSE THEY WERE CHARGED WITH OR COURT-ADJUDICATED FOR AN OFFENSE.
c.	Total

CJRP Questionnaire

S1_ANYBEDS	
ASK	All Respondents
<p>7. According to your records, at the end of the day on [REF_DATE], did ANY persons have assigned beds in this facility?</p> <p><i>Include persons who were temporarily away, but had assigned beds on [REF_DATE_SHORT]. Do NOT include staff.</i></p> <p>1 — Yes 2 — No</p>	

S1_TOTCOUNT	
ASK	If S1_ANYBEDS = 1 or missing
<p>7b. According to your records, at the end of the day on [REF_DATE], how many persons had assigned beds in this facility?</p> <p>_____ Persons</p>	

S1_GE21PERSONS	
ASK	If S1_TOTCOUNT > 0 or missing
<p>How many of the [S1_TOTCOUNT] persons who had assigned beds at the end of the day on [REF_DATE], were AGE 21 or older?</p> <p><i>Include persons who were temporarily away, but had assigned beds on [REF_DATE_SHORT]. Do NOT include staff. Please write "0" if there are NO persons age 21 or older.</i></p> <p>_____ Persons 21 or older</p>	

S1_LT21BEDS	
ASK	If S1_TOTCOUNT > 0 or missing
<p>9a. At the end of the day on [REF_DATE], did ANY persons UNDER AGE 21 have assigned beds in this facility?</p> <p><i>INCLUDE juveniles being tried as adults in criminal court. Do NOT include staff.</i></p> <p>1 — Yes 2 — No</p>	

S1_LT21PERSONS	
ASK	If S1_LT21BEDS = 1 or missing
<p>9b. According to your records at the end of the day on [REF_DATE], how many persons UNDER AGE 21 had assigned beds in this facility?</p> <p><i>Include persons who were temporarily away, but had assigned beds on [REF_DATE_SHORT]. Do NOT include staff.</i></p> <p>_____ Young persons under the age of 21</p>	

S1_CHARGEANY	
ASK	If S1_LT21PERSONS > 0 or missing
<p>10a. At the end of the day on [REF_DATE], did ANY persons UNDER AGE 21 have assigned beds in this facility SPECIFICALLY BECAUSE they were CHARGED WITH OR COURT ADJUDICATED FOR AN OFFENSE?</p> <p><i>An offense is any behavior that is illegal in your state for underage persons alone or for both underage person and adults. See the Offense Codes here for reference.</i></p> <p>INCLUDE in your count persons UNDER AGE 21 here BECAUSE THEY WERE CHARGED WITH OR ADJUDICATED FOR:</p> <ul style="list-style-type: none"> • ANY offense that is illegal for both adults and underage persons. • ANY offense that is ILLEGAL IN YOUR STATE for underage persons but not for adults. Examples are running away, truancy, incorrigibility, curfew violation, and underage liquor violations. Count persons with these behaviors here ONLY IF THE BEHAVIORS ARE ILLEGAL IN YOUR STATE. This includes those CHINS (Children in Need of Services) and PINS (Persons in Need of Services) who are here BECAUSE of an offense. • ANY offense being adjudicated in juvenile or criminal court, including a probation or parole violation. <p>DO NOT INCLUDE here:</p> <ul style="list-style-type: none"> • Persons under age 21 who have committed one or more offenses in the past, BUT HAVE ASSIGNED BEDS ON [REF_DATE_SHORT] FOR REASONS OTHER THAN OFFENSES such as neglect, abuse, dependency, abandonment, or another NON-OFFENSE reason. • Persons under age 21 assigned beds here because of mental health problems, substance abuse problems, etc. UNLESS THE OFFENSE THEY COMMITTED REQUIRED TREATMENT AS PART OF THE COURT ORDER. • Persons under age 21 who have run away, been truant or incorrigible, or violated curfew, IF THESE BEHAVIORS ARE NOT CONSIDERED ILLEGAL IN YOUR STATE. These persons will be counted in questions 11a and 11b. • Those persons who are PINS (Persons in Need of Services) or CHINS (Children in Need of Services) who have assigned beds because of REASONS OTHER THAN OFFENSES. <p>1 _____ Yes 2 _____ No</p>	

S1_CHARGECOUNT	
ASK	<i>If S1_CHARGEANY = 1 or missing</i>
<p>10b. According to your records at the end of the day on [REF_DATE], HOW MANY PERSONS UNDER AGE 21 had assigned beds in this facility SPECIFICALLY BECAUSE they were CHARGED WITH OR COURT ADJUDICATED FOR AN OFFENSE, as defined in the previous question?</p> <p><i><i>Later you will be asked to provide information about each of these persons. Include persons who were temporarily away but had assigned beds on [REF_DATE_SHORT]. Do NOT include staff.</i></i></p> <p>_____ Persons under the age of 21 here because they were charged with or court adjudicated for an offense</p>	

S1_OTHEROFFENSES	
ASK	<i>If S1_LT21PERSONS > 0 or missing</i>
<p>11a. At the end of the day on [REF_DATE], did ANY of the persons UNDER AGE 21 have assigned beds in this facility FOR REASONS OTHER THAN OFFENSES? Do NOT include staff.</p> <p>INCLUDE here:</p> <ul style="list-style-type: none"> • _____ Persons under age 21 assigned beds here for NON-OFFENSE REASONS such as neglect, abuse, dependency, abandonment, or another NON-OFFENSE reason. • _____ Persons under age 21 assigned beds here because of mental health problems UNLESS THE OFFENSE THEY COMMITTED REQUIRED TREATMENT AS PART OF THE COURT ORDER. • _____ Persons under age 21 who have run away, been truant or incorrigible, or violated curfew, IF THESE BEHAVIORS ARE NOT CONSIDERED ILLEGAL IN YOUR STATE. • _____ Persons assigned beds here due to voluntary or non-offense related admissions. <p>DO NOT INCLUDE here:</p> <ul style="list-style-type: none"> • _____ Persons assigned beds here BECAUSE THEY WERE CHARGED WITH OR COURT ADJUDICATED FOR AN OFFENSE. These persons are counted in questions 10a and 10b. <p>1 _____ Yes 2 _____ No</p>	

S1_OTHERCOUNT	
ASK	<i>If S1_OTHEROFFENSES = 1 or missing</i>
<p>11b. According to your records at the end of the day on [REF_DATE], how many PERSONS UNDER AGE 21 had assigned beds in this facility FOR REASONS OTHER THAN OFFENSES?</p> <p><i><i>Include persons who were temporarily away but had assigned beds on [REF_DATE_SHORT]. Do NOT include staff.</i></i></p> <p>a. _____ Assigned beds because they were charged with or court adjudicated for an offense b. _____ Assigned beds for non-offense reasons</p>	

CJRP Questionnaire

S1_ONSITE_TREAT	
ASK	If S1_COUNT (a) > 0 or missing
<p>INSIDE refers to any location on the facility grounds. OUTSIDE refers to any location in the community or off facility grounds.</p> <p>12a. Does this facility provide ON-SITE RESIDENTIAL TREATMENT INSIDE this facility?</p> <p>1 Yes 2 No</p>	

S1_ONSITE_TREAT_TYPE	
ASK	If S1_COUNT (a) > 0 or missing
<p>12b. What kind of treatment is provided INSIDE this facility? <i>Select all that apply</i></p> <p>1 Mental health treatment 2 Behavioral modification or therapy 3 Substance abuse treatment 4 Sex offender treatment 5 Treatment for arsonists 6 Treatment specifically for violent offenders 7 Trauma treatment 8 Anger management 9 Other - Please specify:</p>	

S1_FOSTERCARE	
ASK	If S1_LT21PERSONS > 0 or missing
<p>13. Does this facility provide foster care?</p> <p>1 Yes, for all young persons 2 Yes, for some but not all young persons 3 No</p>	

S1_INDLIVING	
ASK	If S1_COUNT (a) > 0 or missing
<p>14. Does this facility provide independent living arrangements for any young persons?</p> <p>1 Yes 2 No</p>	

S1_OVERFLOW	
ASK	If S1_COUNT (a) > 0 or missing
<p>15. On [REF_DATE], did this facility house any overflow detention population?</p> <p><i>"Overflow detention population" refers to those young persons who, because of the unavailability of beds in a detention center, are placed temporarily in a non-detention facility.</p> <p>If this facility is a detention center, answer "No". </i></p> <p>1 ——— Yes</p> <p>2 ——— No</p>	

S1_LOCKED	
ASK	If S1_COUNT (a) > 0 or missing
<p>16a. Are ANY young persons in this facility locked into their sleeping rooms by staff at ANY time to confine them?</p> <p>1 Yes</p> <p>2 No</p>	

S1_LOCKREAS	
ASK	If S1_LOCKED = 1 or missing
<p>16b. When are young persons in this facility locked into their sleeping rooms by staff? <i>Select all that apply.</i></p> <p>1 ——— When they are out of control</p> <p>2 ——— When they are suicidal</p> <p>3 ——— Rarely, no set schedule</p> <p>4 ——— During shift changes</p> <p>5 ——— Whenever they are in their sleeping rooms</p> <p>6 ——— At night</p> <p>7 ——— Part of each day</p> <p>8 ——— Most of each day</p> <p>9 ——— All of each day</p> <p>10 ——— Other — Please specify:</p>	

S1_LOCKSITS	
ASK	If S1_LOCKED = 1 or missing
<p>In what situations are young persons locked in their sleeping rooms? <i><i>Select all that apply.</i></i></p> <ul style="list-style-type: none"> 1 When they are out of control 2 When they are suicidal 3 For medical reasons other than suicide 4 During shift changes 5 Whenever they are in their sleeping rooms 6 As part of a set schedule 7 Other - Please specify: 	

S1_LOCKSCHED_A	
ASK	If S1_LOCKSITS = 5 or missing and FORM = A
<p>When are young persons locked in their sleeping rooms? <i><i>Select all that apply.</i></i></p> <ul style="list-style-type: none"> 1 All of the time 2 During the day for 2 hours or less 3 During the day for more than 2 hours 4 At night 	

S1_LOCKSCHED_B	
ASK	If S1_LOCKSITS = 5 or missing and FORM = B
<p>When are young persons locked in their sleeping rooms? <i><i>Select all that apply.</i></i></p> <ul style="list-style-type: none"> 1 Rarely 2 Sometimes 3 Often 4 Always 	

S1_LOCKFEATS	
ASK	<i>If S1_COUNT (a) > 0 or missing</i>
<p>17. Does this facility have any of the following features intended to confine young persons within specific areas? <i><i>Select all that apply.</i></i></p> <ul style="list-style-type: none"> 1 Doors for secure day rooms that are locked by staff to confine young persons within specific areas or rooms 2 Wing, floor, corridor, or other internal security doors that are locked by staff to confine young persons within specific areas 3 Outside doors that are locked by staff to confine young persons within specific buildings 4 External gates in fences or walls WITHOUT razor wire that are locked by staff to confine young persons 5 External gates in fences or walls WITH razor wire that are locked to confine young persons 6 Other – Please specify: 7 The facility has none of the above features. 	

S1_OUTDOORLOCKED	
ASK	<i>If S1_COUNT (a) > 0 or missing</i>
<p>18a. Are outside doors to any buildings with living/sleeping units in this facility ever locked?</p> <ul style="list-style-type: none"> 1 Yes 2 No 	

S1_OUTDOORLOCKED_REAS	
ASK	<i>If S1_OUTDOORLOCKED = 1 or missing</i>
<p>21b. Why Are outside doors to buildings with living/sleeping units in this facility locked to keep young persons inside this facility? <i><i>Select all that apply.</i></i></p> <ul style="list-style-type: none"> 1 Yes To keep intruders out 2 No To keep young persons inside this facility 	

S1_OUTDOORLOCKED_WHEN	
ASK	If S1_OUTDOORLOCKED = 1 or missing
<p>18c. WHEN are outside doors to buildings with living/sleeping units in this facility locked? <i><i>Select all that apply.</i></i></p> <p>1 All of the time</p> <p>2 Rarely, no set schedule</p> <p>3 Part of each day During the day for 2 hours or less</p> <p>4 Most of each day During the day for more than 2 hours</p> <p>5 At night</p> <p>6 All of each day</p> <p>7 When the facility is unoccupied</p> <p>8 Other – Please specify:</p>	

S1_DEATHS	
ASK	If S1_COUNT (a) > 0 or missing
<p><i>INSIDE refers to any location on the facility grounds.</i></p> <p><i>OUTSIDE refers to any location in the community or off facility grounds.</i></p> <p>19. During the YEAR between [YEAR_REF_START] and [YEAR_REF_END], did ANY young persons die while assigned a bed at this facility at a location either INSIDE or OUTSIDE of this facility?</p> <p>1 Yes</p> <p>2 No</p>	

S1_DEATHS_COUNT	
ASK	If S1_DEATHS = 1 or missing
<p>20. How many young persons died while assigned beds at this facility during the year between [YEAR_REF_START] and [YEAR_REF_END]?</p> <p>_____ Person(s)</p>	

SECTION 2a: LENGTH OF STAY

S2a_RELEASE14	
ASK	<i>If S1_COUNT (a) > 0 or missing</i>
<p>How many young persons were released from this facility in the 14 days prior to [REF_DATE], that is between [REF_DATE_14] and [REF_DATE]?</p> <p><i>Please do not include any young persons who were only temporarily released from your facility, such as those released for medical care at a hospital.</i></p> <p>_____ Young persons released in the 14 days prior to [REF_DATE]</p>	

S2a_RELEASE30	
ASK	<i>If S1_COUNT (a) > 0 or missing</i>
<p>How many young persons were released from this facility in the 30 days prior to [REF_DATE], that is between [REF_DATE_30] and [REF_DATE]?</p> <p><i>Please do not include any young persons who were only temporarily released from your facility, such as those released for medical care at a hospital.</i></p> <p>_____ Young persons released in the 30 days prior to [REF_DATE]</p>	

S2a_LOS30	
ASK	<i>If S1_COUNT (a) > 0 or missing and FORM = B</i>
<p>What was the average length of stay (in days) for all young persons who were released from this facility in the 30 days prior to [REF_DATE], that is between [REF_DATE_30] and [REF_DATE]? To calculate, sum the total number of days in custody for the youths who were released in the last 30 days. Divide the total number of days by the total number of youths released in the last 30 days to get an average length of stay. Please report up to 2 decimal places.</p> <p>_____ Average length of stay (in days) for all young persons released in the 30 days prior to [REF_DATE]</p>	

S2a_LOSINTRO_A	
ASK	If S1_COUNT (a) > 0 or missing and FORM = A
<p>In this section you will be asked to record individual-level information on the last 20 young persons released from the facility prior to [REF_DATE].</p> <p>For the last 20 young persons who were released from your facility, please provide the sex assigned at birth, date of birth, race, three most serious offenses, date of admission, date of release and where this person was released to.</p> <p><i>Please do not include any young persons who were only temporarily released from your facility, such as those released for medical care at a hospital.</i></p> <p>Data requested and required format for each person:</p> <ol style="list-style-type: none"> 1. An identifier (ID number or first name and last initial) 2. Sex assigned at birth (select 1 code from list below) <ol style="list-style-type: none"> 1. Male 2. Female 3. Date of birth (month/day/year) 4. Race (select 1 code from list below) <ol style="list-style-type: none"> 1. White, not of Hispanic origin 2. Black or African American, not of Hispanic origin 3. Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race) 4. American Indian/Alaska Native, not of Hispanic origin 5. Asian, not of Hispanic origin 6. Native Hawaiian or other Pacific Islander, not of Hispanic origin 7. Two or More Races, not of Hispanic origin (specify) 5. Three most serious offenses resulting in this placement. If the offense(s) was also a probation or parole violation, please check the box to the right of the code you entered. See the Offense Codes here for reference. 6. Date person was admitted to this facility for the most serious offenses listed in #5 (month/day/year) 7. Date person was released from this facility for the most serious offenses listed in #5 (month/day/year) 8. Where person was release to (text box for written response) 	

S2a_LOSINTRO_B	
ASK	If S1_COUNT (a) > 0 or missing and FORM = B
<p>In this section you will be asked to record individual-level information on the last 20 young persons released from the facility prior to [REF_DATE].</p> <p>For the last 20 young persons who were released from your facility, please provide the sex assigned at birth, date of birth, race, three most serious offenses, date of admission, date of release and where this person was released to.</p> <p><i>Please do not include any young persons who were only temporarily released from your facility, such as those released for medical care at a hospital.</i></p> <p>Data requested and required format for each person:</p> <ol style="list-style-type: none"> 1. An identifier (ID number or first name and last initial) 2. Sex assigned at birth (select 1 code from list below) <ol style="list-style-type: none"> 1. Male 2. Female 3. Date of birth (month/day/year) 4. Race (select 1 code from list below) <ol style="list-style-type: none"> 1. White, not of Hispanic origin 2. Black or African American, not of Hispanic origin 3. Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race) 4. American Indian/Alaska Native, not of Hispanic origin 5. Asian, not of Hispanic origin 6. Native Hawaiian or other Pacific Islander, not of Hispanic origin 7. Two or More Races, not of Hispanic origin (specify) 5. Three most serious offenses resulting in this placement. If the offense(s) was also a probation or parole violation, please check the box to the right of the code you entered. See the Offense Codes here for reference. 6. Date person was admitted to this facility for the most serious offenses listed in #5 (month/day/year) 7. Date person was released from this facility for the most serious offenses listed in #5 (month/day/year) 8. Where person was release to (select 1 code from list below) <ol style="list-style-type: none"> 1. Released to another facility 2. Released to the supervision of probation or parole 3. Released without supervision of probation or parole 4. Other (specify) 5. Don't know 	

S2a_LOSROSTER											
ASK	If S1_COUNT (a) > 0 or missing										
<p>IMPORTANT INSTRUCTIONS: Please upload your Template file provided on the previous page, <u>OR</u> enter information below for the last 20 young persons released from this facility prior to [REF_DATE].</p> <p>Click 'Finished Adding Persons' when all persons have been entered.</p> <p>[button-UPLOAD TEMPLATE] OR [button-ADD A PERSON]</p> <p style="text-align: center;">[button-FINISHED ADDING PERSONS]</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Count</th> <th style="width: 30%;">ID Number/Name</th> <th style="width: 30%;">Sex assigned at birth</th> <th style="width: 30%;">Date of Birth</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td>[row populates after a new person is added]</td> <td>[row populates after a new person is added]</td> <td>[row populates after a new person is added]</td> </tr> </tbody> </table>				Count	ID Number/Name	Sex assigned at birth	Date of Birth	1	[row populates after a new person is added]	[row populates after a new person is added]	[row populates after a new person is added]
Count	ID Number/Name	Sex assigned at birth	Date of Birth								
1	[row populates after a new person is added]	[row populates after a new person is added]	[row populates after a new person is added]								

S2a_LOSROSTER_UPLOAD	
ASK	Respondents who choose File Upload
<p>FILE UPLOADS</p> <ul style="list-style-type: none"> Click the "Browse" button to browse for the file you'd like to upload to our site. Select the file you want to upload. Click the "Upload File" button to start the uploading process. Once your file has been uploaded successfully the file name will appear in the box below. Click 'Submit' after your file has been uploaded. <p>Select File to Upload [button-Browse]</p> <p>[button-Upload file] No files have been uploaded</p> <p>[button-Return to Section 2a Instructions] [button-Submit]</p>	

S2a_LOSROSTER_ADD_A	
ASK	Respondents who choose to Add a Person and FORM = A
<p>1. Enter an identifier (ID number or first name and last initial). Use an identifier that will allow YOU to reidentify each person in the future.</p> <p>2. Sex assigned at birth</p> <p style="margin-left: 20px;">1 Male</p> <p style="margin-left: 20px;">2 Female</p> <p>3. Date of birth</p> <p>4. Race</p> <p style="margin-left: 20px;">1 White, not of Hispanic origin</p> <p style="margin-left: 20px;">2 Black or African American, not of Hispanic origin</p> <p style="margin-left: 20px;">3 Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race)</p> <p style="margin-left: 20px;">4 American Indian/Alaska Native, not of Hispanic origin</p> <p style="margin-left: 20px;">5 Asian, not of Hispanic origin</p> <p style="margin-left: 20px;">6 Native Hawaiian or other Pacific Islander, not of Hispanic origin</p> <p style="margin-left: 20px;">7 Two or More Races, not of Hispanic origin (specify)</p> <p>5. What were the three most serious offenses for which person was assigned bed on [REF_DATE_SHORT]? Enter the code for the three most serious offenses resulting in this placement. If the offense(s) was also a probation or parole violation, please check the box to the right of the code you entered. See the Offense Codes here for reference.</p> <p>6. On what date was this person admitted to this facility for the three most serious offenses? If more than one date applies, enter the earliest one for the offenses listed.</p> <p>7. On what date was this person released from this facility?</p> <p>8. Where was this person released to?</p> <p>[button-Cancel] [button-Add Person]</p>	

S2a_LOSROSTER_ADD_A	
ASK	Respondents who choose to Add a Person and FORM = B
<p>1. Enter an identifier (ID number or first name and last initial). Use an identifier that will allow YOU to reidentify each person in the future.</p> <p>2. Sex assigned at birth</p> <p>1 Male</p> <p>2 Female</p> <p>3. Date of birth</p> <p>4. Race</p> <p>1 White, not of Hispanic origin</p> <p>2 Black or African American, not of Hispanic origin</p> <p>3 Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race)</p> <p>4 American Indian/Alaska Native, not of Hispanic origin</p> <p>5 Asian, not of Hispanic origin</p> <p>6 Native Hawaiian or other Pacific Islander, not of Hispanic origin</p> <p>7 Two or More Races, not of Hispanic origin (specify)</p> <p>5. What were the three most serious offenses for which person was assigned bed on [REF_DATE_SHORT]? Enter the code for the three most serious offenses resulting in this placement. If the offense(s) was also a probation or parole violation, please check the box to the right of the code you entered. See the Offense Codes here for reference.</p> <p>6. On what date was this person admitted to this facility for the three most serious offenses? If more than one date applies, enter the earliest one for the offenses listed.</p> <p>7. On what date was this person released from this facility?</p> <p>8. Where was this person released to?</p> <p>1 Released to another facility</p> <p>2 Released to the supervision of probation or parole</p> <p>3 Released without supervision of probation or parole</p> <p>4 Other (specify)</p> <p>5 Don't know</p> <p>[button-Cancel] [button-Add Person]</p>	

CJRP Questionnaire

S2a_FEAS_ETHNICITY	
ASK	<i>If S1_COUNT (a) > 0 or missing</i>
<p>Does your facility document the Hispanic ethnicity of a young person separate from his/her race, such that you would be able to report both the Hispanic ethnicity and the race(s) for each young person in your facility? <i>For example, Hispanic and Black, or Non-Hispanic and Black.</i></p> <p>1 Yes 2 No</p>	

S2a_FEAS_RACE	
ASK	<i>If S1_COUNT (a) > 0 or missing</i>
<p>Does your facility document all races of a young person who identifies as two or more races, such that you would be able to report all races associated with each young person in your facility?</p> <p>1 Yes 2 No</p>	

S2a_FEAS_RACEETH_HOW	
ASK	<i>If S1_COUNT (a) > 0 or missing</i>
<p>How is race/ethnicity information determined? <i>Select all that apply</i></p> <p>1 Race/ethnicity are self-reported by youth 2 Race/ethnicity is determined by staff 3 Race/ethnicity is obtained from the referral source (e.g., Juvenile court) 4 Other, please specify</p>	

S2a_FEAS_GENDERID	
ASK	<i>If S1_COUNT (a) > 0 or missing</i>
<p>Does your facility document gender identity of all young persons, such that you would be able to report both the sex assigned at birth and the self-reported gender identity for each young person in your facility? <i>For example, male and transgender male to female.</i></p> <p>1 Yes 2 No</p>	

SECTION 2: PERSON LEVEL DATA

S2_INTRO	
ASK	<i>If S1_COUNTCATS (a) > 0 or missing</i>
<p>IMPORTANT INSTRUCTIONS List ONLY THOSE PERSONS WHO FULFILL ALL 4 REQUIREMENTS BELOW (A, B, C, AND D)</p> <p>A. Under Age 21; AND B. assigned a bed in this facility at the end of the day on [ref_date]; AND C. charged with an offense or court-adjudicated for an offense; AND D. assigned a bed here BECAUSE OF THE OFFENSE</p> <p>There are two options for submitting Section II Data</p> <ol style="list-style-type: none"> 1. Proceed to the next page and enter Section II data for each juvenile meeting Section II requirements 2. Upload a data file (Recommended for facilities with 50 or more records) <ol style="list-style-type: none"> a. Use our formatted Excel Template Download an Excel Template, enter required Section II data and upload on the next page. b. Create your own file we will accept any type of data file (excel, word, text, etc.). Upload file on the next page. <p>To download the Excel Template:</p> <ol style="list-style-type: none"> 1. Click on the Highlighted Download Excel Template Text: Download Excel Template [xls] 2. Save the Template to a location of your choice 3. Enter Section II data directly into the Excel Template Save the file 4. To upload your file, proceed to the next page and follow the upload file instructions. <p>In this section you will be asked to record individual-level information on the young persons in the facility on [REF_DATE] specifically because they were charged with or court-adjudicated for an offense. You reported <u>[fill S1_COUNTCATS (a) value]</u> persons that fit this description in Section I, question 10b.</p> <p>For all <u>[fill S1_COUNTCATS(a) value]</u> persons, please provide the 10 pieces of information listed below. You may find it helpful to use this Excel Template to fill information in. Save the Template to a location of your choice before filling it out. On the next screen you may re-upload the Template or instead enter information directly into the webpage.</p> <p>Data requested and required format for each person:</p> <ol style="list-style-type: none"> 1. An identifier (ID number or first name and last initial) 2. Sex assigned at birth (select 1 code from list below) <ol style="list-style-type: none"> 1. Male 2. Female 3. Date of birth (month/day/year) 4. Race (select 1 code from list below) <ol style="list-style-type: none"> 1. White, not of Hispanic origin 2. Black or African American, not of Hispanic origin 3. Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race) 4. American Indian/Alaska Native, not of Hispanic origin 5. Asian, not of Hispanic origin 6. Native Hawaiian or other Pacific Islander, not of Hispanic origin 7. Two or More Races, not of Hispanic origin (specify) 5. Who placed this person at this facility (select 1 code from list below) <ol style="list-style-type: none"> 1. Court, probation agency, or law enforcement agency 	

CJRP Questionnaire

2. Corrections or other justice agency not included in option 1
3. Social services agency
4. School official, parent or guardian, or young person him/herself
5. Other (specify)
6. Level of the agency that placed this person at this facility (select 1 code from list below)
 1. Federal
 2. A Native American Tribal Government
 3. State
 4. County
 5. Municipal (includes Washington, DC)
 6. Other (specify)
7. **Three** most serious offenses for which person was assigned bed on [REF_DATE_SHORT]. **If the offense(s) was also a probation or parole violation, please check the box to the right of the code you entered.** See the Offense Codes [here](#) for reference.
8. State or territory where person committed the most serious offense listed in #7
9. Person's adjudication status on [REF_DATE_SHORT] for the most serious offense listed in #7.
"Adjudication" is the court process which determines whether or not the person committed the offense.
(select 1 code from list below)
 1. Agreement not to adjudicate (diversion)
 2. Awaiting adjudication hearing in juvenile court
 3. Adjudicated, awaiting disposition by juvenile court
 4. Adjudicated and disposed in juvenile court and awaiting placement elsewhere
 5. Adjudicated and disposed in juvenile court, in placement here
 6. Awaiting transfer hearing to adult criminal court
 7. Awaiting hearing or trial in adult criminal court
 8. Convicted in adult criminal court
 9. Don't Know
 10. Other (specify)
9. Date person was admitted to this facility for the most serious offense listed in #7

S2_ROSTER											
ASK	If S1_COUNTCATS (a) > 0 or missing										
<p>IMPORTANT INSTRUCTIONS: Please upload your Template file provided on the previous page, <u>OR</u> enter information below for all <u>[fill S1_COUNTCATS (a)value]</u> persons under age 21 that were assigned beds in the facility on [REF_DATE] specifically because they were charged with or court-adjudicated for an offense.</p> <p> Do NOT list persons assigned beds here for reasons other than offenses. Click 'Finished Adding Persons' when all persons have been entered.</p> <p>[button-UPLOAD TEMPLATE] OR [button-ADD A PERSON]</p> <p style="text-align: center;">[button-FINISHED ADDING PERSONS]</p> <table border="1"> <thead> <tr> <th>Count</th> <th>ID Number/Name</th> <th>Sex assigned at birth</th> <th>Date of Birth</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>[row populates after a new person is added]</td> <td>[row populates after a new person is added]</td> <td>[row populates after a new person is added]</td> </tr> </tbody> </table>				Count	ID Number/Name	Sex assigned at birth	Date of Birth	1	[row populates after a new person is added]	[row populates after a new person is added]	[row populates after a new person is added]
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1	[row populates after a new person is added]	[row populates after a new person is added]	[row populates after a new person is added]								

S2_ROSTER_UPLOAD	
ASK	Respondents who choose File Upload
<p>FILE UPLOADS</p> <ul style="list-style-type: none"> • Click the "Browse" button to browse for the file you'd like to upload to our site. • Select the file you want to upload. • Click the "Upload File" button to start the uploading process. • Once your file has been uploaded successfully the file name will appear in the box below. • Click 'Submit' after your file has been uploaded. <p>Select File to Upload [button-Browse]</p> <p>[button-Upload file] No files have been uploaded</p> <p>[button-Return to Section II Instructions] [button-Submit]</p>	

S2_ROSTER_ADD	
ASK	Respondents who choose to Add a Person

CJRP Questionnaire

1. Enter an identifier (ID number or first name and last initial). Use an identifier that will allow YOU to reidentify each person in the future.
2. Sex **assigned at birth**
 - 1 Male
 - 2 Female
3. Date of birth
4. Race
 - 1 White, not of Hispanic origin
 - 2 Black or African American, not of Hispanic origin
 - 3 Hispanic or Latino (i.e. Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race)
 - 4 American Indian/Alaska Native, not of Hispanic origin
 - 5 Asian, not of Hispanic origin
 - 6 Native Hawaiian or other Pacific Islander, not of Hispanic origin
 - 7 Two or More Races, not of Hispanic origin (specify)
5. Who placed this person at this facility (select 1 code from list below)
 - 1 Court, probation agency, or law enforcement agency
 - 2 Corrections or other justice agency not included in option 1
 - 3 Social services agency
 - 4 School official, parent or guardian, or young person him/herself
 - 5 Other (specify)
6. Is the court, probation, or law enforcement agency, or other agency referred to in question 5 at the federal, tribal, state, county, or municipal level?
 - 1 Federal
 - 2 A Native American Tribal Government
 - 3 State
 - 4 County
 - 5 Municipal (includes Washington, DC)
 - 6 Other (specify)
7. What ~~was the~~ **were the three** most serious offenses for which person was assigned bed on [REF_DATE_SHORT]? Enter the code for the **three** most serious offenses resulting in this placement. **If the offense(s) was also a probation or parole violation, please check the box to the right of the code you entered.** See the Offense Codes <link>[here](#)</link> for reference.
8. In which state or territory did this person commit the most serious offense?
9. On [REF_DATE_SHORT], what was this person's court adjudication status for the most serious offense? "Adjudication" is the court process which determines whether or not the person committed the offense.
 - 1 Agreement not to adjudicate (diversion)
 - 2 Awaiting adjudication hearing in juvenile court
 - 3 Adjudicated, awaiting disposition by juvenile court
 - 4 Adjudicated and disposed in juvenile court and awaiting placement elsewhere
 - 5 Adjudicated and disposed in juvenile court, in placement here
 - 6 Awaiting transfer hearing to adult criminal court
 - 7 Awaiting hearing or trial in adult criminal court
 - 8 Convicted in adult criminal court

CJRP Questionnaire

- 99 Don't Know
- 10 Other (specify)

10. On what date was this person admitted to this facility for the most serious offense? If more than one date applies, enter the earliest one for the offense listed.

[\[button-Cancel\]](#) [\[button-Add Person\]](#)

END PAGES

ELIGIBILITY	
ASK	<i>If S1_COUNT (c) = 0 or S1_COUNT (a) = 0</i>
<p>Based on your prior answer, what was the reason there was no one (<i>if S1_COUNT (a) = 0: under 21</i>) with assigned beds in your facility?</p> <ol style="list-style-type: none"> 1 Facility Permanently Closed – Specify reason and date of closure 2 Facility Temporarily Closed – Specify reason and reopen date (if known) 3 Adult Only Facility – Specify when facility stopped holding juvenile offenders 4 Other – Specify 	

BURDEN_ESTIMATE	
ASK	<i>All Respondents</i>
<p>Thank you for participating in the 2021 CJRP pilot test. To help inform future CJRP data collection efforts, we would like to understand more about your experience filling out this questionnaire.</p> <p>About how many hours did it take you to complete this questionnaire? <i><i>Please include any time you spent gathering the necessary information.</i></i></p>	

COMMENTS	
ASK	<i>All Respondents</i>
<p>Please provide any comments you have about the data submitted on this form.</p> <p>Click the 'Submit Data' button below to finalize your survey. Once data has been submitted you will be locked out of the survey an unable to make any changes.</p> <p>[button-Previous] [button-Submit Data]</p>	

THANKYOU	
ASK	<i>All Respondents</i>
<p>Thank you for electronically submitting the 2021 Census of Juveniles in Residential Placement Pilot Study questionnaire. Please remember to print a copy of your submission so that if we need to call you about an answer, you will be able to refer to your copy.</p> <p>Would you like a PDF of the form with your answers?-</p> <p>If you have any questions, please contact 2021 CJRP Pilot Study help desk staff at [phone] or [email].</p>	