

## **Youth Competency Assessment (YCA)**

[Notes Version]

***Introduction:*** *It is likely that you will begin the interview by conducting usual Department/Court business: meeting the youth and any other people who are present, introducing yourself, and providing some information about why the youth is there, what they can expect from their visit today and their involvement with you overall, and what expectations the Department/Court has of them. The YCA has the following purposes and goals: 1) To start the process of understanding harm done and how to repair it, 2) To get to know the youth and her/his strengths, and 3) To decide together on competency areas to develop or explore.*

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**Section A: Repairing Harm**

*\* What personal strengths does the youth have that he/she can use to make up for past mistakes? \**

a. Where have you learned about how to decide right from wrong (e.g., parent, teacher)? What are some examples of what they taught you?

b. Think about what got you in trouble this last time. Who did it hurt? Is there anything you've already done to make up for your actions? What (else) you could do?

c. What could you do to show people that you'll make different decisions in the future? How would these choices benefit you?

**Section B: Creating a Healthy Identity**

*\* What positive skills and qualities does the youth have that will help her/him succeed? What behaviors does the youth exhibit that reflect a positive identity? \**

Sample Questions:

d. How do you like to spend your free time?  
Hobbies? Sports? Music/Movies? (These questions look for engagement in productive activities)

e. Are you going to school or working anywhere (or have you ever)? What types of things did you enjoy? What were you good at?

f. What types of skills do you have? (This area might need probing and you might need to provide some suggestions)  
[Follow up with...How do you think these skills will help you in your life?]

g. One of the things we'll be doing together is making some plans for the next few months. What goals would you like to try to achieve in the next \_\_\_\_\_ (month? 3 months? etc.)? What areas would you like to explore?

h. How would you describe yourself?

i. What is something you like about yourself? (Probe for something more than the superficial)

Notes

Youth Name/I.D. # \_\_\_\_\_

Date: \_\_/\_\_/\_\_\_\_

Counselor/Staff Name/I.D. # \_\_\_\_\_

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#### **Section C: Connecting with Family, Peers, and Community**

*\* Are there positive people in the youth's life who can serve as a resource for her/him? \**

j. Who do you spend most of your time with? (Looking for a connection with adults, positive role models)

k. Describe the people you feel most safe with... Who are they? If there isn't someone, what are some ways we could help find someone? What is it that makes you feel safe?

l. Who in your life helps you reach your goals or explore your interests? If there isn't someone, what are some ways we could help find someone?

m. Name some people that you respect or that you see doing things you like or appreciate (e.g., teacher, coach, musician, doctor, neighbor). What kinds of things do they do? Who in your family do you admire most? (Why?) Which friend do you admire most? (Why?)

n. Tell me about a time when someone did something nice for you, or helped you out, or gave you something you needed. Why did the person do it?

o. Tell me about a time you did something nice for someone else, or you helped them out, or you gave them something they needed. What types of things do you enjoy doing for others?

p. Who counts on you? [Follow up with...What do you do for them?]

Notes
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**Note:** If youth is unable to provide positive information about him/herself, it may indicate depression or another underlying issue. Please screen or refer for screening as necessary.

Youth Name/I.D. # \_\_\_\_\_

Date: \_\_/\_\_/\_\_\_\_

Counselor/Staff Name/I.D. # \_\_\_\_\_

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YCA Summary and Plan

1. Youth's skills/resources/strengths (can include community or cultural strengths or supports)

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

2. Short-term competency development/skill building areas:

a. Mentoring others or being mentored: \_\_\_\_\_

\_\_\_\_\_ Review date: \_\_\_\_\_

b. Education or Career: \_\_\_\_\_

\_\_\_\_\_ Review date: \_\_\_\_\_

c. Family or peer relationships: \_\_\_\_\_

\_\_\_\_\_ Review date: \_\_\_\_\_

d. Repairing harm: \_\_\_\_\_

\_\_\_\_\_ Review date: \_\_\_\_\_

e. Other: \_\_\_\_\_

\_\_\_\_\_ Review date: \_\_\_\_\_

3. People who can support youth to develop competencies/skills:

a. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

b. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

c. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

4. Summary of youth's long-term goals/plan for future: \_\_\_\_\_

\_\_\_\_\_  
*Now use this information in designing your case plan.*