



SELF-IDENTIFIED ADMISSION QUESTIONNAIRE (Adult) to inform placement, assessment & case management

Sections A – I: must be completed by the officer responsible for Orientation and Assessment (O&A), with all clients, in as confidential a manner as possible (preferably in a private area).

Section J: to be completed by the officer responsible for O&A, Case Management Officer (CMO) and O&A board.

A. Client data:

Client's name as per legal document: _____ CIS Person #: _____

Do you go by an identified name different from that on the legal document? Yes No Declined to answer

What is your identified name? _____

B. Which of the following expresses your gender?

- | | | | |
|-------------------------------------|---------------------------------------|--------------------------------|---|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="checkbox"/> Trans | <input type="checkbox"/> Prefer not to disclose |
| <input type="checkbox"/> Trans Male | <input type="checkbox"/> Trans Female | <input type="checkbox"/> _____ | |

Is this different from your birth-assigned sex? Yes No Declined to answer

*** If the client's response is yes continuing completing this section (if client's response is no, proceed to section C)

▪ Searches:

Which gender of staff do you prefer to preform Pat & Frisk searches? Male Female Split

Which gender of staff do you prefer to preform Strip searches? Male Female Split

Any additional information (for split searches specify which part of the search is to be conducted by a male Correctional Officer and which part by a female Correctional Officer):

▪ Clothing and personal items:

*** Explain that clothing is assigned by unit placement, but that underwear will be provided in accordance with gender identity

What type of underwear do you require? Briefs Panties Bra

Do you require any personal items to express your gender? Yes No
(e.g., prosthetics, binders, brassieres, hair pieces, etc.)

Any additional information (was clothing provided consistent with the client's gender identity/if client's preferred clothing was not provided document rationale and interim/next best solutions implemented/if personal items are required specify what those items are):

▪ Placement:

What is your preferred unit placement? Male unit Female unit

What is your housing preference? Single cell Compatible cell mate Alternate housing unit

Temporary placement assigned: _____

C. Are you a veteran? Yes No Declined to answer

D. Do you consider yourself a person with a disability? Yes No Declined to answer

Any additional information (e.g., details of disability / any required accommodations. Advise client to please advise Health Care staff if they require accommodations):

E. Do you identify as an Aboriginal Person (First Nations, Inuit or Metis)? Yes No Declined to answer

*** If the client's response is yes continuing completing this section (if clients response is no, proceed to section F)

Are you a "Status Indian"? Yes No Declined to answer

Do you live "on-reserve"? Yes No Declined to answer

Any additional information/details:

F. Do you consider yourself to be a member of a visible minority/racialized group? Yes No Declined to answer

Any additional information/details (please indicate group):

G. Do you require accommodation/have any needs that may impact your placement and care? Yes No Declined to answer

Any additional information/details:

H. Notifications (if appropriate):

Superintendent or designate (i.e. immediate supervisor) Yes No

Social Worker or designate (i.e. Team Lead or Correctional Case Yes No

Manager)

I. Placement Decision *(to be completed by the case management officer and reviewed by the O&A board if needed):*

Facility: _____ Unit Placement (location): _____

- Does this placement correspond with the client's needs?
 (e.g., gender, protective custody, medical/mental health) Yes No
- Is this placement consistent with the client's unit placement preference? Yes No
- Is this a temporary placement? Yes No
- If yes, has an immediate transfer been requested to another facility? Yes No
- Does the client agree with the placement decision? Yes No
- If no, was information provided about the complaint and appeal process? Yes No

Completed by:

Name (print)	Signature	Date
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J. Placement Decision Details *(to be completed by the admissions officer, case management officer and O&A board):*

Please document details (reasons for placement, steps taken to mitigate any safety or health concerns, any interim/next best solutions implemented, any disagreement with the placement decision, any needs requiring consideration, etc.)

Completed form must be uploaded to JEIN

Do Ask, Do Tell: Encouraging Clients to Self-Identify

It is important to obtain the information contained in this questionnaire. Questions should be asked in a manner which does not limit individuals to confine themselves to singular labels. Asking someone how they identify opens a dialogue without forcing them into a predetermined category, effective communication skills are required. Your approach to delivering this questionnaire will impact responses received, please use this information to inform the client about the importance of self-identification.

Self-Identification is VOLUNTARY

Self-Identification is important because it allows us to better meet your needs while involved in the justice system

Privacy:

Information obtained in the Self-Identified Admission Questionnaire will be held in the strictest of confidence and only be shared for case management purposes in accordance with the:

- Youth Criminal Justice Act
- Freedom of Information and Protection of Privacy Act
- Correctional Services Act, and its Regulations

Purpose for collecting the information:

Correctional Services collects information on gender identity to ensure:

- individuals are placed in units in accordance with how they express their gender
- searches are completed in a respectful manner
- clothing and personal items are issued in accordance with gender identity

Correctional Services recognizes that Indigenous peoples are over-represented in correctional facilities as compared to the New Brunswick population. Information about ethnic background is collected to:

- assist Correctional Services in understanding the ethnic and cultural diversity of the individuals in custody
- facilitate the development of programs and services to better meet the needs of all individuals
- establish partnerships with community-based organizations who are responsive to the needs of Indigenous New Brunswickers and/or other cultural groups, and can provide support to individuals once released from custody