



SNAP® – Brief Intake Screening Form – Parent Report

Conduct/Oppositional Problem Checklist

(Adapted from the Child Behavior Checklist – CBCL: Achenbach, 2001)

This “quick” checklist is to be used as a preliminary assessment of externalizing behaviour problems (specific to conduct and/or oppositional type problems) and is to be used only as part of the intake referral process to help determine suitability for children/students 6-11 years of age in the SNAP® Program.

Instructions: Please ask parent(s) to indicate if any of these behaviours have occurred over the last several months (do not go back more than six months). Please rate each item 0, 1 or 2 based on the parent’s response and frequency of behaviour.

BEHAVIOUR	0 “Never”	1 “Sometimes”	2 “Often”
Cruel to Animals			
Cruelty, Bullying or Mean to Others*			
Destroy Things Belonging to Others			
No Guilt			
Breaks Rules			
Fights			
Bad Friends			
Lies & Cheats			
Physically Attacks People			
Runs Away			
Sets Fires			
Steals at Home			
Steals (outside of home)			
Swears			
Threatens Others			
Truant			
Vandalism			
Subtotal A			
Argues			
Disobedient at Home			
Disobedient at School			
Stubborn			
Temper			
Subtotal B			
(Subtotal A + Subtotal B)		Final Total	
Circle the Settings the Above Noted Behaviours Occur In	Home	School	Community
			Other (list)

Proceed to Full Screening: Yes No

Child’s Name: _____

Screener’s Name: _____ **Date:** _____

Please Note: *If this item is scored as a 2, the child should be considered for service regardless of final scores. See back of page for important instructions on scoring guidelines and whether to proceed to full screening, and how to identify other related problem behaviours (e.g., co-morbidity).

Instructions on how to administer the Brief Intake Screening Form:

1. Please ask parents to indicate if any of these behaviours have occurred over the last several months (do not go back more than six months), and ask them to rate each item based on the response and frequency of the behaviour.
2. Tally up all the ratings for each of the behaviours for *Subtotal A*.
3. Tally up all the ratings for each of the behaviours for *Subtotal B*.
4. Add *Subtotal A* and *Subtotal B* to obtain the *Final Total*.
5. Refer to the guidelines below to assess each subtotal and the final total to determine whether a full screening and assessment of the child/student is warranted.

Scale	Boys		Girls	
	Borderline Clinical Score	Clinical Score	Borderline Clinical Score	Clinical Score
Subtotal A (Conduct Problems)	9 – 12	13 and over	5 – 8	9 and over
Subtotal B (Oppositional Problems)	6 – 7	8 and over	4 – 5	6 and over

Subtotal Score(s) Needed to Proceed to Full Assessment: Guidelines for 6-11 year olds

A borderline clinical score indicates that only 3%-7% of children are engaging in similar levels of behaviour while a clinical score indicates that only 2% of children are engaging in similar levels of behaviour. If a child scores within the borderline or clinical score range, it warrants a “Yes” to proceeding to the full screening and assessment (including the CBCL, TRF and all other measures).

Co-morbidity Criteria:

If a child meets criteria for both Subtotal A (Conduct Problems) and Subtotal B (Oppositional Defiant Problems), this indicates that the child is experiencing both Conduct and Oppositional Problems. Based on this checklist, the child may be considered Co-morbid at intake and requires further assessment.

Scale	Boys	Girls
Final Total (Overall Externalizing Behaviour)	13	7

Final Total Score Needed to Proceed to Full Assessment: Guidelines for 6-11 year olds

Evidence of Problem Behaviour

If a child does not score within the borderline clinical or clinical range on either Subtotal A (Conduct Problems) or Subtotal B (Oppositional Problems) but has a **Final Total** score of 13 (boys) or 7 (girls) then a further screening is warranted. For example, if a girl is scoring just below the criteria for both scales (“4” on Conduct and “3” on Oppositional) it indicates that the girl is experiencing a level of behavioural problems that requires further assessment.

Please provide any insight in the space below indicating why you think this child may benefit from participating in this program.

If none, please check here: