

JCMS User Guide:

Assessment Program

**1/29/2018 [LATEST REVISION DATE:
4/16/2026]**

Quarterly Reporting Checklist: JCMS Programs

Quarterly:

- Make sure that your individual youth data is entered and up to date in JCMS. **Please note that you don't have to wait until quarterly reporting to enter data.** The JCMS website was designed to be utilized as a case management system, so you can enter data for the youth as soon as they are referred to or enrolled in your program.

- Complete the three-question narrative in JCMS (refer to the **narrative entry section** for the walkthrough document). Please complete a narrative even if youth were not served during that quarter (GRANT ADMINISTRATION, TBD).

Annually:

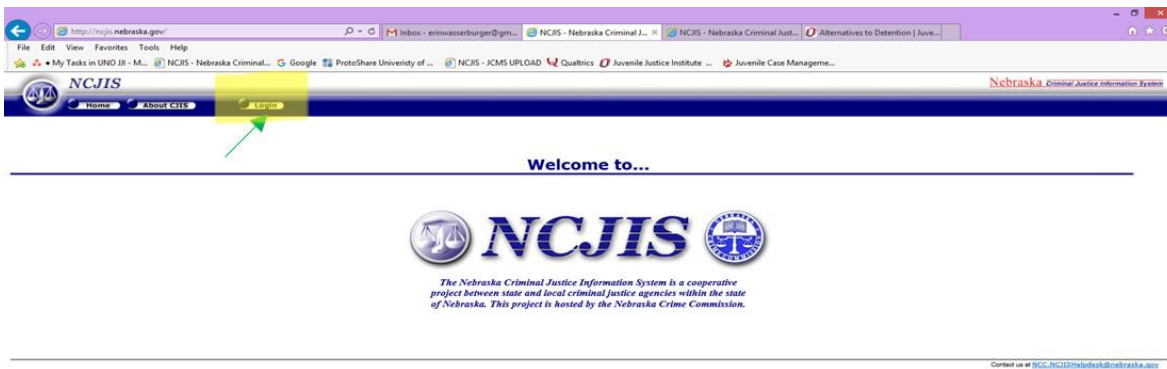
- Complete your program-level annual report (available at the end of each fiscal year).

Welcome to JCMS!

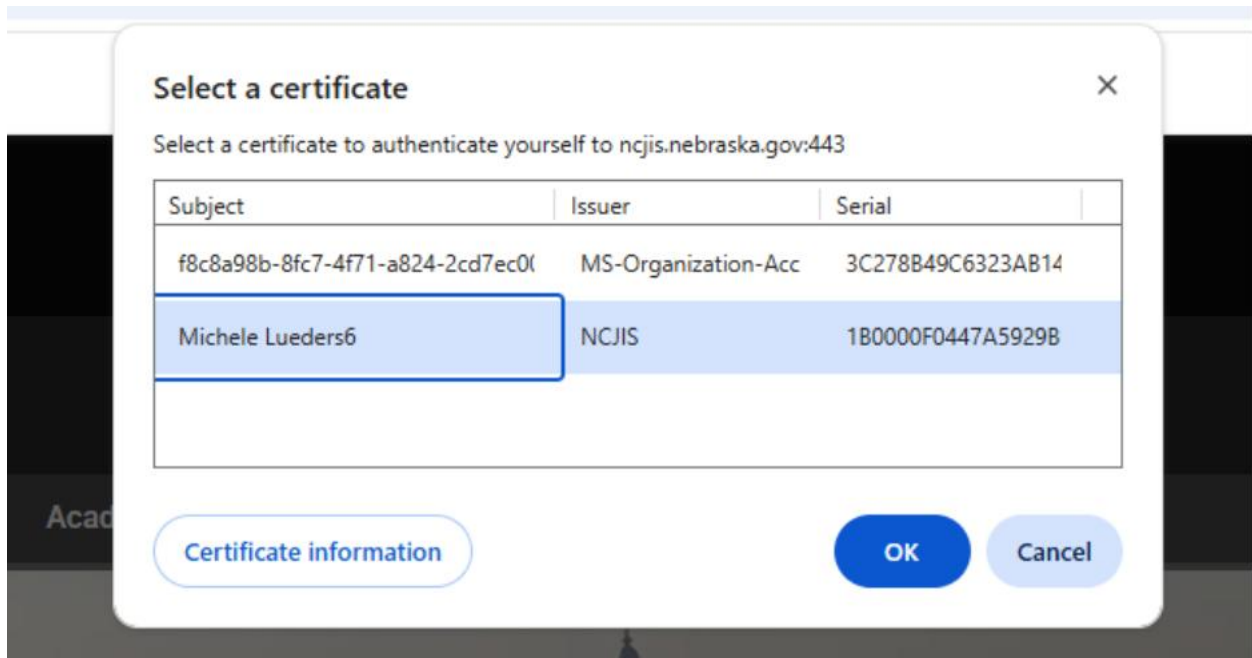
If a definition is ever needed for data entry, please refer to the JCMS Codebook Program Definitions.

To access JCMS, go to ncjis.nebraska.gov. **You must have a Crime Commission Certificate on your computer to access JCMS.** If you have not yet installed your certificate, please follow the installation instructions you received with your certificate. If you need a certificate, feel free to contact the JJI office at Allen.Windle@nebraska.gov.

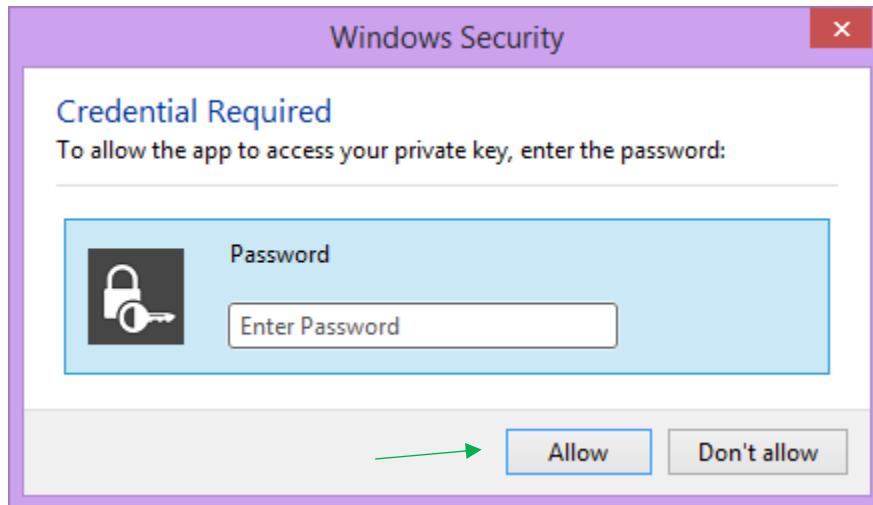
Click the “Login” button.



You will be prompted to select a specific certificate from the list of certificates you have on your computer. If you report for multiple counties, make sure you are picking the correct certificate. Below is a reference for what your JCMS certificate should look like.



A new window will pop up to ask for a password to allow the certificate. This is the password that you created when you installed your new certificate (refer to step 18 in the install process). Click allow when you have entered your password.



After inputting your credential password, enter your **website** password. Please refer to the random number/letter/symbol password that you received with your certificate. ***Passwords must be changed every 90 days. If you have been using JCMS for more than 90 days, refer to your new password.***

Login - Authorized Access Only

Intended for Criminal Justice Professionals of Nebraska

NCJIS Policy and Procedures
 Access to this site is restricted to NCJIS verified users. Any access to or use of the data is done in conjunction with the individual and agency agreements as well as any additional criteria stipulated by NCJIS. Misuse of the system or data may result in the loss of access privileges.

Please enter your password:



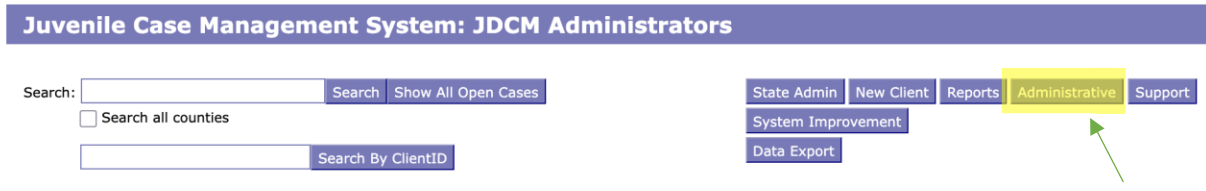
CONTINUING THE LOGIN PROCESS CONSTITUTES ACCEPTANCE OF THE CONDITIONS OF THE POLICIES AND PROCEDURES STATED ABOVE.

Click on the JCMS link under the Case Management section of the NCJIS home page.

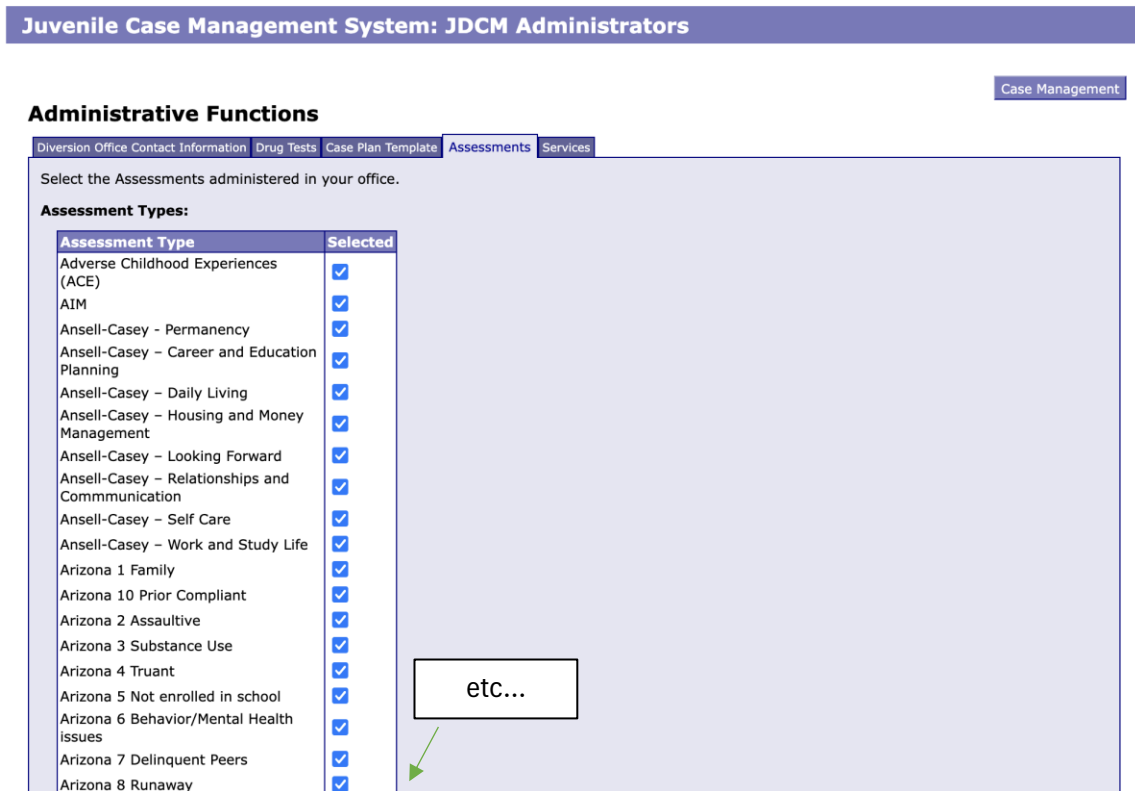
Nebraska Criminal Justice Information System				
<p>Master Person Search Master (Criminal) Physical Search</p> <p>Non Person Search Local Incidents Criminal Vehicle Property</p> <p>Criminal History Patrol Criminal Hist. Citations Local (NIBRS+)</p> <p>Warrants Warrants Active Warrants</p> <p>Protection Orders Protection Orders Active POs PO Portal</p> <p>Pardon Board Pardons</p>	<p>Corrections Corrections In Corrections/DCS Jails Juvenile Facilities In Juvenile Facility Bureau of Prisons (link)</p> <p>Community Supervision Probation Active Probation Active Parole US Probation</p> <p>Courts Courts Non Criminal Court Calendars (link) Seal/Unseal Record</p> <p>Sex Offender Registry State SOR National SOR (link)</p>	<p>DMV OLN OLN Physical Search OLN Re-examination DMV VTR By Vehicle VicToRy by Name</p> <p>NDOT Crash Records</p> <p>DOL Benefits Employers Wages</p> <p>DHHS APS Active APS CAN Active CAN PSA Current Wards Person Search Active Wards Youth Level of Service Safety Plan</p> <p>Students Students Schools Directory Students View List</p>	<p>Reporting Due Date Calendar Reporting Compliance</p> <p>NIBRS Repository (XML) Single Incident Reporting</p> <p>Monthly Use Of Force</p> <p>Quarterly Traffic Stop Racial Profiling Allegation DICRA (Death in Custody)</p> <p>Yearly Employment Data NLETC Online Forms</p> <p>Case Management JCMS ← NCVRS</p>	<p>My Account My User Profile Albums Subscription Subscription Lists Information Exchange</p> <p>Utilities Add Property Info CODIS Prelog NSP Crime Lab Case Portal NEVCAP Admin NSAT Standardized Model RISS (link) ALPR Map</p> <p>Resources Directory Search News Documents Jail Documents Job Listings</p> <p>Discussion Boards Group Training New NCAMA NSA PCAN POAN</p>

Data entry in JCMS

When it is your first time inputting assessments, you must start by selecting the “Administrative” button. You can also go back to this step whenever you need to add/remove an assessment or service type offered by your program.



When selected, the “Assessments” and “Services” tabs will become available. Please be aware that the green arrows show that these lists are continuous down the page, and most are not pictured in this image. **Some assessment and service types are selected automatically by default, so be sure to select/unselect assessment types as needed.**



Administrative Functions

Diversion Office Contact Information | Drug Tests | Case Plan Template | Assessments | **Services**

Select the Services administered in your office.

Services Provided:

Service	Selected
30-Day Agreement	<input type="checkbox"/>
About Face	<input type="checkbox"/>
Accountability Checks	<input type="checkbox"/>
After School Diversion Program-Owens	<input type="checkbox"/>
After School Pgrm-ENCAP	<input type="checkbox"/>
After School Program	<input type="checkbox"/>
After School-Omaha MS Learning Center Initiative	<input type="checkbox"/>
Alcohol Education Class	<input type="checkbox"/>
Alcohol Treatment	<input type="checkbox"/>
Alcohol-Wise JV	<input type="checkbox"/>
Alcoholic Anonymous	<input type="checkbox"/>
Alive at 25	<input type="checkbox"/>
ANGER MANAGEMENT/DV	<input type="checkbox"/>
Anger Mgmt	<input type="checkbox"/>
Anger Mgmt/Family Violence	<input type="checkbox"/>
Apology	<input type="checkbox"/>
Attitudinal Dynamics of Driving	<input type="checkbox"/>
Boy Scouts 3-Month Program	<input type="checkbox"/>
Boy Scouts 6-Month Program	<input type="checkbox"/>
Boy Scouts 6-Month Program	<input type="checkbox"/>
Boy Scouts Preteen Program	<input type="checkbox"/>

etc...

Once all types/services have been selected, please continue by selecting the “Case Management” button.

Administrative Functions

Diversion Office Contact Information | Drug Tests | Case Plan Template | Assessments | **Services**

From there, it will return you to the client search page. To create a new file for your youth, please select “New Client.”

Search: Search Show All Open Cases

Search all counties

Search By ClientID

State Admin | **New Client** | Reports | Administrative | Support

System Improvement

Data Export

After clicking on the “New Client” button, a screen will pop up that asks for all the demographic information about the youth. **All required sections are marked with an asterisk and highlighted.** The “Case Type” dropdown menu will show eligible programs by certificates. Be sure to choose the correct program for each youth, then click the “Save” button. This will create the intake and program screens for this program type.

Juvenile Case Management System: JDCM Administrators

Search: Search Show All Open Cases

Search all counties

Search By ClientID

State Admin New Client Reports Administrative Support
System Improvement
Data Export

Client

ClientID First Name * Middle Name Last Name * Date of Birth * Sex Assigned at Birth *

Gender Race * Hispanic/Latino * Self-Reported Race/Ethnicity NE Student ID

Agency * Referral/Event Date * Case Type *

JDCM Administrators 08/07/2025 Assessment Save Cancel

After you have successfully saved your information, the screen for data entry will appear. **Here we want to fill out as many fields as possible.** Please note that the date that the client was referred to the Assessment program can be the same as the date of the assessment. **All work is saved automatically.**

Assessment

Intake

Address Line 1 Address Line 2 City State ZIP Code

County Of Residence Primary Phone Alternate Phone E-Mail Address Cell Phone

School Name Current Grade School Enrollment Youth Employed Family Size

Family Income Interpreter needed? If Yes, what language? Eligible for Free/Reduced lunch

Custody/Guardianship File Number Grant County Grant Number

Date of Referral to Assessment Program * Age at Referral Person Referring Referral Source

08/07/2025 16

To add any charges and/or offenses that the youth has, click on the “Add Charge” button.

Discharge

Discharge Date * Assessment Discharge Reasons * Assessment Outcomes * Reason Incomplete

Charges Contact Attempts Assessments Referrals

Add Charge

Please keep in mind that not all youth get arrested or detained for their charge. The “Statute” field will populate with relevant statutes and ordinances as you type and will automatically populate the “Charge” field too. **Please provide as much information as possible.** You can add additional charges as needed by clicking on the “Add Charge” button.

Charges | Contact Attempts | Assessments | Referrals

Offense Date: 06/10/2023 | Arrest Date: 06/11/2023 | Detention Date: | Age at Offense: | Offense/Citation Id: |

Statute: | Charge: | Delete Charge

Notes: Add additional notes about the client's charge here.

Add Charge ←

Charges | Contact Attempts | Assessments | Referrals

Offense Date: 06/10/2023 | Arrest Date: 06/11/2023 | Detention Date: | Age at Offense: | Offense/Citation Id: |

Statute: | Charge: | Delete Charge

Notes: Add additional notes about the client's charge here.

Offense Date: | Arrest Date: | Detention Date: | Age at Offense: | Offense/Citation Id: |

Statute: | Charge: | Delete Charge

Notes: Add additional notes about the client's charge here.

Add Charge

The next tab is for “Contact Attempts.” Click on the “Add Contact” button to open the fields for contact attempts.

Charges | Contact Attempts | Assessments | Referrals

Add Contact ←

Please fill out all possible fields here. Feel free to any/all additional notes that you may have for that contact attempt. You can add additional contacts as needed by clicking on the “Add Contact” button.

Charges | **Contact Attempts** | Assessments | Referrals

Begin Date 08/08/2025	End Date 08/08/2025	Type of Contact ▼	Result of Contact ▼
		Parent/Youth ▼	# of Occurrences * [Red Box]

Notes
Add additional notes about contact attempt(s) related to the client here. Delete Contact

Add Contact ←

Charges | **Contact Attempts** | Assessments | Referrals

Begin Date 08/08/2025	End Date 08/08/2025	Type of Contact ▼	Result of Contact ▼
		Parent/Youth ▼	# of Occurrences * [Red Box]

Notes
Add additional notes about contact attempt(s) related to the client here. Delete Contact

Begin Date	End Date	Type of Contact ▼	Result of Contact ▼
		Parent/Youth ▼	# of Occurrences * [Red Box]

Notes
Add additional notes about contact attempt(s) related to the client here. Delete Contact

Add Contact

The next tab, “Assessments,” is where the information specific to the assessment administered will be entered. Click the “Add Assessment” button to open these fields.

Charges | Contact Attempts | **Assessments** | Referrals

Add Assessment ←

The options for available assessments fall under the “Assessment Type” option. Please remember to select all collateral contacts that occurred with the assessment. You can add additional assessments as needed by clicking the “Add Assessment” button.

Charges | Contact Attempts | **Assessments** | Referrals

Date of Assessment * 09/03/2025 Assessment Type * (Unspecified) Score * [Red Box] Delete Assessment

Collateral Contacts

None Parent(s) Other Family Therapists Law Enforcement Co - Defendants

School

Add Assessment

Charges | Contact Attempts | **Assessments** | Referrals

Date of Assessment * 09/03/2025 Assessment Type * (Unspecified) Score * [Red Box] Delete Assessment

Collateral Contacts

None Parent(s) Other Family Therapists Law Enforcement Co - Defendants

School

Date of Assessment * [Red Box] Assessment Type * (Unspecified) Score * [Empty Box] Delete Assessment

Collateral Contacts

None Parent(s) Other Family Therapists Law Enforcement Co - Defendants

School

Add Assessment

The final tab, “Referrals,” is where any referrals made based on the assessment are entered. Click on the “Add Referrals” button to open these fields.

Charges | Contact Attempts | Assessments | **Referrals**

Add Referral

Please fill out all fields possible here, and input any/all additional “Notes” you may have regarding the referral. You can add additional referrals as needed by clicking on the “Add Referrals” button.

Charges					Contact Attempts					Assessments					Referrals				
Referral Made		Primary Domain			Date Referred		Referred to			Referral Outcome									
Yes					03/16/2026														
Notes												Delete Referral							
Add additional information about client referral/experience in referral here.																			
Add Referral																			

Charges					Contact Attempts					Assessments					Referrals				
Referral Made		Primary Domain			Date Referred		Referred to			Referral Outcome									
Yes					03/16/2026														
Notes												Delete Referral							
Add additional information about client referral/experience in referral here.																			
Referral Made		Primary Domain			Date Referred		Referred to			Referral Outcome									
Notes												Delete Referral							
Add Referral																			

When it is appropriate to discharge the youth from the program, **please remember to enter the discharge date in the discharge section.**

Assessment														
Intake														
Address Line 1			Address Line 2			City			State		ZIP Code			
						Lincoln			NE		68508			
County Of Residence					Primary Phone			Alternate Phone		E-Mail Address			Cell Phone	
Select County														
School Name				Current Grade		School Enrollment		Youth Employed			Family Size			
Family Income			Interpreter needed?			If Yes, what language?				Eligible for Free/Reduced lunch				
Custody/Guardianship			File Number			Grant County			Grant Number					
Date of Referral to Assessment Program *					Age at Referral		Person Referring			Referral Source				
08/07/2025					16									
Discharge														
Discharge Date *			Assessment Discharge Reasons *					Assessment Outcomes *			Reason Incomplete			

If you would like to test the screens and fields in JCMS without entering/altering data for a youth, please create **one** test youth for your program. Make sure that “JJJ” appears in either the first or last name fields so that it can easily be recognized as a test case for data evaluation purposes. These test cases can be deleted at any point.