

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Baseline

Name of Program and Service: Clear Vision Residential Treatment Services, Inc. - Thinking for a Change (T4C)
Cohort Total: 26/23 SPEP ID: 225-T01
Selected Timeframe: Sep. 1, 2017 – May 31, 2018
Date(s) of Interview(s): Apr. 7, 2018
Lead County & SPEP Team Representatives: Matt Minnier, Lycoming Co.; Bill Keim & Ryan Alena, Berks Co.; Lisa Freese & Heather Perry, EPIS
Person Preparing Report: Heather Perry, EPIS

Description of Service: *This should include a **brief** overview of the service within the context of the program, the location and if community based or residential. Indicate the type of youth referred, how the service is delivered, the purpose of service and any other **relevant** information to help the reader understand the SPEP service type classification. (350 character limit)*

The Clear Vision (CV) Residential Facility is a 25 bed staff secure residential service licensed by the DHS and is fully staffed 24 hours per day. CV provides care for adolescent females, adjudicated delinquent or dependent, who require placement services outside the home for social, emotional, and behavioral problems. While all referrals are evaluated/interviewed on an individual basis, appropriate adolescent females should be between the ages of 13-19, able to live in a staff-secured environment and pose no serious threat to themselves or to others. CV also accepts girls who are pregnant. All residents are required to attend school managed by BLAST IU17, through the public school system of Montgomery Area School District, Lycoming County. While the students focus on education, numerous services are incorporated into the treatment plan. CV is a goal oriented program (not a level system). Adolescent females who have a violent assault history, severe mental health issues or who are actively psychotic typically would not be appropriate candidates. Life Skills Training, Family and Individual Counseling, Group Counseling, and T4C are a few treatment modalities utilized. The CV Group Home is a 6 bed staff secure group home licensed by the DHS and is fully staffed 24 hours per day. Care is provided for adolescent females, adjudicated delinquent or dependent, who require a group home setting, which offers IL services. While all referrals are evaluated on an individual basis, appropriate adolescent females should be between the ages of 13-19 years of age, have successfully completed the CV Residential Program and pose no serious threat to themselves or to others. While the focus is enhancing independent living and social skills, adolescents also have the opportunity to work toward paying restitution, learning about employment opportunities, Family, Group and Individual Counseling. Further, youth are also encouraged to focus on drug and alcohol treatment. The focus of this report is Thinking for a Change (T4C). T4C is a cognitive – behavioral curriculum developed by the National Institute of Corrections that concentrates on changing the criminogenic thinking of offenders that includes cognitive restructuring, social skills development, and the development of problem-solving skills. The program may be delivered to a variety of offenders, including adults and juveniles, probationers, prison and jail inmates, and offenders in aftercare or on parole (however, studies that have examined program effectiveness of T4C so far have included only samples of adult probationers).

The four characteristics of a service found to be the most strongly related to reducing recidivism:

1. **SPEP™ Service Type:** Cognitive-behavior Therapy

Based on the meta-analysis, is there a qualifying supplemental service? No

If so, what is the Service type? There is no qualifying supplemental service

Was the supplemental service provided? n/a Total Points Possible for this Service Type: 35

Total Points Earned: 35 Total Points Possible: 35

2. **Quality of Service:** Research has shown that programs that deliver service with high quality are more likely to have a positive impact on recidivism reduction. Monitoring of quality is defined by existence of written protocol, staff training and supervision, and how drift from service delivery is addressed.

Total Points Earned: 10 Total Points Possible: 20

3. **Amount of Service:** Score was derived from examination of weeks and hours each youth in the cohort received the service. The amount of service is measured by the target amounts of service for the SPEP service categorization. Each SPEP service type has varying amounts of duration and dosage. Youth should receive the targeted amounts to have the greatest impact on recidivism reduction.

Points received for Duration or Number of Weeks: 6

Points received for Dosage or Number of Hours: 0

Total Points Earned: 6 Total Points Possible: 20

4. **Youth Risk Level:** The risk level score is compiled by calculating the total % of youth that score above low risk, and the total % of youth who score above moderate risk to reoffend based on the results of the YLS.

22/23 youth in the cohort are Moderate, High or Very High YLS Risk Level for a total of 12 points

13/23 youth in the cohort are High or Very High YLS Risk Level for a total of 13 points

Total Points Earned: 25 Total Points Possible: 25

Basic SPEP™ Score: 76 total points awarded out of 100 points. Compares service to any other type of SPEP therapeutic service. (eg: individual counseling compared to cognitive behavioral therapy, social skills training, mentoring, etc.)

Note: Services with scores greater than or equal to 50 show the service is having a positive impact on recidivism reduction.

Program Optimization Percentage: 76% This percentage compares the service to the same service types found in the research. (eg: individual counseling compared to all other individual counseling services included in the research)

The SPEP and Performance Improvement

The intended use of the SPEP is to optimize the effectiveness of reducing recidivism among juvenile offenders. Recommendations for performance improvement are included in the service feedback report, and these recommendations are the focus of the performance improvement plan, a shared responsibility of the service provider and the local juvenile court. The recommendations for this service included in the feedback report are:

Clear Vision's Thinking for a Change (T4C) program received a 76 for the Basic Score and a 76% Program Optimization Percentage. It is classified as a Group 5 Service: Cognitive-Behavioral Therapy service type.

The program could improve its capacity for recidivism reduction through:

1. Enhance Staff Training:
 - a. Provide the opportunity to for staff members and supervisors to attend T4C training in delivery of the service.
 - b. It may be prudent to provide a staff member with longevity the opportunity to become a certified trainer to train incoming staff.
 - c. Provide booster/refresher training and document the list of attendees.
2. Enhance On-going Staff Supervision:
 - a. Develop a system to document written feedback between supervisor and the staff delivering the service.
3. Enhance Organizational Response to Drift:
 - a. Develop a written procedure to address departure from delivery protocol and the steps to follow to address drift.
4. Contact Hours: Investigate ways to increase the number of contact hours to reach the recommended 45 hours for T4C.

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results:

Reassessment 1

SPEP™ ID and Contact Time: 0225-T02

Agency/Program Name: Clear Vision Residential Treatment Services, Inc.

Service Name: Thinking for a Change (T4C)

Cohort Total: 18

Cohort Time Frame: Youth that began the service on/after January 1, 2021 and ended on/before February 28, 2023

Referral County(s): Clinton (1); Dauphin (1); Luzerne (4); Lycoming (3); Mifflin (2); Montgomery (3); Schuylkill (4)

Feedback Report Delivery: August 29, 2023

County/Probation Officer(s) Involved: Ayla Allen - Mifflin County Juvenile Probation

Bill Keim and Christine Anderton - Berks County Juvenile Probation

EPIS SIS(s): Dawn Karoscik, Lisa Freese, and Lisa Fetzter

The Clear Vision Residential Facility is a 25 bed staff secure residential service licensed by the Department of Human Service and is fully staffed 24 hours per day. Clear Vision provides care for adolescent females, adjudicated delinquent or dependent, who require placement services outside the home for social, emotional, and behavioral problems. While all referrals are evaluated/interviewed on an individual basis, appropriate adolescent females should be between the ages of 13-19, able to live in a staff-secured environment and pose no serious threat to themselves or to others. Clear Vision also accepts girls who are pregnant. All residents are required to attend school managed by BLaST IU17, through the public school system of Montgomery Area School District, Lycoming County. While the students focus on education, numerous services are incorporated into the treatment plan. Clear Vision is a goal-oriented program (not a level system). Adolescent females who have a violent assault history, severe mental health issues, or who are actively psychotic typically would not be appropriate candidates. Life Skills Training, Family and Individual Counseling, Group Counseling, and Thinking for a Change are a few treatment modalities utilized.

The focus of this report is Thinking for a Change (T4C). Thinking for Change was identified as a cognitive-behavioral therapy intervention intended to reduce rates of recidivism by helping individuals improve their thinking patterns, interpersonal skills, and problem solving abilities. Further, T4C combines cognitive restructuring theory and cognitive skills theory to help individuals take control of their lives by taking control of their thinking (Bush, et al. 2011). The foundation of T4C is the utilization of CBT principles throughout the group sessions. There is an extensive body of research that shows cognitive-behavioral programming significantly reduces recidivism of offenders (Landenberger and Lipsey 2005).

T4C stresses interpersonal communication skills development and confronts thought patterns that can lead to problematic behaviors. The program has three components: cognitive self-change, social skills, and problem-solving skills. Lessons on cognitive self-change provide participants with a thorough process for self-reflection concentrated on uncovering antisocial thoughts, feelings, attitudes, and beliefs. Social skills lessons prepare participants to engage in prosocial interactions based on self-understanding and awareness of the impact that their actions may have on others. Finally, problem-solving skills integrate the two other components and provide participants with a step-by-step process to address challenges and stressful situations they may encounter.

The program is divided into 25 lessons (each lasting approximately 1 to 2 hours), with the capacity to extend the program indefinitely. The curriculum is designed to be implemented with small groups of 8 to 12 offenders. Each lesson teaches offenders important social skills (such as active listening and asking appropriate questions) as well as more complex restructuring techniques (such as recognizing the types of thinking that get them into trouble and understanding the feelings of others). Most sessions include didactic instruction, role-play illustrations of concepts, a review of previous lessons, and homework assignments in which participants practice the skills learned in the group lesson.

Examples of some of the lessons are Active Listening Skill; Thinking Controls Our Behavior; Paying Attention to Our Thinking; Recognize Risk; Use New Thinking; Understanding the Feelings of Others; Apologizing; Responding to Anger; Introduction to Problem Solving; Stop and Think; and State the Problem.

The four characteristics of a service found to be the most strongly related to reducing recidivism:

1. **SPEP™ Service Type:** Cognitive Behavioral Therapy

Based on the meta-analysis, is there a qualifying supplemental service? No

If so, what is the Service Type? There is no qualifying supplemental service

Was the supplemental service provided? N/A **Total Points Possible for this Service Type:** 35

Total Points Received: 35 **Total Points Possible:** 35

2. **Quality of Service:** Research has shown that programs that deliver service with high quality are more likely to have a positive impact on recidivism reduction. Monitoring of quality is defined by existence of written protocol, staff training, staff supervision, and how drift from service delivery is addressed.

Total Points Received: 5 **Total Points Possible:** 20

3. Amount of Service: Score was derived by calculating the total number of weeks and hours received by each youth in the service. The amount of service is measured by the target amounts of service for the SPEP™ service categorization. Each SPEP™ service type has varying amounts of duration and dosage. Youth should receive the targeted amounts to have the greatest impact on recidivism reduction. Targeted duration and dosage for this service is 15 weeks, 45 hours.

<u>6</u>	youth in the cohort of	<u>18</u>	received the targeted Duration or Number of Weeks for a total	<u>2</u>	points
<u>0</u>	youth in the cohort of	<u>18</u>	of received the targeted Dosage or Number of Hours for a total of	<u>0</u>	points

Total Points Received: 2 **Total Points Possible:** 20

4. Youth Risk Level: The risk level score is compiled by calculating the total % of youth that score above low risk, and the total % of youth who score above moderate risk to reoffend based on the results of the YLS. The Risk Levels of Youth admitted to the service were: 0 low risk, 7 moderate risk, 11 , high risk, and 0 very high risk.

<u>18</u>	youth in the cohort of	<u>18</u>	are Moderate, High, Very High YLS Risk Level for a total of	<u>12</u>	points
<u>11</u>	youth in the cohort of	<u>18</u>	are High or Very High YLS Risk Level for a total of	<u>13</u>	points

Total Points Received: 25 **Total Points Possible:** 25

Basic SPEP™ Score: 67 total points received out of 100 points. Compares service to any other type of SPEP™ therapeutic service. (e.g. individual counseling compared to cognitive behavioral therapy, social skills training, mentoring, etc.)

Note: Services with scores greater than or equal to 50 show the service is having a positive impact on recidivism reduction.

Program Optimization Percentage: 67% This percentage compares the service to the same service types found in the research. (e.g. individual counseling compared to all other individual counseling services included in the research.)

The SPEP™ and Performance Improvement

The intended use of the SPEP™ is to optimize the effectiveness of reducing recidivism among juvenile offenders. The service could improve its capacity for recidivism reduction by addressing the following recommendations:

1. Regarding Quality of Service Delivery:

a. Written Protocol:

- Identify in writing youth that are most appropriate for the service.
- Document when checking for updated materials by the developer.

b. Staff Training:

- Identify a staff member to be certified in training of Thinking for a Change.

c. Staff Supervision:

- Once a staff member had been identified to be certified in T4C, create a policy for supervision to include observation at pre-determined time frames and documentation of the observation.
- Provide written feedback on the quality of service delivery
- Performance reviews or evaluations should include a reference to the quality of service delivery specific to the delivery of T4C.

d. Organizational Response to Drift:

- Create a policy that identifies and addresses departure from fidelity and quality of service delivery not just personnel sanctions for failure to adhere to job responsibilities.
- Document when the policy is utilized or reviewed.
- Include a specific set of corrective action steps should drift from service delivery occur.
- Create a mechanism to collect data on the effectiveness of T4C.
- Utilize the data to adapt or improve service delivery.

2. Regarding Amount of Service:

- While the population of Clear Vision has been dominantly child welfare referrals more recently, it is recommended that admission paperwork and staff testimony during court reviews for delinquent females, include language supporting the targeted number of hours and weeks that a cognitive behavioral therapy service should be, as supported by research, 15 weeks and 45 hours.