

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Advisory (*) SPEP™ ID and Contact Time: 0336-A01-T01

Agency/Program Name: Acadia Healthcare, Inc./Cove PREP

Service Name: Cove PREP School

Cohort Total: 8 (*)

Cohort Time Frame: Youth that began the service on/after January 1, 2021 and ended on/before June 30, 2022

Referral County(s): Columbia (1), Crawford (1), Erie (2), Lancaster (1), Mercer (1), Northumberland (1), Tioga (1)

Feedback Report Delivery: November 14, 2022

County/Probation Officer(s) Involved: Chuck Hale & Scott Shea - Cumberland Co Juvenile Probation
Joe Gifford - Dauphin Co Juvenile Probation; Susi Strenske - Westmoreland Co Juvenile Probation

EPIS SIS(s): Lisa Freese and Christa Park

Acadia Healthcare is a network of mental health and addiction treatment facilities that provides care for patients of all ages, regardless of gender. Levels of care include acute inpatient hospitals, residential treatment centers, specialty programs (e.g., partial hospitalization; drug and alcohol detoxification), intensive outpatient treatment and medication-assisted opioid treatment clinics. A number of disorders are treated: substance abuse, dual diagnosis, eating disorders, PTSD & trauma, behavioral health disorders, psychiatric disorders, developmental disorders and memory disorders. Their treatment network spans across the United States.

Cove PREP is a sexual offender residential treatment program for males ages 12 - 20. Youth must be adjudicated delinquent with a concerning sexual background. They operate four distinct and separate units. The unit divisions are based on sub-types within the sexual offender population as described: 1. A unit for Developmentally Disabled or Developmentally young juveniles - while the core programming content is the same, this sub group requires more repetition and a slower pace due to their cognitive processing limitations and requires more concrete presentation of materials. 2. A unit for juveniles with co-morbid psychiatric concerns (e.g. Bipolar Disorder, history of self-mutilation; significant Mood Disorders). 3. A unit for juveniles with more significant delinquency histories- these juveniles generally are older, have more aggressiveness associated with their sexual perpetration, and frequently have histories, which include other crimes against persons or property. 4. An Honors unit (unit 4) for residents who have demonstrated significant therapeutic & behavioral progress and are moving toward successful discharge.

For youth who may demonstrate a combination of concerns, unit placement will be made based on the Treatment Team's assessment of where the youth can most effectively be served. Transfers to other units can occur throughout the course of treatment if appropriate.

Residents receive on-site instruction, provided by certified teachers in a structured classroom setting. Students are in school Monday through Friday, from late August to early June. July is considered to be "Summer School". Classes include English, math, social studies, science, health, and physical education. The educational program is conducted in cooperation with Derry Area School District (LEA). In the event that a resident is in his 12th grade year and has earned enough credits to meet graduation requirements, he can receive a diploma. Depending upon credit acceptance, the diploma may be issued either by the student's home district or through the Derry ASD.

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

1. **SPEP™ Service Type:** Remedial Academic Program

Based on the meta-analysis, is there a qualifying supplemental service? Yes

If so, what is the Service Type? Job Related Training

Was the supplemental service provided? Yes **Total Points Possible for this Service Type:** 30

Total Points Received: 30 **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: 20 **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 26 weeks, 100 hours.

<u>8</u>	youth in the cohort of	<u>8</u>	received the targeted Duration or Number of Weeks for a total	<u>N/A*</u>	points
<u>8</u>	youth in the cohort of	<u>8</u>	of received the targeted Dosage or Number of Hours for a total of	<u>N/A*</u>	points

Total Points Received: N/A* **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 program were: 1 low risk, 4 moderate risk, 1 high risk, and 0 very high risk

<u>5</u>	youth in the cohort of	<u>6</u>	are Moderate, High, Very High YLS Risk Level for a total of	<u>N/A*</u>	points
<u>1</u>	youth in the cohort of	<u>6</u>	are High or Very High YLS Risk Level for a total of	<u>N/A*</u>	points

Total Points Received: N/A* **Total Points Possible:** 25

***A minimum of 10 youth is required for data analysis to occur. Due to insufficient cohort size, a valid SPEP™ score could not be generated. Any data that has been shared is strictly for informational purposes. Technical assistance will be offered to the service provider in regard to SPEP™ Performance Improvement with the goal of reassessment in the future.**

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:

- i. Create lesson plans, curriculum guides etc. to outline what should be addressed during service delivery.
- ii. Within the Written Protocol (“Education Department” handout) identify a schedule for review and revisions (if needed), and note most current review/revision date on document itself.

b. Organizational Response to Drift:

- i. Draft a policy which formalizes current practices of supervision, which enable drift to be identified and addressed. Examples may include direct observation by the lead teacher, direct observation by the Intermediate Unit and assessment data on youth outcomes, etc.
- ii. Within the policy, identify how use of the policy will be documented.
- iii. Identify in the policy specific examples of drift and an if-then approach for corrective action for the identified examples.