

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Baseline

Name of Program and Service: KS Consultants, Inc., KS Multisystemic Therapy (MST), Family Counseling

Cohort Total: 11

SPEP ID: 45

Selected Timeframe: 1/1/2014 – 10/30/2014

Date(s) of Interview(s): 12/1/2014

Lead County & SPEP Team Representatives: Bucks County, William Batty & Heather Perry

Person Preparing Report: William Batty & Heather Perry

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)*

Since 2000, KS Consultants have been delivering services to at risk juveniles. In 2007, KS was selected and approved to provide Multisystemic Therapy (MST) through a partnership with Bucks and Montgomery Counties, PA Department of Welfare, and Adelphoi Village. KS Consultants includes other programs besides MST and they are Congregate Care and Truancy Prevention. The focus of this report is MST. The Organizational Manual described MST as follows: MST treats youth, ages 12-17, with serious anti-social behaviors and their families. MST therapist are full time employees with a caseload range of 4-6. A MST team consists of 2-4 full-time therapist and supervisor. MST is delivered in the natural environment (home, school, community). MST treatment is about 4 months, with multiple meetings between the family and therapist occurring each week. Families are the central focus of MST and caregivers are considered full collaborators in treatment. The MST treatment plan is designed in collaboration with family members and is therefore family driven rather than therapist driven. The scope of MST Interventions is not limited to the individual adolescent or the family system but includes difficulties between other systems as the family-school and family-peer systems. MST interventions include strategic family therapy, structural family therapy, behavioral parent training and cognitive behavioral therapies. The overriding goal of MST is to empower parents with the skills and resources needed to independently address the inevitable difficulties that arise in rearing teenagers and to empower youth to cope with family, peer, school and neighborhood problems. MST attempts to provide parents with the resources needed to parent effectively and to develop increased family structure and cohesion. MST assists parents in developing strategies to decrease youth's associations with negative peers and increase associations with positive peers. MST assists parents in developing strategies to monitor and promote youth's school performance. MST therapist are available 24 hours/day and 7 days/week. KS treats youth between the ages of 12-17 who are male and female and delinquent and non-delinquent. KS referrals are from Bucks and Montgomery County C&Y and JPO. KS therapist are full time employees with a caseload range of 4-6 youth. KS therapists are separated into 3 teams of 4 therapist/team and each team has its own supervisor. KS delivers its service in the natural environment (home, school, community). KS service is delivered within 3-5 months duration. KS serves families and meets with the caregiver (parent) and identified youth approximately 2 times/week for approximately 2 hours/meeting. KS's goal is for the family to function as its own unit and reduce reliance on formal systems/agencies such as C&Y and JPO.

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

1. **SPEP™ Service Type:** Family Counseling

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: 20

Total Points Earned: 20 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: 20 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: 8

Points received for Dosage or Number of Hours: 6

Total Points Earned: 14 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.

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

1 youth in the cohort are High or Very High YLS Risk Level for a total of 0 points

Total Points Earned: 12 Total Points Possible: 25

Basic SPEP™ Score: 66 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: 78% 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:

The program could improve its capacity for recidivism reduction through:

1. Enhancing written protocol/manual
 - Utilize language contained in the Youth Level Service/Case Management Inventory (YLS) to identify a target population.
2. Enhancing staff training
 - Collaborate with probation department to train staff in YLS
3. Enhancing staff supervision
 - Utilize the "Therapist Field Visit Before and After Form."
4. Enhancing data collection
 - Utilize the "alumni tracking" idea.
5. Attaining targeted dosage and risk level served
 - Collaborate with probation department to meet targeted dosage requirement for family counseling service type and increase referrals of moderate/high risk juvenile and decrease low risk referrals

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Reassessment

Name of Program and Service: KS Consultants, Inc.- KS Multisystemic Therapy (MST)

Cohort Total: 16

SPEP ID: 45-T02

Selected Timeframe: Mar. 17, 2015 - Mar. 22, 2016

Date(s) of Interview(s): May 17, 2016

Lead County & SPEP Team Representatives: W. Batty, N. Caramenico, S. Stewart, Bucks Co. & H. Perry, EPIS.

Person Preparing Report: William Batty & Heather Perry

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)*

Since 2000, KS Consultants have been delivering services to at risk juveniles. In 2007, KS was selected and approved to provide Multisystemic Therapy (MST) through a partnership with Bucks and Montgomery Counties, PA Department of Welfare, and Adelphoi Village. KS has recently expanded the areas it serves to include Lehigh and Northampton Counties. KS Consultants includes other programs besides MST and they are Congregate Care and Truancy Prevention. The focus of this report is MST. The Organizational Manual described MST as follows: MST treats youth, ages 12-17, with serious anti-social behaviors and their families. MST therapist are full time employees with a caseload range of 4-6. A MST team consists of 2-4 full-time therapist and supervisor. MST is delivered in the natural environment (home, school, community). MST treatment is about 4 months, with multiple meetings between the family and therapist occurring each week. Families are the central focus of MST and caregivers are considered full collaborators in treatment. The MST treatment plan is designed in collaboration with family members and is therefore family driven rather than therapist driven. The scope of MST Interventions is not limited to the individual adolescent or the family system but includes difficulties between other systems as the family-school and family-peer systems. MST interventions include strategic family therapy, structural family therapy, behavioral parent training and cognitive behavioral therapies. The overriding goal of MST is to empower parents with the skills and resources needed to independently address the inevitable difficulties that arise in rearing teenagers and to empower youth to cope with family, peer, school and neighborhood problems. MST attempts to provide parents with the resources needed to parent effectively and to develop increased family structure and cohesion. MST assists parents in developing strategies to decrease youth's associations with negative peers and increase associations with positive peers. MST assists parents in developing strategies to monitor and promote youth's school performance. MST therapist are available 24 hours/day and 7 days/week. KS treats male and female and delinquent and non-delinquent youth. KS referrals are from Bucks, Montgomery, Lehigh and Northampton County C&Y and JPO. KS service is delivered within 3-5 months duration. KS serves families and meets with the caregiver (parent) and identified youth approximately 2 times/week for approximately 2 hours/meeting. KS's goal is for the family to function as its own unit and reduce reliance on formal systems/agencies such as C&Y and JPO.

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

1. **SPEP™ Service Type:** Family Counseling

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: 20

Total Points Earned: 20 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: 20 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: 8

Points received for Dosage or Number of Hours: 8

Total Points Earned: 16 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.

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

1 youth in the cohort are High or Very High YLS Risk Level for a total of 0 points

Total Points Earned: 12 Total Points Possible: 25

Basic SPEP™ Score: 68 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: 80% 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:

The KS MST program scored a 68 for the Basic Score and an 80% Program Optimization Percentage. It is classified as a Family Counseling service type. These scores represent an increase from the baseline findings of the initial SPEP™ scoring results. The program could continue to improve its capacity for recidivism reduction through:

1. Including/documenting the criminogenic needs that are being targeted by the Family Counseling service type into the Referral Form, Treatment Plans, Court Reports and KS Policies and Procedures Manual,
2. Inquiring from the PA Department of Human Services about including/documenting the criminogenic needs that are being targeted by the Family Counseling service type into the Service Description,
3. Conducting YLS booster training at least yearly for staff who deliver the service and offering other service type and service delivery specific training,
4. Continuing to submit Outcome Measure templates to the probation department for analysis every 90 days when delivering the service,
5. Collaborating with JPO to assist in overcoming engagement issues with the Alumni Tracking tool,
6. Collaborating with JPO to discuss different options available to handle participants who violate during the course of service delivery, and
7. Collaborating with JPO to establish criteria for court reports.