

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Baseline

SPEP™ ID and Time: 228-T01

Agency Name: Clear Vision Residential Treatment Services, Inc.
Program Name: Residential and Group Home
Service Name: The Cognitive Behavior Treatment of Anxious Adolescents (CAT) Program
Cohort Total: 24/22
Timeframe of Selected Cohort: Jun. 6, 2017 to Jun. 19, 2018
Referral County(s): Berks, Clinton, Dauphin, Lancaster, Luzerne, Mifflin, Montgomery, Monroe, Pike, and Schuylkill
Date(s) of Interview(s): Apr. 6, 2018
Lead County: Lycoming County
Probation Representative(s): Matt Minnier
EPIS Representative: Heather Perry

Description of Service:

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 the Cognitive Behavior Treatment of Anxious Adolescents (CAT) Program taught primarily by a counselor aide at Clear Vision. CAT includes all residential youth and some Independent Living youth. CAT was identified as being a closed group program that typically occurs once per week for eight consecutive weeks. The CAT curriculum is designed to be 16 weeks in length, but the latter eight sessions are repetitive. CAT is designed to build a strong rapport among group members so triggers and the way to control behavior can be discussed during group. Homework is assigned at the conclusion of each session and should be completed before the next session. Journaling daily is also a standard part of CAT. Homework and journaling are drawn directly from the CAT curriculum. Role playing occurs occasionally as needed. Clear Vision purchased the CAT curriculum and the Executive Director modified it before they trained staff to deliver it.

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: 10 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 contact hours. Youth should receive the targeted amounts to have the greatest impact on recidivism reduction.

Points received for Duration or Number of Weeks: 0

Points received for Contact Hours or Number of Hours: 0

Total Points Received: 0 **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.

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

11/22 youth in the cohort are High or Very High YLS Risk Level for a total of 13 points

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

Basic SPEP™ Score: 70 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: 70% 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. 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 juvenile probation department.

Clear Vision Residential Program's Cognitive Behavior Treatment of Anxious Adolescents (CAT) Program received a 70 for the Basic Score and a 70% Program Optimization Percentage. It is classified as a Group 5 service – Cognitive-behavioral Therapy service type. The service could improve its capacity for recidivism reduction through:

1. Service Classification:

- a. Enhance the current delivery protocol not only by following the recommended CAT curriculum identified in the CAT Project but by adding additional sessions or consider renaming the program.

2. Enhance Protocol:

- a. Enhance the description that identifies the target population and risk factors targeted for the service.

3. Enhance Staff Training:

- a. Consider creating a policy that requires formalized training for staff that deliver CAT.
- b. Consider creating a job shadowing checklist to include a competency measure
- c. Develop booster training for all trained staff and document attendee's participation.
- d. Consider training the supervisors to ensure drift is minimal

4. On-going Staff Supervision:

- a. Develop a formal policy as it relates to the monitoring of delivery staff
- b. Develop a monitoring document that can be utilized by the supervisor and ensure the document includes a section for areas of concern, areas of strength, and a place that the supervisor and delivery staff can sign the document

5. Enhance Organizational Response to Drift:

- a. Document procedures that specifically address steps to be taken should staff fail to provide instruction as it is intended to be delivered, and ensure that these procedures are systematically applied.
- b. Investigate opportunities to collect data that might include process or outcome data.
- c. Create a formal process and evaluation related to the effectiveness of the service

6. Amount of Service:

- a. Investigate ways to increase the number of weeks of service and contact hours to reach the recommended 15 weeks and 45 hours.