

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Baseline

Name of Program and Service: Community Solutions, Inc. - Multisystemic Therapy (MST)

Cohort Total: 27

SPEP ID: 32-T1

Selected Timeframe: Jul. 1, 2012 - Jul. 1, 2013

Date(s) of Interview(s): Aug. 21, 2013

Lead County & SPEP Team Representatives: Jeff Gregro, Berks Co. & Lisa Freese, EPISCenter

Person Preparing Report: Lisa Freese

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)*

Multisystemic therapy is an intensive in-home therapy program currently delivered by Community Solutions Inc. in Berks County. The service focuses on helping delinquent youth, male or female, address problems in their homes and with their families. MST is one of the Blueprints for Violence Prevention Model Programs. It focuses on a youth's entire surroundings such as family, school, peers, and neighborhood. It is delivered by specifically trained therapists to youth who are moderate to high risk to reoffend or who exhibit a high need in family circumstances on the YLS. The average range of treatment is 60 hours over a 4 month period and the therapists are available to the family 24 hours a day/ 7 days a week.

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: 6

Points received for Dosage or Number of Hours: 6

Total Points Earned: 12 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.

25 youth in the cohort are Moderate, High or Very High YLS Risk Level for a total of 10 points

8 youth in the cohort are High or Very High YLS Risk Level for a total of 10 points

Total Points Earned: 20 Total Points Possible: 25

Basic SPEP™ Score: 72 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: 85% 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:

1. Increasing the number of youth achieving 30 target hours of service through earlier outreach and better engagement during the referral process.
2. Utilize the enhanced engagement practices to increase duration of the service. Three youth in the cohort fell just days short of duration. If they would have achieved duration another 2 points would have been added.
3. Screening referrals to MST to better target high risk youth and eliminate low risk youth referred to the program.

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Reassessment 1

SPEP™ ID and Time: 0032-T02

Agency Name: Community Solutions, Inc. (CSI)

Program Name: Community Solutions, Inc. (CSI)

Service Name: Multisystemic Therapy (MST)

Cohort Total: 33

Timeframe of Selected Cohort: June 01, 2017 - May 31, 2018

Referral County(s): Berks

Date(s) of Interview(s): July 12, 2018

Lead County: Berks

Probation Representative(s): Jeff Gregro, Bill Keim, and Ryan Alena

EPIS Representative: Lisa Freese

Description of Service:

Community Solutions Inc. (CSI) became the first licensed provider of Multi-Systemic Therapy (MST) in central Connecticut in 1999. In 2002 CSI came to Pennsylvania and received a grant from the PA Commission on Crime and Delinquency (PCCD) to deliver Multi-Systemic Therapy (MST), and now serve youth in 13 counties across the state.

MST is a goal-oriented, comprehensive treatment program designed to serve multi-problem youth in their community. It is a family-focused and community-based treatment program that is developed for youth who display chronic or violent delinquent behavior, emotional problems, truancy, academic problems as well as drug and alcohol use and abuse. Clinical interventions are delivered in the home environment and include strategic family therapy, structural family therapy, behavioral parenting training, and cognitive behavioral therapy. MST works with the family and youth to develop interventions to impact behavior and then assess how the intervention went. The MST therapist is constantly assessing, developing, implementing and then reassessing. MST is not intended to work in tandem with other services; therefore, youth receiving MST are typically not participating in other treatment interventions. MST does have exclusion criteria; it is not suited for youth who currently have suicidal/homicidal ideations or attempts, or who display psychotic behaviors. Youth on the autism spectrum or who have a borderline or below IQ are excluded as well. MST is not appropriate for youth where sexual issues are the primary behavior.

MST is based on the theory that behavioral change in youth is reached through the process of addressing their ecological factors, such as neighborhood, school, peers, and family. As a result, attention is given to these “drivers” of behavior at the onset of treatment to ensure that the undesired behaviors are addressed.

The Berks Office of Community Solutions Inc. contains 5 MST’s and a Clinical Supervisor. CSI is considered a network partner with MST; one of approximately 10 network partners nationwide.

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 Received: 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, 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 contact hours. 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 Contact Hours or Number of Hours: 6

Total Points Received: 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.

32 youth in the cohort are Moderate, High, Very High YLS Risk Level for a total of youth 12 points
9 in the cohort are High or Very High YLS Risk Level for a total of 8 points

Total Points Received: 20 Total Points Possible: 25

Basic SPEP™ Score: 74 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: 88% 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.

The Multisystemic Therapy (MST) program from Community Solutions Inc. scored a 74 for the Basic Score and an 88% Program Optimization Percentage. 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. Working with the Juvenile Probation Office to increase the percentage of youth and families reaching the targeted duration and dosage.
2. Identifying additional High Risk youth that could be referred to the service.
 - a. 1 additional High Risk youth would have achieved 2 additional points.
 - b. 3 additional High Risk youth would have achieved an additional 5 points.

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Reassessment 2

SPEP™ ID and Time: 0032-T03

Agency Name: Community Solutions, Inc. (CSI)

Program Name: Community Solutions, Inc. (CSI)

Service Name: Multisystemic Therapy (MST)

Cohort Total: 32

Timeframe of Selected Cohort: June 1, 2018 - May 31, 2019

Referral County(s): Berks

Date(s) of Interview(s): December 16, 2019

Lead County: Berks

Probation Representative(s): Ryan Alena and Jeff Gregro

EPIS Representative: Lisa Freese

Description of Service:

Multisystemic Therapy (MST) is a goal-oriented, comprehensive treatment program designed to serve youth in their community. It is a family-focused, community-based treatment program that is developed for youth who display chronic or violent delinquent behavior, emotional problems, truancy, academic problems as well as drug and alcohol problems. Clinical interventions are delivered in the home and include strategic and structural family therapy, behavioral parenting training and cognitive behavioral therapy. MST works with the family and youth to develop interventions to impact behavior and then assess how the interventions are working. The MST therapist is constantly assessing, developing and implementing and then reassessing. MST is based on the theory that behavioral change in youth is reached through the process of addressing their ecological factors, such as neighborhood, school, peers and family. As a result, attention is given to these “drivers” of behavior at the onset of treatment in order to ensure that the undesired behaviors are addressed.

The Berks Office of Community Solutions Inc. contains 4 MST therapists and a Clinical Supervisor. Community Solutions Inc is an MST System Partner.

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 Received: 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, 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 contact hours. 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 Contact Hours or Number of Hours: 6

Total Points Received: 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.

29 youth in the cohort are Moderate, High, Very High YLS Risk Level for a total of youth 10 points
5 in the cohort are High or Very High YLS Risk Level for a total of 3 points

Total Points Received: 13 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: 79% 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.

Multisystemic Therapy received a 67 for the Basic Score and a 79% Program Optimization Percentage. These Basic Scores represent a decrease of 5 percentage point(s) from the initial SPEP™ assessment. These POP Scores represent a decrease of 6 percentage point(s) from the initial SPEP™ Assessment.

The service was classified as a Group 3 service; Family Counseling service type. There is no qualifying supplemental service found in the research. The Quality of Service Delivery was found to be at a high Level. For Amount of Service, 81% of the youth received the recommended targeted weeks of duration and 72% of the youth received the recommended targeted contact hours for this service type. The Risk Levels of Youth admitted to the service were: 9% low risk, 75% moderate risk, 16% high risk, and 0% very high risk. These scores represent a decrease from the Baseline findings of the first reassessment. The service could improve its capacity for recidivism reduction by addressing the following recommendations:

1. Continue working with Juvenile Probation Office to increase the percentage of youth and families reaching the targeted duration and dosage.
2. Identify additional High Youth that could be referred to the service.
 - a. 2 additional High Risk Youth would have achieved 2 additional points.
 - b. 3 additional High Risk Youth would have achieved 5 additional points.
3. Continue offering quarterly booster trainings to ensure staff are adhering to the most recent treatment models.
4. Continue monitoring staff through audio tapes and direct supervision to limit drift and ensure integrity.