# The Standardized Program Evaluation Protocol (SPEP<sup>TM</sup>):

### Service Score Results: Baseline

Name of Program and Service: Loysville YDC-Rational Living Therapy-Cognitive-Behavioral Therapy SPEP ID: 137-T01 Cohort Total: 10

Selected Timeframe: Oct. 1, 2015-Nov. 1, 2016

Date(s) of Interview(s): Oct. 7, 2016

Lead County & SPEP Team Representatives: Matt Foster, Dauphin Co. & Shawn Peck, EPISCenter Person Preparing Report: Shawn Peck & Matt Foster

**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)

Loysville Youth Development Center (LYDC) is a state secure facility that provides residential services for moderate to high risk male youth. It is located at 10 Opportunity Drive, Loysville PA 17047. Referrals are made to the State Court Liaison for Loysville by the juvenile probation department. The State Court liaison determines whether the youth is appropriate for Loysville or another state facility. This facility consists of six separate cottages as well as a secure unit. Each cottage has a specific focus in terms of the treatment received by the youth: ZB cottage focuses on D&A issues, Williams Cottage focuses on lower functioning youth that are in need of academic remediation, East Penn is general residential, Juniata focuses on older youth who have their GED/Diploma and need vocational counseling and payment of restitution, Allegheny focuses on younger youth and STAR focuses on youth identified with mental health needs.

RLT is a cognitive-behavioral approach developed by Aldo R. Pucci, MA, LPC, who is the president of the National Association of Cognitive-Behavioral Therapists and the Rational Living Therapy Institute. RLT is a very instructive, systematic form of cognitive-behavioral psychotherapy. RLT teaches that our thoughts cause our feelings and behaviors, not people, things, or situations. RLT is based on Rational Emotive Behavior Therapy (REBT), Rational Behavior Therapy (RBT), Cognitive Therapy (Beck), Neuro-linguistic Programming, research findings in perception, linguistics, brain functioning, operant conditioning, classical conditioning, social learning, and general semantics.

Individual counseling conducted separately by both the YDC and PSA will occur concurrently with the groups. Group counseling sessions will be the predominate mode of service for this intervention and individual sessions will only be used to supplement and emphasize information presented in group sessions. Depending on a youth's needs, these individual sessions may involve repeating group material in a simpler manner for those individuals who are more limited in their cognitive functioning. The individual sessions may also involve application of the group material to issues of concern for a youth. All youth will have a minimum of two individual sessions (by either the YDC or PSA per month with a documented use of the RLT intervention in the DAP Note).

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

1. <u>SPEPTM Service Type</u>: Cognitive-behavior Therapy

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

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

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

Total Points Earned: 35 Total Points Possible: 35

2. <u>Quality of Service</u>: 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: <sup>20</sup> 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: <u>10</u> Points received for Dosage or Number of Hours: <u>10</u>				
	Total Points Earned: <u>20</u> Total Points Possible: <u>20</u>				
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.				
	Total Points Earned: <u>25</u> Total Points Possible: <u>25</u>				
	<ul> <li>Basic SPEPTM Score: 100 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.)</li> <li>Note: Services with scores greater than or equal to 50 show the service is having a positive impact on recidivism reduction.</li> <li>Program Optimization Percentage: 100% 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)</li> </ul>				
	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:				
cla ser abc	ional Living Therapy (RLT) at Loysville scored a 100 for the Basic Score and an 100% Program Optimization Percentage. It is safied as a Cognitive-Behavioral Therapy service type. The quality of the service was delivered at a high level. The amount of vice provided to the residents met the recommended targets of duration and dosage for this service type. All of the youth scored we low for Risk Level and enough youth scored above Moderate Risk to receive the maximum points for this service type. The gram could continue its capacity for recidivism reduction through:				
<ol> <li>Enhance On-going Staff Supervision:         <ul> <li>a. Develop a schedule to ensure the supervisor routinely conducts direct observation for all groups to include Treatr Group.</li> </ul> </li> </ol>					
2.1	Enhance Staff Training:				

a. Ensure that booster training occurs as stated in policy.

3. Risk Level:

a. Continue to accept High Risk youth for this service.

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## The Standardized Program Evaluation Protocol (SPEP<sup>TM</sup>):

Service Score Re	<i>esults:</i> Reassessment 1 SPEP <sup>™</sup> ID and Time: 0137-T02						
Agency Name:	Bureau of Juvenile Justice Services (BJJS)						
Program Name:	Loysville Youth Development Center (LYDC)						
Service Name:	Rational Living Therapy (RLT)						
Cohort Total:	12						
Timeframe of Selected Cohort: January 1, 2019 - June 30, 2020							
Referral County(s): Cambria (1), Chester (2), Dauphin (1), Fayette (2), Lancaster (1), Mifflin (1), Philadelphia (3), Schuylkill (1)							
Date(s) of Interview(s): April 8, 2020 and August 20, 2020							
Lead County: Dauphin							
Probation Represent	ative(s): Matt Foster & Joe Gifford (Dauphin), Sue Claytor & Andrew Guise (York County)						
EPIS Representative: Lisa Freese							

#### **Description of Service:**

Loysville Youth Development Center (LYDC) is a state secure facility that provides residential services for moderate to high risk male youth. This facility consists of four 12-bed cottages as well as a secure unit that can house 18 youth. Each cottage has a specific focus in terms of the treatment received by the youth. ZB cottage focuses on youth with substance abuse issues. STAR cottage is for youth with significant mental health issues. Juniata focuses on older youth who have deeply ingrained delinquent values with special emphasis on educational remediation and vocational counseling/work training. Allegheny Cottage is for youth with antisocial thinking and attitudes along with aggressive and violent behaviors. The Secure Unit is for youth ages 16-20 and addresses individualized treatment issues along with learning and displaying appropriate pro-social behavior.

RLT is a cognitive-behavioral approach developed by Aldo R. Pucci, MA, LPC, who is the president of the National Association of Cognitive-Behavioral Therapists and the Rational Living Therapy Institute. RLT is a very instructive, systematic form of cognitive-behavioral psychotherapy. RLT teaches that our thoughts cause our feelings and behaviors, not people, things, or situations. RLT is based on Rational Emotive Behavior Therapy (REBT), Rational Behavior Therapy (RBT), Cognitive Therapy (Beck), Neuro-linguistic Programming, research findings in perception, linguistics, brain functioning, operant conditioning, classical conditioning, social learning, and general semantics. Following the assessment, the resident will begin two separate weekly groups, both of which will be ongoing during the resident's entire placement at STAR. One group with a STAR program staff: Youth Development Aide (YDA), Youth Development Aide Supervisor (YDAS) or Youth Development Counselor (YDC) will focus on learning and beginning to apply the Rational Questions and Mental Mistakes to both previous and current situations in their life. The other weekly group will be facilitated by the PSS and involve the use of the Rational Action Planner, Practicing Techniques and Thought Growth. As this is more processing-oriented than the group conducted by program staff, a session-by-session protocol is not available; however, Appendix C presents the general format for these sessions. Individual counseling conducted separately by both the YDC and PSS occurs concurrently with the groups. Group counseling sessions will be the predominate mode of service for this intervention and individual sessions will only be used to supplement and emphasize information presented in group sessions. Depending on a youth's needs, these individual sessions may involve repeating group material in a simpler manner for those individuals who are more limited in their cognitive functioning. The individual sessions may also involve application of the group material to issues of concern for a youth. All youth will have a minimum of two individual sessions (by either the YDC or PSS) per month with a documented use of the RLT intervention in the DAP Note.

The four characteristics of a service found to be the most strongly related to reducing recidiv	vism:			
1. SPEP <sup>TM</sup> 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: <u>35</u> Total Points Possible:	35			
2. <u>Quality of Service</u> : Research has shown that programs that deliver service with high quality are more l have a positive impact on recidivism reduction. Monitoring of quality is defined by existence of written programs are the service with high quality are more likely and the service with high quality are more likely and the service with high quality are more likely are more likely and the service with high quality are more likely are more likely are more likely and the service with high quality are more likely are more more likely are more likely a	2			

staff training, staff supervision, and how drift from service delivery is addressed. **Total Points Received:** 10 **Total Points Possible:** 20 **3.** <u>Amount of Service</u>: 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<sup>TM</sup> service categorization. Each SPEP<sup>TM</sup> 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:	8

 Total Points Received:
 16
 Total Points Possible:
 20

4. <u>Youth Risk Level</u>: 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, Very High YLS Risk Level for a total of	10	points
6	youth in the cohort are High or Very High YLS Risk Level for a total of	13	points

 Total Points Received:
 23
 Total Points Possible:
 25

**Basic SPEPTM Score**: <u>84</u> total points received out of 100 points. Compares service to any other type of SPEPTM 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:** <u>84%</u> 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<sup>TM</sup> and <u>Performance Improvement</u>

The intended use of the SPEP<sup>TM</sup> 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.

Rational Living Therapy received an 84 for the Basic Score and an 84% Program Optimization Percentage. These Basic Scores represent a decrease of 4 percentage point(s) from the initial SPEP<sup>TM</sup> Assessment. These POP Scores represent a decrease of 4 percentage point(s) from the initial SPEP<sup>TM</sup> Assessment.

The service was classified as a Group 5 service; Cognitive-behavioral Therapy 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, 92% of the youth received the recommended targeted weeks of duration and 92% of the youth received the recommended targeted contact hours for this service type. The Risk Levels of Youth admitted to the service were: 8% low risk, 42% moderate risk, 50% high risk, and 0% very high risk. The service could improve its capacity for recidivism reduction by addressing the following recommendations:

1. Regarding Quality of Service Delivery:

a. Written Protocol:

i. Review the written protocol/curriculum at predetermined timeframes and provide documentation that it was reviewed.

b. Staff Training:

i. Ensure that the YDCs receive routine booster trainings specific to delivery of Rational Living Therapy and document those in attendance.

c. Staff Supervision:

- i. Ensure that supervisors observe staff facilitating RLT.
- ii. Provide written documentation of each group that is observed by the supervisor.
- iii. Supervisors should establish a predetermined timeframe to observe staff facilitating RLT.
- iv. Following an observation, the supervisor should provide written feedback to the staff delivering the service.
- v. Include in annual performance evaluations specific information about the staff person's delivery of RLT.
- d. Organizational Response to Drift:
  - i. Provide written documentation when it is utilized.
- ii. Create a data review process to evaluate the delivery of RLT.
- 2. Regarding Amount of Service:
  - a. Continue to communicate to referral sources that youth in a cognitive behavioral therapy service should remain in that service for a minimum of 15 weeks. b. Continue to communicate to referral sources that youth in a cognitive behavioral therapy service should remain in that service for a minimum of 45 hours.

3. Regarding Risk Level of Youth Served:

a. Continue to communicate to referral sources that this service targets moderate to very high risk youth.

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