

# The Standardized Program Evaluation Protocol (SPEP™):

## Service Score Results:

Baseline

SPEP™ ID and Contact Time: 0367-T01

Agency/Program Name: The Academy/Phoenix Program

Service Name: ISB Curriculum

Cohort Total: 36

Cohort Time Frame: Youth that began the service on/after June 1, 2022 and ended on/before December 1, 2023

Referral County(s): Bucks (3); Chester (1); Lancaster (9); Lebanon (5); Montgomery (18)

Feedback Report Delivery: April 17, 2024

County/Probation Officer(s) Involved: Kikianiko Garcia, Chester County; Chandelle Catrone, Lancaster County;

Matt Kline, Lebanon County; Jamie Mroz and Jennifer Ungarino, Montgomery County

EPIS SIS(s): Dawn Karoscik and Lisa Fetzer

Since 2007, The Academy has provided effective community-based services to at-risk youth and families, with a focus on preventing out-of-home placement and improving family well-being. Catering to ages 10 to 21, their programs, Community Based Services (CBS) and Phoenix Program, offer a comprehensive range of services tailored to meet the diverse needs of youth and families within their communities. The agency operates under the four cornerstones for their programs: (1) see the youth and families, (2) documentation, (3) communication, and (4) professionalism. The Academy strives to improve safety and quality of life for those it serves.

The Phoenix Program is an outpatient treatment program for clients engaged in illegal sexual perpetration or inappropriate sexual misconduct as well as trauma survivors. There are three therapeutic services offered; ISB Curriculum, Trauma Curriculum, and Psychoeducation. The goal of the program is to provide treatment while ensuring community safety. Depending on which therapeutic service the youth receive, contacts can consist of individual sessions, group therapy sessions, and/or family sessions. Additionally, depending upon the youth's needs, daily contact with the client can be provided by community specialists. Through daily contact, the community specialists will ensure the clients' compliance with the program, the court-ordered special conditions of Probation, and the Safety Plan. The community specialist will transport the client and family members to therapeutic sessions, probation meetings, and court proceedings. Furthermore, the community specialist serves as a liaison between the client, the client's family, Probation, and the clinical team. The clients will be offered support and resources to enhance their living and social skills.

The intake assessment will identify issues, concerns, and risk factors that need to be addressed in treatment. In addition, the client's needs and strengths will be recognized to develop individualized treatment goals. Standardized measures include the Protective & Risk Observations For Eliminating Sexual Offense Recidivism (PROFESOR), Beck Youth Inventories 2nd Edition (BYI-II), and Juvenile Sex Offending Assessment Protocol II (J-SOAP II). The Child PTSD Symptom Scale (CPSS) is completed for youth that have a documented history of trauma. After an extensive intake assessment, the type of treatment provided will be unique and tailored toward each client. Depending on the client's needs, the Phoenix Program will determine the therapeutic approaches most beneficial to the treatment process. Moreover, an in-depth review of court-related documents, specifically the psycho-sexual evaluation and input from the Juvenile Probation Department, will assist in formulating a treatment plan. Finally, an Individualized Treatment Plan (ITP) will be developed to address an array of issues, such as the following: sexual misbehaviors, deviant arousal, cognitive distortions, maladaptive coping mechanisms, self-regulation deficits, past trauma, social skills deficits, and dysfunctional social systems.

The Phoenix Program has served children/adolescents with inappropriate/illegal sexual behavior since March 2016 and serves youth in the following counties: Bucks, Chester, Lancaster, Lebanon, and Montgomery. The agency employs four Master's level clinicians trained in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and treating children/adolescents with problematic sexual behavior between the ages of 10-21.

The ISB Curriculum incorporates the following therapeutic approaches during service delivery; Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), Psychodynamic, Attachment Theory, Self-Regulation Model, Psycho-Educational Approach, The Good Lives Model, and Relapse Prevention. Furthermore, evidence-based practices are utilized to monitor treatment goals and outcomes, including Trauma-Informed Care, Motivational Interviewing, and the Risk-Need-Responsivity Model. The treatment milieu consists of phases of therapy that coincide with the completion of intensive therapeutic coursework. The clinical team is dedicated to fostering a healthy and secure therapeutic alliance. The factors consistent with a strong alliance and positive outcomes include the care, compassion, and empathic attunement of the clinical team, a balance of nurturance and challenge, a balance of comfort and stress, a balance of affect and cognition, a goal of increased affect regulation, and the co-creation of new narratives for the development of a new story for the client. Throughout therapy, clients can be required to partake in therapeutic polygraph examinations. Polygraphs are utilized as a tool to measure a client's honesty and investment in treatment. Within the first three months of treatment, an initial polygraph is administered to the client. After that, clients complete maintenance polygraphs to ensure compliance.

### 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:

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 15 weeks, 45 hours.

|           |                        |           |   |          |        |
|-----------|------------------------|-----------|---|----------|--------|
| <u>29</u> | youth in the cohort of | <u>36</u> | received the targeted Duration or Number of Weeks for a total     | <u>8</u> | points |
| <u>0</u>  | youth in the cohort of | <u>36</u> | of received the targeted Dosage or Number of Hours for a total of | <u>0</u> | points |

**Total Points Received:** 8 **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 service were: 24 low risk, 8 moderate risk, 2 , high risk, and 1 very high risk.

|           |                        |           |   |          |        |
|-----------|------------------------|-----------|---|----------|--------|
| <u>11</u> | youth in the cohort of | <u>35</u> | are Moderate, High, Very High YLS Risk Level for a total of | <u>2</u> | points |
| <u>3</u>  | youth in the cohort of | <u>35</u> | are High or Very High YLS Risk Level for a total of         | <u>0</u> | points |

**Total Points Received:** 2 **Total Points Possible:** 25

**Basic SPEP™ Score:** 65 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:** 65% 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. The service could improve its capacity for recidivism reduction by addressing the following recommendations:

1. Regarding Amount of Service:
  - a. For this particular special population of youth, service duration is determined by the treatment needs, readiness, and progress of the youth. Consequently, the recommended research targets may not be attainable.
  - b. Collaboration with Juvenile Probation Departments will continue to include dosage and duration received and notification of when the youth has completed the service.
2. Regarding Risk Level of Youth Served:
  - a. Continue collaboration with Juvenile Probation Departments to ensure the most appropriate referrals are being received.