

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Baseline

SPEP™ ID and Time: 302-T01

Agency Name: Abraxas Youth and Family Services – Abraxas I

Program Name: All Programs

Service Name: Community Service/Restitution

Cohort Total: 38 Amount of Service/34 Risk Level

Timeframe of Selected Cohort: Began the service on/after February 21, 2018 and ended the service on/before March 31, 2020

Referral County(s): Allegheny (5); Berks (2); Bucks (2); Chester (1); Clearfield (1); Cumberland (1); Dauphin (1); Delaware (4); Erie (6); Fayette (1); Lackawanna (4); Lebanon (1); Lehigh (2); Montgomery (1); Northampton (3); Pike (1); Warren (1); Wyoming (1)

Date(s) of Interview(s): September 30, 2020

Lead County: Montgomery

Probation Representative(s): Lisa Fetzer

EPIS Representative: Kevin Perluke

Description of Service:

Abraxas I, a division of Abraxas Youth and Family Services, is located in rural Marienville, PA and offers a variety of programs within the campus including: The Social Training and Education Program (STEP), The Intensive Open Residential Program (IORP), The Abraxas Residential Mental Health Services (ARMHS) Program and The Abraxas I Intensive Drug & Alcohol Treatment Programs. Abraxas I is a Sanctuary® Model affiliated program which provides guidance in support of a trauma informed, trauma sensitive culture by employing the Seven Commitments of the Sanctuary® Model, along with the Sanctuary® Toolkit.

The Abraxas I Intensive Open Residential Program (IORP) is a 12-bed, open residential program that provides staff secure/intensive programming for male adolescents between the ages of 13 to 18. This highly structured, staff-secure residential program provides individualized treatment for youth with diverse needs directly impacting their delinquency issues, and as a result, may have demonstrated resistance toward other treatment programs. Abraxas I uses a strengths-based approach, which focuses on intensive clinical programming, evidence-based curricula, personal character development, and specific counseling to remedy family deficits. The program is designed as an alternative to secure placement. Utilizing a cognitive behavioral model, the Intensive Open Residential Program implements a strong emphasis on Aggression Replacement Training and Balanced and Restorative Justice.

The Abraxas I Social Training and Education Program (STEP) is a 14 bed, open residential program that provides social skill development and substance abuse education/prevention services to male adolescents between the ages of 13 to 18. The STEP program enables youth to transition within the Abraxas I continuum of services on the Marienville, PA campus. Utilizing a cognitive behavioral model and a trauma-informed care approach, STEP places a strong emphasis on life skill development and Balanced and Restorative Justice. A three-phase clinical system provides clear and obtainable treatment objectives to assist the client in navigating through their individual treatment goals.

The Abraxas I Intensive Drug and Alcohol Treatment Programs provide intensive substance abuse programming for 60 adolescent males and 32 female adolescents in separate treatment settings. The programs provide a safe, nurturing and structured environment for delinquent and/or dependent youth to make positive changes in their behaviors, attitudes and beliefs. The goal of treatment is to eliminate drug abuse/dependency & delinquency and develop competencies that will enable youth to function as responsible members of the community. Youth participate in a variety of therapeutically structured activities. Treatment planning integrates the concepts of Balanced and Restorative Justice by focusing on offense-specific counseling, victim awareness, accountability and competency development.

The Abraxas Residential Mental Health Services (ARMHS) program is committed to making a difference by providing cost effective intensive psychiatric residential treatment to adolescent males who are experiencing severe emotional, behavioral, psychological, educational and social problems. Clients must meet specific criteria for this level of care. In addition, mental health services must be deemed medically necessary and be prescribed by a psychiatrist. The program is licensed for 24 adolescent males. In support of Trauma Informed Care, Abraxas I is a Sanctuary® Model affiliate program which is a method for creating a trauma informed, trauma sensitive culture which employs the Seven Commitments of the Sanctuary® Model in daily interactions.

Abraxas monitors a youth's owed community service hours and tracks completion during the youth's placement at Abraxas. Community service activities are available on grounds and in the community. Youth participate in activities, through partnerships with local nursing homes, churches, a nearby farm, the food booth at a nearby flea market, PA Fish Commission the Marienville Rod and Gun Club and many more. Abraxas I establishes an annual goal of completing 10,000 community service hours.

Abraxas monitors a youth's court appointed costs, fines, and/or restitution during the youth's placement at Abraxas. Abraxas I strives to meet the restitution needs of each youth individually through flexible programming without limiting the total restitution dollars that can be earned. Activities to earn money are available on grounds and in the community through the Work Experience and Workforce Development programs.

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

1. **SPEP™ Service Type:** Restitution/Community Service

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? No **Total Points Possible for this Service Type:** 15

Total Points Received: 15 **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: 8
Points received for Contact Hours or Number of Hours: 10

Total Points Received: 18 **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 10 points
15 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 SPEP™ Score: 66 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: 83% 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.

1. Regarding Quality of Service Delivery:

a. Written Protocol:

- i. Develop and implement a written protocol specifically for Community Service/Restitution
- ii. Develop a service description that outlines in specific detail what should be addressed during service delivery.
- iii. Identify in writing which youth are appropriate for the service according to the YLS.
- iv. Ensure there is documentation that the manual or written protocol describing the service is implemented and referenced during service delivery.
- v. Include revision date on written manual

b. Staff Training:

- i. Identify specialized trainings that are relevant to the service.
- ii. Identify booster trainings that are relevant to the service.
- iii. Ensure through documentation that staff receive booster trainings.
- iv. Require and document that the supervisor has been trained to deliver the service.

c. Staff Supervision:

- i. Develop a process for supervisors to monitor service delivery.
- ii. Ensure that documentation occurs when supervisors monitor staff and that staff sign off on Conference Notes.
- iii. Document supervision of staff at predetermined time frames.
- iv. Ensure that all supervisors provide written feedback to staff delivering the service.
- v. Ensure that Community Service/Restitution is referenced in yearly performance evaluations for staff implementing the service.

d. Organizational Response to Drift:

- i. Develop a policy and procedure to identify departure from the fidelity and quality of service delivery.
- ii. Within the written policy, develop a process to document the utilization of the drift policy.
- iii. Ensure that the organizational response to drift policy includes specific action steps for the agency to take to avoid drift, including an “if-then” approach or specific corrective action steps to address departure from the fidelity and quality of service delivery.
- iv. Create and utilize consistently a pre/post-test or survey on service delivery from youth incorporating all aspects of the service.
- v. Ensure that the collected data is used to adapt or improve service delivery.

2. Regarding Amount of Service:

- a. Maintain communication with referring JPO regarding youth being discharged early from the program without looking at the research recommended targeted amount of service.

3. Regarding Risk Level of Youth Served:

- a. Maintain collaboration with referring JPO to consider the appropriate risk level for each youth.