### The Standardized Program Evaluation Protocol (SPEP™):  

**Service Score Results:** Baseline

<table>
<thead>
<tr>
<th>Name of Program and Service:</th>
<th>Adelphoi Village-General Secure Care-Vocational Services</th>
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<tbody>
<tr>
<td>Cohort Total:</td>
<td>15</td>
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<tr>
<td>Selected Timeframe:</td>
<td>Jul. 1, 2016 - Jul. 1, 2017</td>
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<tr>
<td>Date(s) of Interview(s):</td>
<td>Jun. 23, 2017 &amp; Aug. 25, 2017</td>
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<tr>
<td>Lead County &amp; SPEP Team Representatives:</td>
<td>Bill Holt, Allegheny County &amp; Shawn Peck, EPISCenter</td>
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<td>Person Preparing Report:</td>
<td>Bill Shultz &amp; Shawn Peck</td>
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**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)*

Adelphoi Village provides various types and levels of residential treatment programs for male and female youth across Pennsylvania. Types of treatment include: General Secure Care/Male and Female; Secure Care for Sex Offenders/Male; Independent Living Group Homes/Male; Drug and Alcohol Group Home/Male; Intensive Supervision Group Homes/Male and Female (inclusive of a specialty unit with a mental health focus/Female); and Shelter/Male and Female. Treatment is individualized and is designed to address a number of criminogenic risk factors, inclusive of anger and aggression issues, poor problem solving, mild to moderate mental health issues, strained family dynamics, and trauma. Adelphoi Village’s philosophy is that the cycle of degeneration can be altered in favor of positive growth and success through applying the beliefs and principles of brotherly concern coupled with proven modalities. Youth are placed by the courts within one of Adelphoi Village’s General Secure Care Programs at varied stages of court involvement. This may be the initial out-of-home placement for a youth or may be upon the court transitioning a youth already in placement, within a more restrictive/secure level of care, to a less restrictive level of care. The average length of stay varies across Adelphoi Village’s different program types. The Vocational Services program at Adelphoi Village is a collaborative effort of the various phases of a student’s Adelphoi experience. Dr. Robert Ketter Charter School, residential treatment, Adelphoi education, and Vocational Classes are all integral components of the Vocational Services course of study. Adelphoi is a PACTT-affiliated juvenile justice facility and has incorporated the PACTT Employability Skills Checklist in each facet of the Vocational Services program. Through its facility-wide Vocational Services program, Adelphoi prepares students for the world of work and helps them achieve their highest potential by offering career exploration in various trades and instruction. The Vocational Services program is an integrated program that provides youth with highly effective academic and vocational components that facilitate the development of PACTT employability skills and an opportunity for career exploration. Program components consist of: pursuit of high school diploma, career experience opportunities, instruction from field experts and teachers, and PACTT portfolio development. Youth have the opportunity to participate in vocational courses such as: Auto Detail, Culinary Arts, Emergency Medical Response, Care Exploration Lab, Horticulture, Computer Technology, Science Technology Engineering, Art, Math, and Theater. Youth can earn certifications such as: ServSafe® Food Handler, Adult & Pediatric CPR/First Aid/AED, and EMR.

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

1. **SPEP™ Service Type:** Job Related Training-Job Training  
   
   Based on the meta-analysis, is there a qualifying supplemental service? Yes  
   
   If so, what is the Service type? Remedial Academic Program
   
   Was the supplemental service provided? Yes  
   
   **Total Points Possible for this Service Type:** 10  
   
   **Total Points Earned:** 10  
   
   **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**: 8
   **Points received for Dosage or Number of Hours**: 0

   Total Points Earned: 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.

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

   Total Points Earned: 15 Total Points Possible: 25

**Basic SPEP™ Score**: 53 total points awarded 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**: 71% 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)*

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**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:

Vocational Services scored a 53 for the Basic Score and a 71% Program Optimization Percentage. It is classified as a Group 1 service; Job-related Training. The quality of service was found to be at a High Level. For amount of service, 87% of the youth received the recommended targeted weeks of duration and 0% of the youth received the recommended targeted contact hours for this service type. The risk levels of youth admitted to the program were 7% as low risk, 73% as moderate risk, and 20% as high risk. The program could improve its capacity for recidivism reduction through:

1. Regarding Quality of Service Delivery:
   a. Written Protocol:
      i. Include information on the referral packet to help identify youth’s top choices toward career path to help ensure that the youth receives the components of Career Services that interests them the most.
   b. Response to Drift:
      i. Coordinate existing procedures/manuals into an overarching policy/procedure that describes how all the components of this service fit together.
      ii. Ensure that implementation of this policy/procedure is documented.
      iii. Ensure that the policy/procedure contains corrective action steps to ensure an “if-then” approach, such as when a student makes exceptional progress or additional resources, or training are needed.

2. Regarding Amount of Service:
   a. Make modifications to provide longer service participation, allowing for alignment with research supported amounts of 25 weeks and 400 hours.
      i. Incorporate mobile trainers to increase contact hours to better match the research recommendations for targeted dosage of 400 hours.
   b. Improve communication with JPO from referring counties to better match research recommendations for targeted amount of service of 25 weeks and 400 hours.

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