

The Standardized Program Evaluation Protocol (SPEP™):

Service Score Results: Baseline

Name of Program and Service: Family Services Association of NEPA, Outreach Prevention Program (OPP)

Cohort Total: 10

SPEP ID: 122-T01

Selected Timeframe: Sep. 1, 2015 - Nov. 28, 2016

Date(s) of Interview(s): Dec. 13, 2016

Lead County & SPEP Team Representatives: Neal Johnson, Luzerne Co. & Lisa Freese, EPISCenter

Person Preparing Report: Neal Johnson, Luzerne Co. & Lisa Freese, EPISCenter

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)*

The Outreach Prevention Program (OPP) operated by Family Services Association, is a community based program for youth that are considered high risk. OPP is part of the Case Management Group and one of many services offered by FSA. The agency has been in existence since 1895, and currently contracts with 17 counties to provide assistance to children, families and senior citizens.

OPP is designed to serve juveniles and families that are in a state of crisis, risk for out of home placement, or possible future involvement with the legal system. Referrals are made by the Luzerne County Juvenile Court or Children and Youth Services. Youth age ranges from 10 to 18 years old with average service duration of 6 to 8 months, or longer as necessary. Typically a clinician and Family Focused Case Manager (FFCM) work with the families. The clinician works primarily with the parents and the case manager works with the youth. Contact by each occurs weekly, and at least once per month a family session is conducted. Family Group Decision Making (FGDM) is voluntary but offered to every family, and occurs concurrent with the OPP service.

The program provides intensive in-home counseling to both individuals and involves solution-based focused therapy along with targeted case management. It uses a strength-based family focused approach to behavioral interventions. Treatment plans are provided along with a crisis management plan. The Youth Level of Service Inventory (YLS) identified risks/needs are incorporated into the plan. FSA will also work concurrently with other counseling agencies to ensure that all services are coordinated between the family and service providers. The goal of the program is to keep at risk youth in the home, assist the family in developing and maintaining healthy relationships, and to teach positive and effective life skills.

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

1. **SPEP™ Service Type:** Mixed Counseling

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

If so, what is the Service type? Behavioral Contracting/Management

Was the supplemental service provided? No Total Points Possible for this Service Type: 20

Total Points Earned: 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 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: 2

Points received for Dosage or Number of Hours: 0

Total Points Earned: 2 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.

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

0 youth in the cohort are High or Very High YLS Risk Level for a total of 0 points

Total Points Earned: 5 Total Points Possible: 25

Basic SPEP™ Score: 42 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: 50% 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:

The program could improve its capacity for recidivism reduction through:

1. The addition of a supplemental service: behavioral contracting/management. The research demonstrates that the capacity of a mixed counseling service to reduce recidivism is enhanced by the addition of behavioral contracting or behavioral management program. These programs generally include a token or reward based set of incentives which are granted when the juvenile reaches certain program or case plan milestones. Youth agree to a contract which specifies certain rewards for certain positive behaviors. Non-achievement of agreed upon goals results in loss of privileges and/or incentives.
2. Examining the following recommendations related to quality of service:
 - a. Development of written protocol for the Outreach Prevention Clinician and Family Focused Case Manager that outlines specific service-related responsibilities. Both the Clinician and the FFCM have a “toolbox” of resources for certain topic areas. It is recommended that this resource be included: Solution-Focused Brief Therapy: Its Effective Use in Agency Settings (Haworth Marriage and the Family) 1st Edition.
 - b. Consideration should be given to training the OPP Clinician and Case Management Community Programs Supervisor in Solution-Focused Brief Therapy.
3. Collaboration with the Luzerne County Juvenile Probation Department to target a minimum of 25 weeks of the OPP service, and 25 or more hours for each youth receiving the service.
4. Continuing to target moderate and high risk youth. Examine low risk referrals to determine appropriateness for the OPP.