Standardized Program Evaluation Protocol [SPEP] Report

Gulf Youth Academy

G4S Youth Services, LLC

(Contract Provider)
765 E St. Johns Avenue
Hastings, Florida 32145

Primary Service: Individual Counseling
SPEP Review Date(s): October 25-28, 2016

Florida Department of Juvenile Justice

Report Date(s): 6/9/2017

Introduction

The Standardized Program Evaluation Protocol (SPEP) is an assessment tool derived from meta-analytic research on the effectiveness of juvenile justice interventions. The tool is designed to compare existing intervention services, as implemented in the field, to the characteristics of the most effective intervention services found in the research.

The SPEP scoring system allows service providers to identify specific areas in which program improvements can be made to their existing Primary Services. These improvements can be expected to increase the effectiveness of those Primary Services in the reduction of recidivism for youth receiving the Primary Service. A separate SPEP evaluation is conducted, at the time of the program's Quality Improvement Review, for each Primary Service provided by the program.

This report provides two types of SPEP scores: a **Basic Score,** equivalent to the number of points received, and a **Program Optimization Score (POS)** that is equivalent to the maximum number of possible points that could be received based on the SPEP domains under the control of the program. The Basic Score compares the Primary Service being evaluated to other intervention services found in the research to be effective, regardless of service type. It is meant as a reference to the expected overall recidivism reduction when compared to other Primary Services of any Type.

A **Program Optimization Percentage (POP)** rate is derived from the Basic Score and Program Optimization Score. The POP rate is a percentage score that indicates where the rate of effectiveness of the Primary Service is when compared to its potential effectiveness if optimized to match the characteristics of similar Primary Services found to be most effective in the research. The POP rate is likely more meaningful to service providers as it represents how close the program's Primary Service is to its potential for that Primary Service Type. For example, a POP rate of 55% would indicate that the program's Primary Service is operating at 55% of its potential effectiveness for recidivism reduction that has been found for a similar Primary Service Type with research evidence of effectiveness.

Program Name: Gulf Academy   MQI Program Code: 1068
Provider Name: G4S Youth Services, LLC   Contract Number: R2104
Location: St. Johns County / Circuit: 7   Number of Beds: 56
Review Date(s): October 25-28, 2016   Lead Reviewer Code: 37

Persons Interviewed

☒ Program Director   ☐ Corporate QI/QA staff   _____ # Program Supervisors
☐ DJJ Monitor   _____ # Case Managers   <u>5</u> # Youth
☐ DHA or designee   <u>1</u> # Clinical Staff   _____ # Other (listed by title): _____
☒ DMHCA or designee   _____ # Healthcare Staff

Documents Reviewed

☒ Written Protocol/Manual   ☐ Logbooks   <u>6</u> # Personnel Records
☒ Fidelity Monitoring Documents ☒ Program Schedules   <u>6</u> # Training Records/CORE
☒ Internal Corrective Action Reports ☐ Supplemental Contracts _____ # Youth Records (Closed)
☒ Staff Evaluations   ☒ Table of Organization   _____ # Youth Records (Open)
☐ Accreditation Reports   ☒ Youth Handbook   _____ # Other: _____
☐ Contract Monitoring Reports   _____ # Health Records
☐ Contract Scope of Services   <u>7</u> # MH/SA Records

Observations During Review

☒ Group/Session of Primary Service(s)
☒ Program Activities
☐ Recreation
☒ Social Skill Modeling by Staff
☒ Staff Interactions with Youth
☒ Staff Supervision of Youth
☐ Transition/Exit Conferences
☐ Treatment Team Meetings

1. Primary Service and Supplemental Service Types	Basic Score: 10 Points POS: 10 Points POP: 100%

There are five Primary Service Types that have been classified into Groups with a maximum number of points possible for rating purposes. Some Primary Service Types may also have qualifying Supplemental Service Types that could earn a program an additional 5 points.

The Primary Service for this program is Individual Counseling. The program was awarded 5 points because the Primary Service is identified as a Group 1 Service. The specific Sub-Component Service Type identified is Individual Counseling. The Primary Service was identified as this type of service as it includes any range of treatment techniques that focus on psychological or interpersonal problems or issues faced by an individual that involves a one-on-one relationship with a therapist or counselor.

An additional 5 points was awarded based on a Qualifying Supplemental Service. The Qualifying Supplemental Service was identified as None (automatic 5 points added to score), which was not demonstrated to have been implemented.

The Primary and Supplemental Service Raw Score is equal to the sum of the Primary Service points plus the Qualifying Supplemental Service points.

Note: Quality information is evaluated by the Bureau of Monitoring and Quality Improvement while on-site during the annual compliance review.

2. Overall Quality of Service Delivery Score	Basic Score: 20 Points POS: 20 Points POP: 100%
The Quality of Service Delivery Score is the sum of the scores for the seven treatment quality indicators. The Program Optimization Percentage Rating determines the Overall Quality of Service Level: *Indicator Sum Score 0-3 = Low; Sum Score 4-7 = Medium; Sum Score 8-10 = High.*	

Sum of all Indicator Scores (a – g below): 8 Points

Overall Quality of Service Delivery Level:
- ☐ Low (Raw Score = 5)
- ☐ Medium (Raw Score = 10)
- ☒ High (Raw Score = 20 Points)

a. Facilitator Training	Basic Score: 1 Point(s) Maximum Possible Score: 1 Point
All facilitator(s) of the Primary Service must have received formal training specific to the intervention or model/protocol.	

All therapists have received training on conducting individual counseling sessions, which was accomplished through pre-service training and during weekly clinical supervision meetings. The program has a corporate clinical training manual used in the training of therapists.

b. Treatment Manual/Protocol	Basic Score: 2 Point(s) Maximum Possible Score: 2 Points
There is a specific written manual/protocol detailing delivery of the Primary Service.	

The program has a SPEP service training protocol for the delivery of individual counseling. The protocol addresses the breakdown of the sessions, preparing for an individual therapy session, conducting the session, planning for the next session, and transition. The therapists conducted the sessions at the frequency stipulated on individualized treatment plans. The protocol allows for therapists to use different interventions and materials.

c. Observed Adherence to the Manual/Protocol	Basic Score: N/A Point(s) Maximum Possible Score: 1 Point
Upon observation of the Primary Service by the Quality Improvement reviewer, the facilitator of that service adhered to the written protocol/manual.	

Individual counseling sessions are exempt from observations due to the nature and confidentiality of individual counseling; therefore, this indicator rates as non-applicable.

d. Facilitator Turnover	Basic Score: 1 Point(s) Maximum Possible Score: 2 Points

> *Measures the extent to which facilitators of the specific intervention/service have changed as well as gaps in service of that Primary Service.*

The program had one vacant clinical position at the time of the review. Youth are assigned to another therapist when vacancies or turnover occurs in order to ensure the continuity of service. Treatment records reviewed found each youth received individual counseling on a weekly basis, as scheduled, without a break in service.

The program can earn 2 points by minimizing facilitator turnover.

At the time of the review, the program did not meet criteria to earn a score of 2.

e. Internal Fidelity Monitoring	Basic Score: 2 Point(s) Maximum Possible Score: 2 Points
The program has a process to monitor the delivery of the intervention to examine how closely actual implementation matches the model protocol.	

According to the program's protocol, the assistant clinical director will conduct fidelity monitoring through reviews of individualized treatment plans, individual treatment notes, and treatment plan reviews. The results of fidelity monitoring are shared with therapists at weekly clinical supervision meetings. Documentation confirmed the assistant clinical director provided clinical supervision for treatment staff on a weekly basis.

f. Corrective Action based on Fidelity Monitoring	Basic Score: 1 Point Maximum Possible Score: 1 Point
The program has a process by which corrective action is applied and demonstrated based on the fidelity monitoring of the delinquency intervention/therapeutic service.	

Documentation of weekly supervision did not indicate the need for corrective action for the delivery of individual counseling. The program has a process for the application of corrective actions based on the fidelity monitoring.

g. Evaluation of Facilitator Skill Delivering the Intervention	Basic Score: 1 Point Maximum Possible Score: 1 Point
Performance evaluations of the facilitators of the specific intervention/service include evaluation of skill in delivering the intervention/service.	

The program has four therapists providing individual counseling. The performance evaluations for these employees included or will include (based on position description) the evaluation on their delivery of individual counseling.

3. Amount of Service - Duration

Basic Score: 8 Points
Program Optimization Score: 10 Points
Program Optimization Percentage: 80%

Research indicates the target duration of 25 weeks for this type of service. Of the 31 youth in the sample, 97% (30 of 31) reached at least the indicated target duration. Further explanation is detailed in the Summary and Recommendations below.

Note: Dosage information (duration) is calculated from the Juvenile Justice Information System (JJIS) Evidence-Based Services module. Duration is included for the youth in the SPEP sample.

4. Amount of Service – Contact Hours

Basic Score: 6 Points
Program Optimization Score: 10 Points
Program Optimization Percentage: 60%

Research indicates a target of 30 contact hours for this type of service. Of the 31 youth in the sample, 65% (20 of 31) reached the indicated target contact hours. Further explanation is detailed in the Summary and Recommendations below.

Note: Dosage information (contact hours) is calculated from the Juvenile Justice Information System (JJIS) Evidence-Based Services module. Contact hours are included for the youth in the SPEP sample.

5. Risk Level of Youth Served:

Basic Score: 25 Points
Program Optimization Score: 25 Points
Program Optimization Percentage: 100%

Percentage of Youth with Moderate, Moderate-High, and High-Risk Levels to Reoffend: 97%
    Moderate to High Score: 12 Points
    Program Optimization Score: 12 Points
    Program Optimization Percentage: 100%

Table 1		
Moderate	=	3 youth
Moderate-High	=	8 youth
High	=	19 youth
Total Youth in Sample	=	31 youth

Percentage of Youth with High-Risk Level to Reoffend: 61%
    High Score: 13 Points
    Program Optimization Score: 13 Points
    Program Optimization Percentage: 100%

Table 2		
High	=	19 youth
Total Youth in Sample	=	**31** youth

The risk level score is compiled by calculating the total percent of the SPEP sample that score Moderate to High-Risk to reoffend and also the total percent of the SPEP sample that score High-Risk to reoffend.

Of the SPEP sample, 97% (30 of 31) youth scored Moderate to High-Risk to reoffend, for a score of 12 points.

Of the SPEP sample, 61% (19 of 31) youth scored High-Risk to reoffend, for a score of 13 points.

Note: The latest Community Positive Achievement Change Tool (C-PACT) prior to the placement date was used in the derivation of the risk level score. This C-PACT provides the best indication of the risk to re-offend level of the youth when the youth was first placed in the program.

Summary and Recommendations

Category	Basic Score	Program Optimization Score	Program Optimization Percentage
Primary and Supplemental Service Type	10	10	100%
Quality of Service Delivery	20	20	100%
Amount of Service: Duration	8	10	80%
Amount of Service: Contact Hours	6	10	60%
Risk Level of Youth Served	25	25	100%
Totals	69	75	**92**%

This SPEP report evaluates Individual Counseling, an intervention delivered at Gulf Youth Academy.

The program scored High for Quality of Service Delivery. This score can be optimized by minimizing facilitator turnover.

The program earned 8 points for Amount of Service: Duration. Of the 31 total youth sampled, 30 received at least the recommended weeks of service. Youth in the sample completed between 18 and 59 weeks of service, with an average of 40 weeks.

The program earned 6 points for Amount of Service: Contact Hours. Of the 31 total youth sampled, 20 received at least the recommended hours of service. Youth in the sample completed between 25 and 65 hours of service, with an average of 36 hours.

The program was awarded 25 available points for Risk Level of Youth Served. This is calculated using data from the Community - Positive Achievement Change Tool (C-PACT) assessment. This score reflects youths' most recent C-PACT score prior to placement at the program. The program itself has no control over youths' C-PACT risk level because the scored assessment was administered prior to the youths' admission.

RECOMMENDATION(S):

Gulf Youth Academy can optimize their SPEP Quality of Service Delivery score by minimizing facilitator turnover.

Gulf Youth Academy can optimize their SPEP Amount of Service score by ensuring that dosage for all youth is recorded accurately in EBS and by ensuring that youth receive the full targeted dosage of service.