



Standardized Program Evaluation Protocol (SPEP™):

DJJ's Primary Evaluative Tool for Statewide Services

## INTRODUCTION

#### Standardized Program Evaluation Protocol (SPEP™): DJJ's Primary Evaluative Tool for Statewide Services

In 2019, DJJ began the process of implementing SPEP™, a validated, data driven evaluative tool for determining how well an existing program matches to research evidence for the effectiveness of reducing the recidivism of juvenile offenders. Full implementation of SPEP™ allows juvenile justice systems to evaluate their service array, focus service-related data collection on features related to the expected effectiveness of those services, and develop deeper partnerships with providers as part of a service optimization effort.

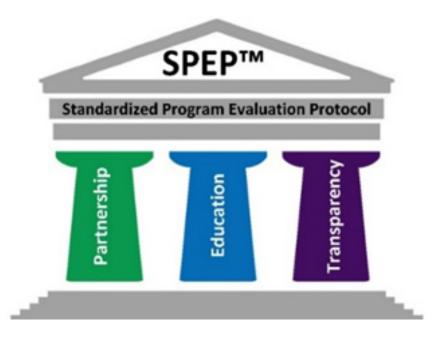
### The History of SPEP™

SPEP<sup>™</sup> was created by Dr. Mark Lipsey with Vanderbilt University in the early 2000s, and further defined by Dr. Gabrielle Chapman with the introduction of a rating instrument, feedback process, and life cycle. SPEP<sup>™</sup> is based on a meta-analysis of over 700 studies, both experimental and quasi-experimental, spanning over thirty years. Drs. Lipsey and Chapman's team has collected research investigating the effectiveness of interventions for reducing the recidivism of juvenile offenders that uses adequately controlled research designs. A wide range of descriptive information about the characteristics of those studies and statistical information about the magnitude of their effects on recidivism have been assembled into a database and analyzed to identify the program features most strongly associated with reductions in recidivism. The database is routinely updated and new studies continue to be added.



Through the data and research, Dr. Lipsey was able to discern key characteristics that, on average, are most strongly associated with reductions in the re-offense rates of youth. To be effective, a service must use a therapeutic approach aimed at internalizing behavior change; it cannot focus on external control or deterrence. Additional program components that increase effectiveness include the type of service delivered, the quality of service delivery, the amount of service delivered (dosage/duration), and the risk levels of the youth served. Using the SPEP™ rating scheme, these characteristics can be evaluated to determine approximately how effective a service, on average, will be in reducing recidivism.

SPEP<sup>™</sup> allows for both brand name services (e.g., Functional Family Therapy, Multisystemic Therapy, Aggression Replacement Training) and provider-developed, home grown services (e.g., skill building, group counseling) to be linked to the large body of research on program effectiveness. Once linked, SPEP<sup>™</sup> can be used to compare the key characteristics of a specific program to the characteristics research has shown to be effective for reducing recidivism. The goal of this evidence-based tool is to drive sustainable performance improvement for programs that serve the juvenile justice population; all while fostering and building a culture of **partnership**, **education**, and **transparency**, which are the three practice pillars of SPEP<sup>™</sup>.



## The SPEP™ Life Cycle

The SPEP<sup>™</sup> life cycle begins with identifying a provider to partner with to evaluate the services they offer to DJJ-involved youth. First, the SPEP<sup>™</sup> team conducts a classification interview process to identify the distinct services provided to the youth in each program. For providers that offer multiple services, this means that the individual, distinct services must be unpacked and separately identified. During the process, the SPEP<sup>™</sup> team poses questions to gather information such as type of youth served, staff training and credentials, activity schedules, and service implementation (e.g., goal of the service, facilitator, duration, intensity, format, completion). Each service is then classified or matched to one of the therapeutic SPEP<sup>™</sup> service types identified in the research evidence. Beyond identification of a program's services for SPEP<sup>™</sup>, this process provides an opportunity for relationship building between system and provider staff, as well as a chance for the system to get an accurate view of the provider's service array.

Each service moving forward with a SPEP<sup>™</sup> review will requires a Quality Measures Interview, youth level data collection, and a feedback report. The Quality Measures Interview is conducted to ascertain how well the provider supports and monitors the quality with which the services being assessed are delivered. The interview includes four components: 1) Written Protocol – the existence of a written protocol that describes the intended services and the way it is to be delivered; 2) Staff Training – staff delivering the service have the qualifications appropriate for delivering the service and have been trained in the actual service being delivered; 3) Staff Supervision – written processes are in place to monitor staff adherence to the written protocol and quality of service delivery; and 4) Organizational Response to Drift – written processes are in place and used to take corrective action when if significant departures from the written protocol or lapses in quality of service delivery occur.



The data collection consists of collecting the dosage and duration of the service, as well as the risk levels of the youth served. The duration of the service is defined as time between the first and last day the service is provided to each youth and the dosage is the total number of contact hours each youth has with the service. Each SPEP™ service type has an optimal duration and dosage identified based on the research evidence. DJJ utilizes the YASI overall risk score for the risk level component of the SPEP™ review. Research has shown that, on average, there are larger positive effects on recidivism with higher risk youth than with their lower risk counterparts.

The SPEP<sup>™</sup> team analyzes the qualitative and quantitative data and compiles the findings and recommendations into a SPEP<sup>™</sup> Summary Report for the provider, which is inclusive of the established rating scheme. The provider, in collaboration with the lead SPEP<sup>™</sup> Specialist, will determine which recommendations will be implemented to optimize the service's effectiveness to reduce recidivism for inclusion in a SPEP<sup>™</sup> Service Optimization Plan. Thereafter, the lead SPEP<sup>™</sup> Specialist and provider partners will have Quarterly CQI Meetings to review progress on the plan.



# **DJJ Implementation of SPEP**<sup>TM</sup>

DJJ has made an investment to implement and sustain evidence-based and evidenceinformed practices in Virginia. Implementing SPEP™ as the evaluative tool for services delivered to DJJ-involved youth maintains this investment. SPEP™ compares the characteristics within programs and services as they are delivered to the research in an effort to determine how to optimized to maximize service effectiveness in reducing juvenile recidivism. SPEP™ encapsulates a quality assurance approach and process to drive sustainable performance improvement for juvenile justice programs.

#### **SPEP™** Advisory Board

As part of the SPEP implementation, an Advisory Board was strongly encouraged by Vanderbilt to oversee the implementation and continuing operations. The Board is led by the QA unit and members include representatives from the Behavioral Services Unit (BSU), Research unit, Community Programs unit, DJJ's Division of Education, and community stakeholders to include the Regional Service Coordination (RSC) agencies, a Community Placement Program (CPP), and a dual residential and community provider. The first Board meeting was held on December 11, 2019 and continue to be held quarterly.

### Initial SPEP™ Training and Pilot

DJJ identified the QA, Practice Improvement, and Diversion units as the first cohort of DJJ staff to participate in the Level I SPEP<sup>™</sup> training. The initial classroom training occurred in December 2019 facilitated by Dr. Chapman. The practical application component of the training was temporarily placed on hold in 2020 due to the COVID pandemic. In the fall of 2020, Dr. Chapman reinstituted the DJJ cohort's training through a linkage with SPEP<sup>™</sup> implementation specialists with the Evidence-based Prevention and Intervention Support (EPIS) team at Penn State University. Virtual training opportunities included a booster training, shadowing of a full SPEP<sup>™</sup> evaluation to include observation of meetings with a provider, a debrief meeting with the EPIS team, mock data reviews, and a close out meeting in January 2022. The partnership with Pennsylvania was invaluable for the implementation of SPEP<sup>™</sup> in Virginia.



During the virtual training process with Pennsylvania, the QA unit received approval to move forward with the SPEP<sup>™</sup> implementation at the pilot sites. For the SPEP<sup>™</sup> pilot, QA partnered with two CPPs, Merrimac and Virginia Beach, to review services offered to direct care youth. The training cohort was divided into two groups to begin the SPEP<sup>™</sup> cycle with the CPPs in April 2021. The pilot process with the two CPPs were completed in May 2022.

### **SPEP™ Learning Community**

Virginia has also created a SPEP<sup>™</sup> Learning Community to allow all SPEP<sup>™</sup> Specialists to come together to share expertise, collaborate with each other to increase SPEP<sup>™</sup> skills, and stay up-to-date with SPEP<sup>™</sup> implementation in Virginia.

### The Future of SPEP™ in Virginia

In an effort to sustain SPEP<sup>™</sup> best in Virginia, the QA unit renewed the contract with Vanderbilt University in 2022 to have staff complete Level II SPEP<sup>™</sup> training to become certified SPEP<sup>™</sup> trainers. As part of the Level II training, QA developed a Virginia training for Level I SPEP<sup>™</sup> Specialists to include a classroom training and experiential or practical application training. Those in Level II training facilitated a Level I classroom training in August 2022 with nine participants and subsequently conducted the practical application training through SPEP<sup>™</sup> reviews with four providers; Chesterfield CPP, Prince William CPP, and Bon Air Juvenile Correctional Center, and Rappahannock Area Office on Youth. The partnership with Rappahannock Area Office on Youth was a pilot review to guide SPEP<sup>™</sup> implementation with community providers. The QA unit plans to continue SPEP<sup>™</sup> training through Level III Master Trainer certification, which would allow staff to train new Level II SPEP<sup>™</sup> trainers to increase sustainability throughout Virginia.

