Senate Interim Judiciary Committee
House Interim Judiciary Committee

Senate Bill 267
2005-2007 Progress Report

September 20, 2006
I. **Agency Description**

The mission of the Oregon Youth Authority (OYA) is to protect the public and reduce crime by holding youth offenders accountable and providing opportunities for reformation in safe environments. The OYA is:

- Responsible for the supervision, management, and administration of youth correctional facilities and transition programs, state parole and probation services, community-based out-of-home placements for youth offenders, and other functions related to state programs for youth corrections.

- Dedicated to increasing the effectiveness of youth treatment through ongoing program evaluation and quality improvement. The agency’s mission statement and goals are closely monitored through Performance-Based Standards (PbS), Oregon Benchmarks, Performance Measures and other evaluative functions.

II. **Programs Included Under ORS 182.515-182.525**

The OYA determined the following treatment interventions employed by close custody, contracted community residential providers and county programs funded through OYA are subject to ORS 182.515-182.525. This list has changed slightly from 2004 as a result of extensive discussions within internal workgroups and with stakeholders. These changes were deemed necessary in order to maintain consistency across those agencies for which the state statute applies.

- Cognitive behavior treatment
- Behavior modification
- Sex offender treatment
- Fire setter treatment
- Drug and alcohol treatment
- Violent offender treatment
- Mental health treatment (including crisis intervention)
- Family counseling
- Skill building (e.g., anger management, social skills, mentoring, vocational counseling, etc.)
- Parent training
- Culturally Specific Treatment
- Gang intervention treatment
- Gender specific treatment (females)

III. **Assessment Method**

The OYA is currently conducting the second round of program reviews for all OYA close custody facility units and contracted community residential programs using the Correctional Program Checklist (CPC), formally known as the Correctional Program Assessment Inventory (CPAI; Gendreau and Andrews, 1995). Although the instrument
has changed slightly, the process remains the same and allows a comprehensive picture of program integrity to surface.

The CPC instrument measures the degree to which a program adheres to the “principles of effective intervention” – those program characteristics which research has shown are highly correlated with reducing recidivism. The OYA has adopted a series of principles which guide the agency practices. Some of these are:

- Assessing risk and need levels of youth offenders
- Developing and implementing evidence-based programs
- Using cognitive and social learning approaches in treatment services
- Matching youth and interventions based on risk, need and responsivity
- Ensuring fidelity of programs to evidence-based model
- Ensuring all youth offenders have a transition plan in place to facilitate success in the community upon release

The assessment process includes a series of structured interviews with youth and staff, treatment group observation and review of policy and procedure manuals, case files and treatment curricula. In addition, the CPC examines the risk and needs of clients, training and supervision of staff, professional ethics, program characteristics and treatment approaches.

**OYA Close Custody Facilities**

In 2004, all OYA close custody facilities (N=10) were assessed using the CPC. However, in 2005, the OYA decided to identify each living unit as a separate “program,” due to the diversity of programming and specialized services offered by individual living units within the OYA close custody facilities. In doing so, the OYA captures the most accurate picture of strengths and areas needing improvement and consequently, can develop an effective roadmap addressing any program deficiencies. *See Figure 1, page 4.*

**OYA Contracted Community Residential Providers**

In 2004-2005 the OYA evaluated all of its community residential providers (N=31). At this time 12 of the contracted residential providers were determined “Unsatisfactory” or “Needs Improvement” on the CPC. To date, nine of the 12 programs have been reassessed. *See Figure 2, page 5.*

**IV. Activities to Date**

Since the enactment of ORS 182.515-182.525 the OYA has demonstrated its commitment to increasing the effectiveness of the services provided through implementation of evidence-based interventions. Additionally, the OYA has made considerable efforts towards increasing the agency wide understanding best practices in correctional treatment. In pursuit of these goals the OYA has successfully:

- Implemented a standardized Risk Needs Assessment (RNA) and case planning system to drive and support effective treatment.
• Adopted and implemented in OYA close custody facilities, evidence-based treatment curricula shown to be correlated with reducing risk to recidivate. These include:
  - A cognitive behavioral curriculum created by Dr. Edward Latessa of the University of Cincinnati. This curriculum aims to decrease anti-social thinking and increase pro-social behaviors; increase problem solving and social skills; teach youth to evaluate high-risk situations; and increase other skills correlated with reducing risk to recidivate.
  - Cannabis Youth Treatment (CYT) - a comprehensive drug and alcohol program.
  - Aggression Replacement Training (ART).
  - Dialectical Behavioral Therapy (DBT).
  - Motivational Interviewing (MI).
  - Treatment for Youth With Inappropriate or Dangerous Use of Fire.

• Adopted and implemented within OYA field services, evidence-based treatment programs such as Functional Family Therapy (FFT), Multi-Systemic Treatment (MST) and Motivational Interviewing (MI). The OYA worked closely with the Department of Human Services to expand the number of FFT providers throughout the state.

• Provided technical assistance and consultation to providers on evidence-based curricula.

• Implemented the use of curriculum-specific fidelity measures (e.g., cognitive behavioral curriculum, ART, etc.) to determine the quality of service delivery.

• Provided unit-based training for all direct service treatment staff in youth correctional facilities and transition camps in the use of cognitive behavioral interventions.

• Re-assessed OYA programs previously rated as “Needs Improvement” or “Unsatisfactory” according to the CPAI.

• In collaboration with the Department of Corrections (DOC) conducted two additional CPC trainings led by Dr. Latessa in October 2005 and August 2006. These trainings included more than 35 OYA staff members and stakeholders, of which 17% were people of various cultural backgrounds such as African American, Latino, and Native American.

• Coordinated with DOC in August 2006 to develop an inter-rater reliability training, led by Dr. Latessa, to ensure consistent scoring on CPC items across all facilities.

• Organized four trainings, each eight hours in length, for close-custody Treatment Managers, Program Directors, Qualified Mental Health Professionals (QMHPs)
and Superintendents/Camp Directors to help staff better understand the components of evidence-based practices. During this seminar the OYA management staff developed work plans to map out which Evidence-based Practices (EBP) components will be implemented within the next six to twelve months.

- Met with county juvenile department officials on several occasions to establish a process by which services funded by Juvenile Crime Prevention (JCP) Basic, Diversion and Individualized Services dollars will be assessed in order to determine if services are “evidence-based.”

V. Results of Program Reviews

CPC Assessment Data

Data from CPC re-assessments show 38% of close custody facility units and 74% of the OYA contracted community residential programs qualify as “evidence-based.” These percentages are reflected in Figures 1 and 2, shown below. It is also important to note that to date, seven of the 10 OYA close custody facilities have scored either “Very Satisfactory” or “Satisfactory” on the CPC.

Figure 1: Percent of OYA close custody living units (N=34) scoring within each of the four CPC categories. The “Very Satisfactory” and “Satisfactory” categories have been combined as these CPC categories indicate the program is utilizing “evidence-based” practices. This figure reflects the most recent assessment or re-assessment score.
Since 2004, the OYA has made significant progress in implementing evidence-based services. The table below provides a summary of the agency’s development to date.

Table 1: The percentage of OYA “programs” using “evidence-based” services in 2004 compared with the percentage of programs qualifying as “evidence-based” to date. A total of 31 contracted community residential programs and 34 close custody units have undergone at least one CPC assessment.

<table>
<thead>
<tr>
<th></th>
<th>Initial Review (2004): Programs Meeting Evidence-based Standard</th>
<th>Most Recent Assessment: Programs Meeting Evidence-based Standard</th>
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</thead>
<tbody>
<tr>
<td>Close Custody Facility Units</td>
<td>0 %</td>
<td>38 %</td>
</tr>
<tr>
<td>Contracted Community Residential Programs</td>
<td>56 %</td>
<td>74 %</td>
</tr>
</tbody>
</table>

VI. Budget Allocations to Evidence-Based Services

To date, the OYA has exceeded the statutory requirement that 25% of state funds spent on programs subject to SB 267 be spent on evidence-based programs. Almost half (47%) of total funds, including 37% of General Fund, will be spent on programs meeting this statutory requirement during the 2005-07 biennium.
The total budget amount displayed below includes only the programs that were determined by the agency as subject to ORS 182.515-182.525.

2005-2007 Legislatively Approved Budget for OYA
- $245.9 million Total Funds
- $207.5 million General Fund

Portion of OYA Budget subject to SB 267
- $60.6 million Total Funds
- $41.5 million General Fund

The following figure and table show the percentage of program expenditures meeting the evidence-based standard by program type and fund type.

![Diagram](image_url)

*Figure 3: Forty-seven percent of all funds spent on SB 267 programs in 2005-07 will be spent on EBP’s. Thirty-seven percent of the state General Fund will be spent on evidence-based programming in this biennium.*
The table below (Table 2) shows the percentage of the OYA budget allotted to “evidence-based programs” broken out by close-custody and community-based services. The OYA has exceeded the 2005-07 target of 25% of state monies devoted to evidence-based programming.

Table 2: The percentage of the OYA budget allotted to “evidence-based programming” broken out by close-custody and community based services.

<table>
<thead>
<tr>
<th>Oregon Youth Authority</th>
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<tbody>
<tr>
<td>Summary of Expenditures Subject to SB 267</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>FUND TYPE</th>
<th>TOTAL FUNDS</th>
<th>General Fund</th>
<th>Federal Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Facility Services:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Program Expenditures subject to SB 267</td>
<td>$ 20.8</td>
<td>$ 20.8</td>
<td></td>
</tr>
<tr>
<td>Evidence Based Program Expenditures</td>
<td>$ 7.0</td>
<td>$ 7.0</td>
<td></td>
</tr>
<tr>
<td>Percentage of Total Expenditures Evidence Based</td>
<td>34%</td>
<td>34%</td>
<td></td>
</tr>
<tr>
<td><strong>Community Services:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Program Expenditures subject to SB 267</td>
<td>$ 39.8</td>
<td>$ 20.7</td>
<td>$ 19.1</td>
</tr>
<tr>
<td>Evidence Based Program Expenditures</td>
<td>$ 21.4</td>
<td>$ 8.3</td>
<td>$ 13.1</td>
</tr>
<tr>
<td>Percentage of Total Expenditures Evidence Based</td>
<td>54%</td>
<td>40%</td>
<td>69%</td>
</tr>
<tr>
<td><strong>Agency Total</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Total Program Expenditures subject to SB 267</td>
<td>$ 60.6</td>
<td>$ 41.5</td>
<td>$ 19.1</td>
</tr>
<tr>
<td>Evidence Based Program Expenditures</td>
<td>$ 28.4</td>
<td>$ 15.3</td>
<td>$ 13.1</td>
</tr>
<tr>
<td><strong>Percent of Program Evidence-Based</strong></td>
<td>47%</td>
<td>37%</td>
<td>69%</td>
</tr>
</tbody>
</table>

It is important to note that Facility Services includes youth correctional facilities, transition and work study camp program. Community Services include Juvenile Crime Prevention Basic, Diversion, Gang services, Residential and Foster Care, Individualized services and parole and probation services.

**VII. Cost Effectiveness**

In addition to being evidence-based, the statute requires that juvenile justice programs in Oregon be cost-effective. Cost-effectiveness means money spent on evidence-based practices will reduce recidivism (future offenses) and thereby avoid future costs to crime victims and the criminal justice system. Examples of resources included in these potential savings are costs for youth correctional facilities (room, board, treatment, etc.), residential treatment providers, parole, police and sheriff services, and crime victim costs. A cost-effectiveness model allows economists to determine the “return” or net benefit for
the services implemented and consequently, enables administrators to make informed decisions with regard to programming.

Over the past several years, the Washington State Institute for Public Policy (WSIPP) has done extensive work in the area of cost-effectiveness as it relates to prevention and intervention programs. The Oregon Youth Authority, criminal justice agencies, and other stakeholders have decided to rely on the model developed by WSIPP to guide the development of a cost-effectiveness model specific to Oregon.

OYA has utilized results from the WSIPP studies as a road map to make financial investments the agency expects to produce maximum benefit to youth, Oregon taxpayers, and local communities. A recent article entitled, “Benefits and Costs of Prevention and Early Intervention Programs for Youth” (WSIPP, September 2004) highlighted several key principles essential to gaining the greatest return from correctional programming. Some of these factors include:

- Investing in research-proven programs which have evidence of high returns.
- Staying current on research literature.
- Evaluating existing programs to determine cost-effectiveness.
- Developing quality control measures to ensure program fidelity (i.e., programs are implemented as designed.)

The OYA is committed to these cost-effective principles and has addressed a number of these over the course of the past few years. Steps taken thus far include:

- **Adopting several research proven and cost-effective treatment strategies** and curricula such as cognitive behavioral treatment and family based interventions.
- **Establishing a Curriculum Review Committee (CRC)** to review the most recent correctional literature, and to advise the OYA administration on which treatment approaches and protocols will most likely reduce recidivism and best meet the needs of youth in our custody.
- **Shifting from ineffective treatment practices to approaches that are proven through research to decrease recidivism.** This is most clearly exemplified by the re-tooling of the Tillamook Youth Accountability Camp, a military-style boot camp. Presently, the re-named Tillamook Youth Correctional Facility provides cognitive behavioral treatment to low- and moderate-risk sex offenders.
- **Adopted quality assurance measures for all program curricula** (e.g. treatment fidelity forms) to ensure programs are implemented as designed.

Based on the research from the WSIPP, the OYA expects the evidence-based programming that has been implemented, coupled with the quality assurance measures, will decrease recidivism. In support of this projected outcome, the table below displays the WSIPP findings of the estimated benefits produced by evidence-based programs adopted by the OYA. The full report on cost effectiveness for youth programs is available at [http://www.wsipp.wa.gov/pub.asp?docid=04-07-3901](http://www.wsipp.wa.gov/pub.asp?docid=04-07-3901)
The following table (Table 3) displays the WSIPP expected cost saving per youth in juvenile justice programming.

Table 3: WSIPP expected cost avoidance.

<table>
<thead>
<tr>
<th>Washington State Juvenile Offender Programs</th>
<th>Estimated Benefits per Dollar Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aggression Replacement Training (ART)</td>
<td>$20.56</td>
</tr>
<tr>
<td>Dialectical Behavior Therapy (DBT)</td>
<td>$38.05</td>
</tr>
<tr>
<td>Functional Family Therapy (FFT)</td>
<td>$13.25</td>
</tr>
<tr>
<td>Multidimensional Treatment Foster Care (MTFC)</td>
<td>$10.88</td>
</tr>
<tr>
<td>Multi-systemic Therapy (MST)</td>
<td>$2.64</td>
</tr>
</tbody>
</table>

Currently, the OYA is working with other criminal justice partners to replicate the cost model provided by WSIPP to calculate the future costs avoided per youth (cost-effectiveness) with our current practices in Oregon dollars.

VIII. Action Steps

From the results of the CPC reassessments conducted to date, the OYA has determined a number of programmatic areas to target prior to the September 2008 legislative report:

- Develop eligibility criteria for youth to enter treatment services provided in each close custody living unit.
- Match youth to treatment using the standardized OYA Risk Needs Assessment (RNA) instrument and eligibility criteria.
- Increase the intensity of evidence-based treatment within the OYA close custody facilities.
- Investigate the effectiveness of evidence-based transition services and implement as warranted to enhance youth success in the community post-program release and at termination.
- Re-assess on annual basis those close custody facility units and community residential programs which rated “Needs Improvement” or “Unsatisfactory.”
- Improve the quality of treatment by continuing to provide technical assistance and training in the areas of treatment service delivery, clinical supervision, group facilitation, treatment fidelity, etc.
- Determine how to assess when “evidence-based” practices are being used for county Diversion, JCP Basic Services, youth gang services, parole and probation services, and the OYA contracted “individualized” service providers.
References


