

Using the Youth Assessment & Screening Instrument (YASI) Collaborative Casework Model for Treatment Planning

Using the Youth Assessment & Screening Instrument (YASI) Collaborative Case Work Model for Treatment Planning

Presented by:

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Capria Pinkney, Practice Improvement Coach, Southern Region

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MEET YOUR PRESENTERS: STEPHANIE GREEN

I currently serve as the Practice Improvement Supervisor with 19 years of service with DJJ. I have held several positions such as Probation officer, VJCCA Program Administrator, Probation Supervisor, Diagnostic Supervisor, and Practice Improvement Coach for the Southern Region. I love it when people remember "the Why" when working with our youth.



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MEET YOUR PRESENTERS: CAPRIA PINKNEY

I currently serve as the Regional Practice Improvement Coach for the Southern Region. I have held positions such as CAP Counselor, Probation/Parole Officer, Parole Sr. and Probation Supervisor. I believe it is our responsibility to ensure our youth have a strong foundation. I believe all youth are the future and therefore it is our responsibility to ensure that they have a strong foundation from which to operate.



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WAYS TO INTERACT

OPTIONS FOR QUESTIONS

- Raise Hand Feature
- Chat
- Q & A Session

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TRAINING OBJECTIVES

- Understand the Principles of Effective Intervention
- Learn elements of the YASI instrument
- Learn about YASI process
- How to interpret wheel and domains
- Ensure coordination with CSU delivered intervention
- Practice how to complete treatment plan using YASI Targets for Change

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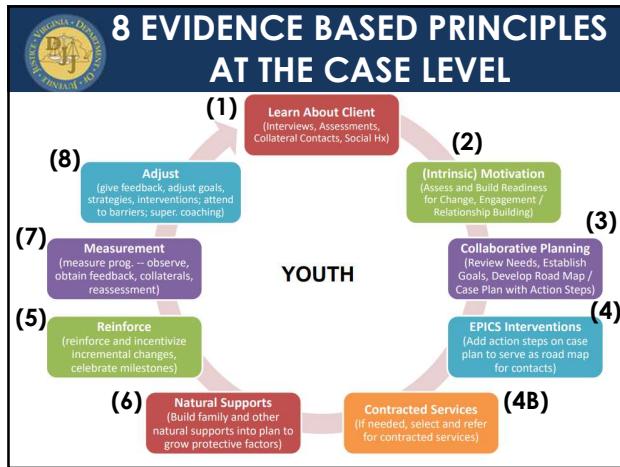
8 EVIDENCE-BASED PRINCIPLES

- 1) Assess Risk, Needs, Strengths
- 2) Enhance Intrinsic Motivation
- 3) Target Interventions
Risk – Need – Responsivity
Dosage – Treatment
- 4) Skill Train / Use CBI
- 5) Positive Reinforcement
- 6) Support in Natural Communities
- 7) Measure Relevant Process Practices
- 8) Provide Measurement Feedback

- • Learn About Youth
 - Interview / Behavioral Analysis
 - YASI Risk Assessment Scoring
 - Other Screens and Assessments
 - Social History Report
- • Engagement / Relationship Building
 - Stages of Change-Matched Strategies
- • Assessment-Driven Case Plan Targets
 - Treatment Package:
 - Plan Contact Content / Selection of Interventions
 - Selection of Contracted Services (If needed)
- • EPICS
 - Effective Reinforcement / Incentives
 - Family Engagement / Community Linkages
 - Build Protective Factors
 - Measurement of Progress; Reassessment
 - Document Progress
 - Provide Client Feedback
 - Make Adjustments

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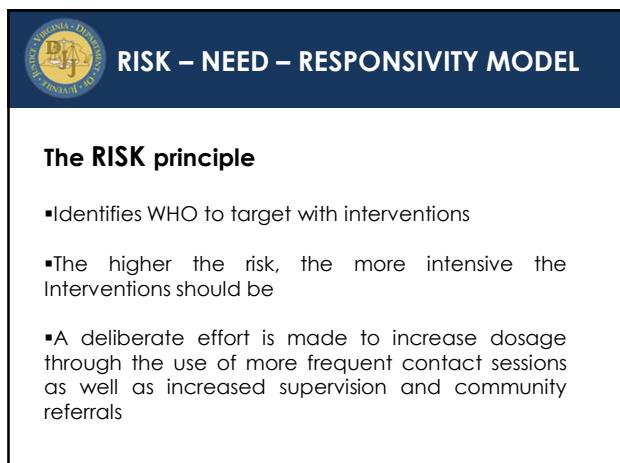
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RISK – NEED – RESPONSIVITY MODEL

Criminogenic Need Areas

- Attitudes, values, beliefs
 - Peers associations
 - Personality and emotional orientation

?

 - Leisure/recreation
 - Education/employment
 - Substance Abuse
 - Family

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DOSAGE GUIDELINES

Dosage guidelines based on emerging research:

- 100-150 hours for moderate risk
 - 200 - 300 hours for high risk
 - 100 hours for high-risk will have little effect

Community treatment providers and community supervision can work together to build treatment packages with individualized dosage.

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DOSAGE REMINDERS

By following the EPICS model and using cognitive-behavioral interventions during contact sessions, Probation Officers are steadily adding to "dosage" that young people need to change their behavior.

... however

Youth often need more dosage than we can provide alone and that is targeted on the right need areas, we can increase their dosage by coaching up individuals who are part of their natural support networks and referring them for contracted services.

We are much more likely to achieve this goal collaboratively!

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RISK – NEED – RESPONSIVITY MODEL

The NEED principle

- Identifies **WHAT** to target with interventions
- The higher the need, the more intensive the interventions should be
- Relates to the types of referrals made
- Relates to interventions facilitated during a contact session

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RNR FRAMEWORK

Discussion Question:

What happens if the risk and need principles are not followed?

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RISK – NEED – RESPONSIVITY MODEL

General Responsivity

- Identifies **HOW** to target with interventions
- Use cognitive-behavioral interventions- Why?
- Relates to the interventions facilitated during a contact session or group session

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RISK – NEED – RESPONSIVITY MODEL

Specific Responsivity

- Identifies **HOW** to target with interventions
- Remove barriers to treatment
- Match style and mode of service delivery to key offender characteristics (e.g., temperament, learning style, motivation, gender and culture)
- Relates to the type of referrals made

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SPECIFIC RESPONSIVITY FACTORS

Cognitive Limitations	Language
Physical Limitations	Ethnicity
Mental Health Concerns	Cultural Barriers
No Desire to Change (Motivation)	History of Abuse /Neglect
Trauma Background	Interpersonal Anxiety
Reading/Writing Limitations	Transportation
	Childcare

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RNR FRAMEWORK

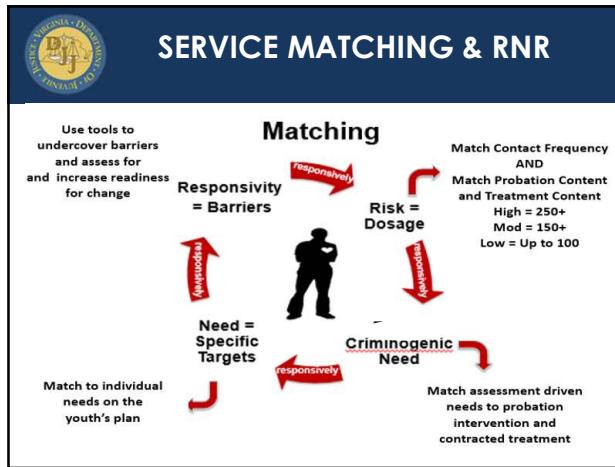
Discussion Questions

How do you as service providers identify and address barriers as presented?

How could this knowledge of RNR help you with your service delivery?

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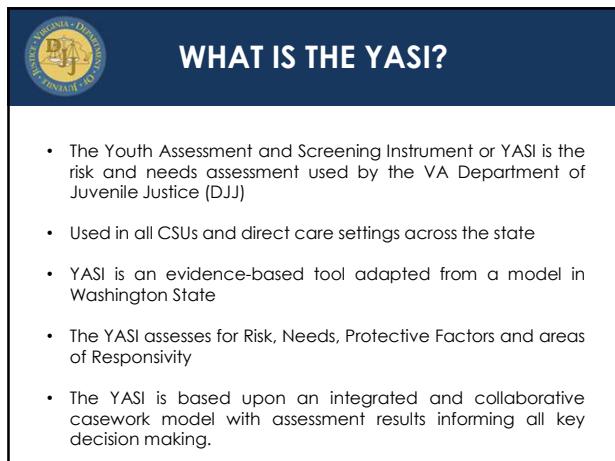
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YASI VERSIONS

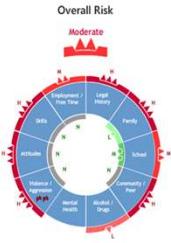
Pre-Screen and Full Assessment

Pre-Screen

- 32 items completed before admission
- Predicts future recidivism
- Classifies youth according to their likelihood of recidivism

Full Assessment

- 87 items (including the 32 Pre-Screen items), completed by case managers
- Used to develop case plans for increasing strength and reducing risk of recidivism



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STATIC V DYNAMIC

- Static Components**—Unchangeable characteristics that predict future behavior (i.e. criminal history or having been abused as a child)
- Dynamic Components**—Changeable characteristics or situations that predict future behavior (i.e. SA concerns or Attitudes.)
 - By targeting Dynamic risk factors service providers are able to develop intervention strategies to address risk areas and skill deficits that were part of the youth's behavior that brought them to the court to decrease the likelihood that the behavior is repeated.

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PROTECTIVE FACTORS

- Protective Factors**—or strengths, focus on elements of resilience and prevention. These factors can help high risk youth adjust positively but a lack of protective factors can cause some low risk cases to go wrong.

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 **STATIC OR DYNAMIC?**

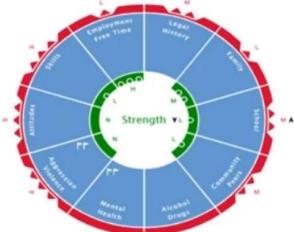
1. Number of Violations of Probation
 2. Compliance with Parental Rules
 3. Youth is proud of behavior
 4. Youth has made attempts or thoughts to harm self

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 **YASI GRAPHICAL RESULTS**

THE YASI WHEEL

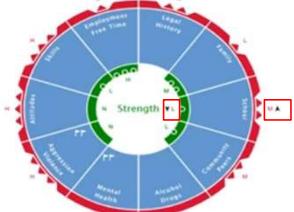
Overall Risk: High (Red)
 Needs - 6 Levels: Moderate-High (Red)
 Static Risk: High (Red)
 Strength - 6 Levels: Moderate-High (Green)



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 **REASSESSMENTS**

- DJJ completes reassessments every 90 days
- Provider progress reports serve as critical collateral information at time of reassessment



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HOW DOES DJJ USE THE YASI?

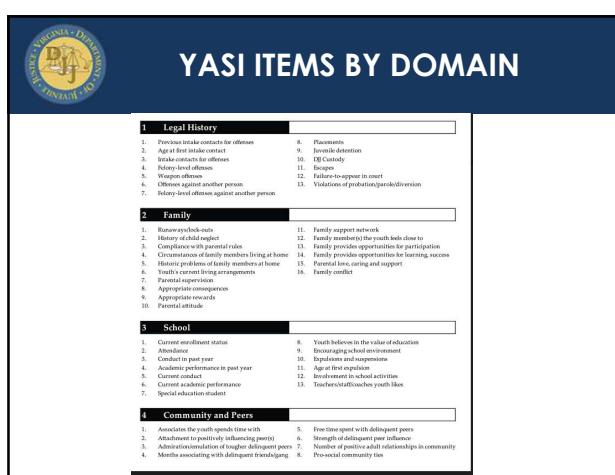
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YASI DOMAINS

Legal History
Family
School
Community/Peers
Alcohol/Drugs

Mental Health
Aggression/Violence
Attitudes
Skills
Employment/Free Time



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YASI ITEMS BY DOMAIN

5 Alcohol and Drug	
1. Substance abuse	
2. Receptivity to substance use treatment	
3. Previous substance use treatment	
6 Mental Health	
1. Mental health problems	5. Physical/sexual abuse
2. Hospitalizations	6. Victimization
3. Suicidal attempts	
4. Sexual aggression	
7 Aggression	
1. Violence	4. Belief in use of physical aggression to resolve a disagreement or conflict
2. Hostile interpretation - actions/intentions of others	5. Threatening behavior to resolve a disagreement or conflict
3. Tolerance for frustration	
8 Attitudes	
1. Responsibility for delinquent/criminal behavior	5. Attitude during delinquent/criminal acts
2. Understanding impact of behavior on others	6. Law-abiding attitudes
3. Willingness to make amends	7. Respect for authority figures
4. Optimism	8. Readiness to change
9 Skills	
1. Problem-solving skills	5. Loss of control over delinquent/criminal behavior
2. Social perspective-taking skills	6. Interpersonal skills
3. Problem-solving skills	7. Goal-setting skills
4. Impulse-control skills to avoid getting in trouble	
10 Employment and Free Time	
1. Household responsibilities	5. Structured recreational activities
2. Number of hours employed	6. Unstructured recreational activities
3. Longest period of employment	7. Challenging/generating hobbies/activities
4. Positive relationships with employers	8. Decline in interest in positive leisure pursuits

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BEHAVIOR ANALYSIS (ABCD)

After completing a Behavior Analysis Interview and scoring the assessment to produce a YASI Wheel, there is a place in the YASI Caseworks software for entering the written summary of the Behavioral Analysis (ABCD).

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THINK "TREATMENT PACKAGE"

- Probation / Parole Officer are the primary interventionist in the delivery of cognitive-behavioral interventions.
- To ensure enough "dosage" officers need to think about coordinated "treatment packages". Officers often need to use multiple strategies and sometimes need to refer youth for contracted services over and above what we provide internally.
- When making referrals, the Probation / Parole Officer is the consumer and in charge of putting together an integrated and coordinated plan of treatment / intervention.
- It is important that selected services are high quality, complementary and matched to needs identified during assessment and collaborative case planning sessions.

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SERVICE MATCHING: WHEN WE REFER FOR SERVICES

WHEN REFERRING TO ANOTHER AGENCY OR FOR EXTERNAL SERVICES:

Some but not all youth require additional services. These are the circumstances when probation/parole officers refer out to another agency or to an external provider.

- Access another local or state government agency that runs programs designed to build protective factors (e.g. pro-social activities, community linkages)
- Service needs are not related to delinquency matter and/or needs are part of the responsibilities of another agency (e.g. abuse/neglect, foster care prevention, housing, financial assistance)
- Service needs are outside of DJJ area of expertise and/or require a specific specialized credential (e.g. mental health concerns, substance abuse services, sex offender services)
- Given the risk and need profile a higher dosage of treatment is required than what can be provided by probation/parole alone.

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REVIEW COMPONENT OF CSUs 4-PART APPOINTMENT STRUCTURE

During the review component of the CSU's appointment structure probation officers review what youth are learning in external contracted services.

Questions they may ask:

- What are you learning in your groups or service?
- How have the things you've learned at (insert service name) helped you so far?
- Tell me about a recent skill or tool you learned in one of your groups to help you be more successful

This is an opportunity for officers to assess service quality, identify any barriers to service delivery and reinforce learning and provide additional practice opportunities.

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MONTHLY UPDATE

Frequent contact (at least monthly) between the PO and service provider provides an opportunity to assess service effectiveness, identify any barriers to service delivery and reinforce learning and provide additional practice opportunities.

During the bi-weekly or monthly update between PO and Service Provider, you as the provider may ask:

- What strategies have you put in place?
- Are you working on a specific skill/intervention so that I may reiterate it with the youth?
- Has my client addressed how the things we have worked on have helped them so far?

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CSU CASE PLANNING

- Developed within first 45 days.
 - Identifies specific targets based on YASI and BA
 - Maintains contacts on criminogenic needs
 - Creates a roadmap of the supervision process for staff and the youth
 - Document case activity including referrals, interventions and progress

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CASE PLAN TARGETS

Comprehensive Case Plan: Juvenile Name Here	
Priority 1:	Aggression/Violence
Targeted Items: Believes violence is often appropriate or necessary	
Priority 2:	Skills
Targeted Items: • Sometimes confused about the consequences of behavior	
Priority 3:	Community/Peers
Targeted Items: • Youth admires or emulates negative or delinquent peers	
Action Steps	
<ul style="list-style-type: none"> 1 AV - Enroll in and complete Anger Management. 	
Domains	: Aggression/Violence;
Participants	: Client ; Contracted Service Provider;
Setting:	: Probation Supervision
Service Status	: Achieved

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SKILLS/ SUPPORTS/ STRATEGIES

Domain: Aggression/Violence

Target: Believes violence is often appropriate or necessary

Strategy (CSU Internal Interventions): Skill Card #26--Using Self Control

Support: Baseball Coach, Mr. Morton

Service: Referring youth to Aggression
Replacement Training

What service do you provide that would address this target?

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 **PRACTICE**



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 **SCENARIO 1: NAOMI**

NAOMI is on probation for assault. She has assaulted her mother on more than one occasion. There is a high level of conflict between family members with verbal intimidation, yelling and heated arguments and sometimes physical violence.

Service Provider's Initial Family Meeting:

Mother described daily fights with Naomi. She stated Naomi is easily agitated and she believes she is depressed. Naomi cried and yelled at her mother during meeting. Naomi was annoyed and she offered little input during the meeting.

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 **SCENARIO 1: NAOMI**

Priority Domain: Aggression/Violence (High)
Target items: Belief in use of physical aggression to resolve a disagreement or conflict

Priority Domain: Family (High)
Target items: Level of conflict between youth and parents, and among siblings

Priority Domain: Skills (High)
Target items: Loss of control over delinquent/criminal behavior

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STRATEGY/SERVICE	
Recommended Internal CSU-Delivered Intervention(s), if any	Recommended External Contracted Service(s), if any
Structured Skill Building Skill 26: "Using Self Control" (A/V) or Skill 17: "Understanding Feelings of Others" (Family)	Aggression Replacement Training (ART) Functional Family Therapy (FFT) Multi-Systemic Therapy (MST)

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SCENARIO 2: MALIK	
 <p>MALIK is 15 years old and has been assessed as a high risk. He participated in a group-based assault. He said he feels bad about what happened and realizes that he let his friends influence his decision.</p> <p>Service Provider's Initial Family Meeting:</p> <p>Malik's parents reported that they believe his friends are gang members and he gets high with them. Malik denied using drugs with friends, got angry and left the room when his parents made those statements. Malik did not return and refused to participate in the meeting.</p>	<hr/>

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SCENARIO 2: MALIK	
<p>Priority Domain: Community/Peers (High) Target item: Usually goes along with delinquent peers</p> <p>Priority Domain: Aggression/Violence (High) Target item: Believes that violence is sometimes appropriate or necessary</p> <p>Priority Domain: Skills (Moderate) Target item: Cannot identify when problem behaviors or situations occur</p>	<hr/>

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STRATEGY/SERVICE	
Recommended Internal CSU-Delivered Intervention(s), if any	Recommended External Contracted Service(s), if any
Structured Skill Building (Peer Refusal Skills) Cognitive Restructuring Cost Benefit Analysis	Anger Management Aggression Replacement Training (ART)

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A presentation slide titled "SCENARIO 3: ALLISON". The title is in large, bold, white capital letters at the top right. In the top left corner, there is a circular logo for the Virginia Department of Juvenile Justice. The logo features a scale of justice in the center, surrounded by the words "THE VIRGINIA DEPARTMENT OF JUVENILE JUSTICE" and "DOJJ.VA.GOV".

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SCENARIO 3: Allison

Priority Domain: Substance Abuse (High)

Target items: Substance use disrupts function in several areas of life

Priority Domain: Attitudes (High)

Target items: Exhibits only passive or no support for change

Priority Domain: Skills (Moderate)

Target items: Believes that most problem behavior cannot be controlled.

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STRATEGY/SERVICE	
Recommended Internal CSU-Delivered Intervention(s), if any	Recommended External Contracted Service(s), if any
Behavior Chain/Cog Restructuring Cost Benefit Analysis Skill Building	Family Therapy (FFT/MST) and/or Substance Abuse Treatment

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DELIVERING CONTRACTED SERVICES: POTENTIAL PITFALLS	
<ul style="list-style-type: none"> Lack of communication between referral source and service provider <ul style="list-style-type: none"> Not speaking same language Re-inventing the wheel—not utilizing the information received from the referral source and relying only on your own assessment. Written reports summarizing the work of the provider shows misalignment between the work that was provided and the referral request Failure to make adjustments to plans based upon changes and circumstances, including lack of progress, new presenting problems and violations Missed opportunity to do an internal review of what can be done differently when things are not going well with a youth/referral Failure to recognize and communicate service limitations (agency is not a good fit for requested service) 	<hr/>

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DELIVERING CONTRACTED SERVICES: TIPS FOR SUCCESS	
<ul style="list-style-type: none"> Maintain ongoing active written and verbal communication with referral source (coordination of services, joint meetings, etc.) Ensure initial communication with referral source at time of service initiation (allows clarity of right need areas) Be specific about service delivery based on the need area the probation officer wants you to target Obtain as much upfront information as you can about responsibility issues (both strategies that could enhance service provision as well as potential barriers) Proactively communicate back with referral source about any service limitations, potential barriers of service delivery before it becomes an issue Coordinate services with the interventions the probation/parole officer is providing 	<hr/>

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LET'S REVIEW:

**Right Youth +
Right Interventions & Services +
Right Timing + Right Dosage +
Right Targets for Change =**

**Behavior Change
Successful Youth and Families
Good Outcomes**

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QUESTIONS

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CONTACT INFORMATION

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