

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Jim Pillen, Governor

December 15, 2024

The Honorable Jim Pillen Governor of Nebraska P.O. Box 94848 Lincoln, NE 68509

The Honorable Jeffrey Funke Chief Justice Supreme Court of the State of Nebraska P.O. Box 98910 Lincoln, NE 68509

Mr. Brandon Metzler Clerk of the Legislature P.O. Box 94604 Lincoln, NE 68509

Subject: Juvenile Evidence Based Practice Report

Dear Governor Pillen, Chief Justice Funke, and Mr. Metzler:

Nebraska Revised Statute § 43-407 required the Office of Juvenile Services to begin implementing evidence-based practices, policies, and procedures by January 15, 2016. Thereafter, on December 15 of each year, the office shall submit to the Governor, the Chief Justice of the Supreme Court, and the Legislature a comprehensive report on its efforts to implement evidence-based practices.

I am submitting this report to fulfill the above requirements.

Sincerely,

Alyssa L. Bish

Alyssa Bish, Ph.D. Director, Division of Children and Family Services

Attachment



Division of Children and Family Services: Office of Juvenile Services

Juvenile Evidence Based Practice Report

December 2024

Neb. Rev. Stat. § 43-407

Juvenile Evidence Based Practice Report

Percentage of Juveniles Supervised with Evidence-Based Practices

Currently, all youth (100%) at the YRTCs in Kearney, Hastings, and Lincoln participate in evidencedbased treatment and programming.

All staff (100%) at the YRTC-Kearney, YRTC-Hastings, and YRTC-Lincoln facilities receive training in Motivational Interviewing (MI), an evidence-based clinical approach used to help youth move forward through the change process. Additionally, all staff receive internal training on the impact of trauma on brain development and related behaviors, and de-escalation strategies so that physical interventions can be prevented.

Percentage of State Funds Expended on Evidence-Based Practices

The YRTCs collectively spent \$33,601 on training costs, materials, and supplies for evidence-based programming in FY2024. This is negligible amount of the Department's \$1.9 billion state General Fund appropriation for FY2024 and is less that 0.50% of the Office of Juvenile Justice's annual General Funds operations budget. This includes training costs, materials, and supplies. The amount spent this fiscal year on evidence-based programming is slightly higher than in recent years due to new programs, ongoing costs, and the need for additional training facilitators.

Evidence-Based Programs and Practices

YRTC-Kearney has a total of six Licensed Mental Health Practitioners who provide substance abuse, mental health, and family therapy services to youth on campus. The YRTC-Kearney also has a Mental Health Supervisor while YRTC-Hastings employs one full-time Mental Health Practitioner and YRTC-Lincoln employs two Mental Health Practitioners. Additionally, the OJS system continues to employ a Clinical Program Director to oversee the mental health and programming services offered at all three YRTC facilities. In 2024, a Clinical Psychologist has been hired to fill a vacancy left in January of 2023. The Psychologist provides psychological testing as needed for youth at any of the YRTC facilities, and assists with group, individual, and family therapy at the YRTC-Hastings campus.

Community Reinforcement Approach (A-CRA)

YRTC-Kearney has continued to utilize the Adolescent Community Reinforcement Approach (A-CRA), an evidence-based treatment approach with positive research findings, which works within the framework and structure of the facility. All licensed Mental Health Practitioners at the YRTC-Kearney are trained in the A-CRA model, with one of the practitioners serving as a trainer in the model.

A-CRA is a skills-based approach to treating substance use disorders by increasing family, social, and educational reinforcements that support recovery from substance abuse. A-CRA involves three types of

sessions including individual sessions with the youth, individual sessions with the parent or caregiver, and joint sessions with the youth and caregiver. A-CRA has been implemented in more than 470 organizations across the US and several other countries. The U.S. Office of Juvenile Justice and Delinquency Prevention (OJJDP) evaluated the research on this program, giving it an evidence-based program rating of "promising". In addition, the California Evidence-Based Clearinghouse (CEBC) for Child Welfare rated A-CRA as a "2", indicating this program is supported by research evidence.

Aggression Replacement Training (ART)

The YRTC-Kearney continues to implement Aggression Replacement Training (ART), which has been shown to reduce recidivism in the adolescent population. ART is a 10-week cognitive behavioral treatment protocol that addresses three interrelated components: Social Skills Training, Anger Control Training, and Moral Reasoning. Each component focuses on a specific prosocial behavioral strategy that is learned through repetitive exposure to the material. OJJDP evaluated the research on this program, giving it an evidence-based program rating of "promising". In addition, CEBC rated ART as a "3", indicating this program shows promising research evidence.

Applied Behavioral Analysis (ABA)

The YRTC-Lincoln utilizes Applied Behavioral Analysis (ABA) programming, which includes the evaluation of the youth by a Behavioral Support Specialist (BSS) who develops an individualized Behavioral Support Plan based on the youth's identified strengths and areas of need. Youth are provided hourly feedback and ratings on the goals related to their individual target behaviors.

Trauma Affect Regulation Guide for Education and Therapy (TARGET[®])

YRTC-Lincoln and YRTC-Hastings programs have implemented the Trauma Affect Regulation Guide for Education and Therapy (TARGET[®]) model for intensive behavioral modification programming at YRTC-Lincoln. The TARGET[®] model is endorsed by the OJJDP. TARGET[®] is a psychosocial intervention that provides education about the impact of complex traumatic stress on the brain's stress response system and strengths-based practical skills for resetting the trauma-related alarms/survival reactions that occur in complex PTSD. OJJDP evaluated the research on this program, giving it an evidence-based program rating of "effective". In addition, the CEBC rated TARGET[®] as a "3", indicating this program shows promising research evidence.

Moral Reconation Therapy (MRT)

Moral Reconation Therapy (MRT) is an additional treatment component incorporated into the YRTC-Kearney, YRTC-Hastings, and YRTC-Lincoln programming. MRT is a Cognitive Behavioral Therapy (CBT) program designed to address antisocial behavior in adolescents in residential programs, with an overarching goal to reduce recidivism and increase prosocial behaviors.

Voices: A Program of Self-Discovery and Empowerment for Girls

Staff at YRTC-Hastings have all been trained in the Voices: A Program of Self-Discovery and Empowerment for Girls (Voices), which is a female gender-specific curriculum. Voices is based on the realities of girls' lives and the principles of gender responsivity; it is grounded in theory, research, and

clinical experience. This program advocates a strengths-based approach and uses a variety of therapeutic approaches, including psychoeducational, cognitive-behavioral, mindfulness, body-oriented, and expressive arts. All activities are designed to be "trauma-sensitive." The Voices participant's journal utilizes an evidence-based process called Interactive Journaling[®]. Interactive Journaling[®] incorporates both Motivational Interviewing (MI) and CBT prompts to support behavioral change. CEBC rates MI and CBT as a "1", indicating it is well-supported by research evidence.

Love Notes

The YRTC-Lincoln facility has also initiated a curriculum called Love Notes into their clinical programming. Love Notes is an evidence-based program that focuses on healthy relationships. The main goal of the program is to establish healthy relationship boundaries and to prevent unplanned pregnancy by providing teens with information to make wise relationship choices. This program teaches skills to be used in all types of relationships, paying particular attention to romantic relationships. Love Notes programming is delivered through group discussion, PowerPoints, workbooks, exercises, role-play, and creative activities within 13 sessions. Love Notes groups are facilitated by clinical staff members who have received special training on this curriculum. The CEBC rates Love Notes at a "3" indicating this program shows promising research evidence.

Power Source

Power Source is a new curriculum implemented at the YRTCs in 2024, a select group of staff and clinicians completed a full training with the Lion Heart Foundation (the developers of Power Source) to learn about group and individual applications of this new intervention. Power Source is traditionally a group-based CBT and mindfulness training intervention that targets male youth, ages 16-18 in high-security correctional settings or those with high acuity/high-risk behaviors. Power Source blends problem-solving and change components of CBT with the attentional and response modification elements of Mindfulness Training (MT). By combining CBT and MT, Power Source was designed to assist in modulating physiological responses to stressful and risky situations, to encourage prosocial behavioral responses. There are 15 modules, with two to three groups per module. The OJJDP Model Program Guide rates Power Source as "promising".

Evidence-Based Assessment Tools

During this fiscal year, the YRTCs have continued to use evidence-based assessment tools to measure an individual youth's progress and overall program efficacy. Currently being utilized is the University of Rhode Island Change Assessment Scale (URICA), a well-established evidence-based tool used to measure the Stage of Change, indicating a youth's readiness to make behavior change. This assessment is most often used to assess substance use treatment readiness. Peer-reviewed research articles indicate the validity of this instrument in measuring what it is intended to measure.

During intake of youth at the YRTCs, trained mental health professionals complete diagnostic assessments to evaluate for co-occurring substance use and mental health issues. Youth also receive both an interview-based assessment such as the Practical Adolescent Dual Diagnosis Interview-5 (PADDI-5), and a substance use screening such as the Adolescent Substance Abuse Subtle Screening Inventory-A3 (SASSI-A3) at a minimum. Additional individualized assessments may also be used as

needed to assess the individual treatment needs of youth with various concerns, such as Attention Deficit Hyperactivity Disorder (ADHD) using the Vanderbilt ADHD Diagnostic Rating Scale (VADRS) or the Conners' Adult ADHD Rating Scale (Conners) assessments, or youth who have problematic sexualized behaviors by using the Estimate of Risk of Adolescent Sexual Offense Recidivism (ERASOR) tool or the Protective + Risk Observations For Eliminating Sexual Offense Recidivism (PROFESOR) tool.

The Inventory of Callous/Unemotional Traits (ICU) has also been used since late 2016 to assess the personality trait of callousness and to measure changes in personality construct over time. It is readministered periodically throughout a youth's stay at the facility. Although this instrument remains in the developmental stages and is not yet published with normative data, it is used with permission from the test developer, and thus far has provided the YRTCs with a moderately reliable indicator of internal changes taking place with the youth.

The Home and Community Social Behavior Scales (HCSBS) is an objective screening and assessment tool that is designed as a rating scale to be completed by caregivers. It simultaneously provides a reliable and valid measure of both social competence and antisocial behavior. It is utilized on the front end of treatment to get baseline measurements of both social skills and antisocial behavior and will also be utilized toward the end of treatment to measure changes in social competence and antisocial behavior.

The YRTCs continue to utilize the evidence-based Youth Level of Service/Case Management Inventory (YLS/CMI) as the assessment tool that drives the development of treatment goals and objectives. The YLS/CMI is a risk/needs assessment that was designed as a tool to help identify treatment needs and aid in case planning. It can also be used as a measure of progress as it can be re-administered toward the end of a youth's treatment to determine if risk/need levels have improved. This is the same assessment tool that is used by Juvenile Probation across the state.

Recommendations for Collaboration

DHHS Human Resources and Talent Acquisition teams, along with the YRTC facilities, have partnered to create a paid internship program for clinical students working toward licensure as Mental Health Practitioners (LMHPs). Both talent acquisition staff and clinical staff from the YRTCs work to establish and maintain relationships with educational institutions offering graduate-level counseling and social work degrees to secure student interns. This program encourages college students enrolled in the Behavioral Health field to apply for a paid internship through DHHS and ultimately helps the YRTCs recruit quality candidates.

YRTC clinical and administrative staff continue to consult with curriculum developers for the evidencebased programs utilized in the facilities to ensure they are executed with fidelity.

Due to the YRTC's strong community partnerships, there are no additional recommendations for collaboration.