

Evidence-Based Practices

QUARTERLY NEWSLETTER

VOLUME IV — ISSUE II — DECEMBER 2015

JUVENILE DIVISION NOW CERTIFIED IN EBP

Kyle Smith, DPO Senior

On July 1, 2015, the juvenile division celebrated their achievement of becoming an EBP Certified Court by receiving official certification; which is displayed in each office. Mohave County Juvenile Probation was recognized by the Administrative Office of the Courts for establishing policies and procedures consistent with the Arizona Code of Judicial Administration evidence based codes. In recent months, the Juvenile EBP Committee (Kyle Smith, Melanie Longi, Nancy Tharpe, Emily Snay, and Patty Zirkle) worked diligently on a couple projects. Our first project involved creating a new probation department advertisement poster; which incorporates the department's mission, vision, programs and philosophies currently implemented within the county. The second project included the committee, along with other individuals, working together to standardize the uniform conditions for our department to ensure they were aligned with EBP and conducive to best practices. Other endeavors comprised of developing a graduated sanctions matrix and developing a juvenile justice timeline, both of which are located on the court web. The juvenile divi-

sion was trained in the Kids at Hope philosophy and select staff from Intake, Supervision, and Detention completed the Master Training. As a result, the Kids at Hope philosophy is now being implemented within the diversion program, the writing of Dispositional Reports, Case plans, and within Detention and Detention Education Facility. In 2016, Emily and Nancy will be training new juvenile officers on EBP and providing a re-fresher course to certified officers.

INCREASING POSITIVE REINFORCEMENT

Ed Prell, DPO Senior

When learning new skills and making behavioral changes, individuals respond better and maintain learned behaviors for longer periods of time when approached with positive reinforcement. Sustained positive behavioral change reaches an optimal effectiveness when an individual receives four positive to one negative reinforcements. Some examples of positive reinforcement are reporting less often, decrease in community restitution service, travel permits and early discharge from probation.

Positive reinforcement should not be done at the expense of or interfere with the administration of swift, certain, and real responses for negative and unacceptable behavior. Offenders may initially overreact to new demands for accountability, seek to evade detection or consequences, and fail to recognize any personal responsibility. However, with exposure to clear rules that are consistently and swiftly enforced with positive reinforcements and appropriate and graduated consequences when needed, offenders will tend to comply in the direction of the most rewards and least punishment.

Remember to use your EPICS— particularly the Effective Reinforcement tool.

ITS POLICY

Ed Prell, DPO Senior

RNR & CASE PLANS

Risk, Needs, Responsivity (RNR), is a fundamental of evidence based practices and proper offender supervision, beginning with the Offender Screening Tool (OST), and concluding with a Case Plan. Case Plans are just that, a plan to *“develop and implement supervision strategies that are matched by standardized assessment results and criminogenic factors with the probationer’s risks, needs and strengths that promote supervision goals and to provide effective supervision that is individualized, proportional and purposeful”*. In other words, if an officer has no case plan, then they have no effective supervision strategy for the offender.

Special points of interest:

- > Juvenile EBP established
- > Sober living analysis
- > Tips for positive reinforcement and R-N-R
- > [Newsletter Archive](#)

Case Study of Sober Living timeframes

Lavonne Marzett, DPO I

Sober living houses (SLHs) are alcohol and drug-free living environments for people attempting to abstain from alcohol and other drugs. SLHs do not offer formal treatment and are not 24-hour staffed facilities. Instead, they emphasize social model recovery principals, such as 12-Step recovery groups and peer support for maintaining sobriety. Such recovery philosophy have been validated by studies that show residents who have higher involvement in 12-Step groups and social networks supportive of a substance abuse free lifestyle have better outcomes (Polcin et al. 2010).

The National Institute on Drug Abuse recommends a stay of at least 90 days in sober living; however, a longitudinal study tracking outcomes of residents in SLHs showed that residents reduced or stopped their substance use between baseline and six month follow-up and then maintained those improvements at 12 and 18 months (Polcin et al. 2010). Simply put, individuals began exhibiting significant behavioral change at the six month period of residing in sober living which continue after this point.

I compiled information on individuals that resided in sober living over the past year from four caseloads in the Bullhead City Adult office which illustrates the time frame and outcome of its participants. It appears as though, for the most part, individuals that resided in sober living for at least 180 days successfully completed the program. Based on such findings, it is apparent that case planning and appropriate treatment during the first 180 days in sober living is most crucial to a participant’s success; as this time seems to be the “make it or break it” period.

