



PLL Model

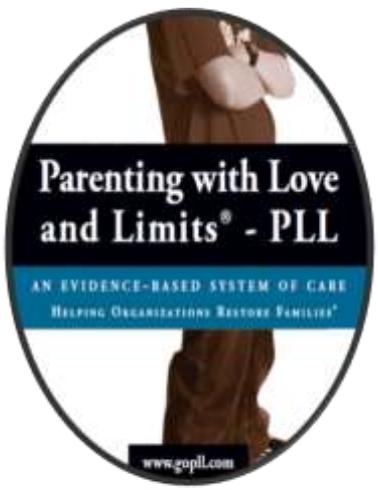


November 6, 2014

Introductions

Rich Berry
*COO of Evidence Based Programs
VisionQuest (VQ)*

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PLL President



JCJC - Learning Objectives

1. Learn how focusing on the individual youth without an equal focus on the family will lead to high relapse rates and the future implications of this continued practice.
2. Learn how Parenting with Love and Limits (PLL) is using a combination of group and family therapy in a brief treatment format that is uniquely different from other models to engage the most resistant parents to achieve 82% graduation rates with or without a court order. Video tapes and research outcomes will illustrate how this is possible.

JCJC - Learning Objectives

3. Learn how PLL uses motivational interviewing tactics, clear boundary setting, and wound work to get the parents quickly engaged.
4. Learn how PLL is creatively being used in other communities to keep at risk youth considered Seriously Emotionally Disturbed (SED) or on probation out of residential treatment and those returning back into the community from residential in home, in school, and out of trouble with the law

Parenting with Love and Limits (PLL)

An Evidence Based model with Limited Relapses through High Parent Involvement

Brief Background – Quick Facts

- ✓ Dr. Scott Sells – Model Developer
- ✓ PLL Begin After Publication in 1998 of **Treating the Tough Adolescent**
- ✓ Second Publication in 2000- **Parenting Your Out of Control Teenager**
- ✓ Structural-Strategic Model- Mobilized Family and Youth Voices
- ✓ Unique Blend of Group, Family, and Trauma Work All in [One Model](#)

Manuals and Workbooks (English and Spanish)



PLL Current Locations



**80.2%
Completion Rate!**

PLL is currently used in 16 states, DC and Europe

(Texas, Idaho, DC, Michigan, New Hampshire, New York, Alaska, Colorado, Rhode Island, Virginia, Maine, Illinois, Delaware, Massachusetts, South Carolina, Pennsylvania, Missouri, & the Netherlands)

PLL is a family-focused evidence-based program that has been recognized as an evidence-based model by:

- ✓ **OJJDP** - Office of Juvenile Justice and Delinquency Prevention – **previously one of only four models in the country** recognized for reentry, and acknowledged with a rating of exemplary (<http://www.ojjdp.gov/mpg/mpgProgramDetails.aspx>);
- ✓ **SAMHSA's** National Registry of Evidence Programs and Practices (<http://nrepp.samhsa.gov/ViewIntervention.aspx?id=45>);
- ✓ **Florida Sourcebook of Delinquency Interventions**, Accepted July 3, 2013 As Evidence Based Practice (will be published in next revision) <http://www.djj.state.fl.us/docs/contracting/dt-itn-trans-app-3-sourcebook.pdf>
- ✓ **Promising Practices Network on Children, Families and Communities** [Promising Practices Network on Children, Families and Communities](http://www.promisingpractices.net/program.asp?programid=218#programinfo) (<http://www.promisingpractices.net/program.asp?programid=218#programinfo>)
- ✓ **Find Youth Info.gov** (<http://www.findyouthinfo.gov/ProgramDetails.aspx?pid=463>)
- ✓ **California Clearinghouse** <http://www.cebc4cw.org/program/parenting-with-love-and-limits/detailed>

Designed for . . .

The Parenting with Love and Limits (*PLL*) model is designed for youth ***placed in out-of-home care or are at risk of out-of-home care*** in the juvenile justice, child welfare, and mental health systems, ages 10 to 18 with extreme emotional or behavioral problems, including running away, extreme disrespect, chronic truancy, depression, drug and alcohol abuse.

PLL can ***Safely*** reduce the length of stay for youth placed in residential care and successfully transition youth to their home and community.

PLL Team

	Alternative To Placement	Commitment (Reentry)
Number of Families Per Team over 12 Months	36	30
Personnel Needed Per Team	1 Master's Level 1 PT Caseworker	1 Master's Level 1 Caseworker
Service Duration	3-4 Months (90-120) Depending on Risk Level of Case	6-9 Months * while in residential = 3-5 months * Aftercare Minimum 3 months
Eligibility Criteria	10-18 yrs old Conduct or DD <i>(Complete list of Inclusionary and Exclusionary Criteria on next slide)</i>	10-18 yrs old Conduct or DD <i>(Complete list of Inclusionary and Exclusionary Criteria on next slide)</i>



Criteria for PLL Referrals



INCLUSIONARY CRITERIA

- Youth's age is 10 to 18 years old
- Exhibiting emotional or behavioral problems, such as depression, anxiety disorders, substance abuse, oppositional defiant disorder, conduct disorder, ADHD, eating disorders, etc.
- **Must have a parent or caregiver present- foster parents and kinship care are welcome**
- Youth having committed a sex offense, as long as the following conditions are met:
 - Referral source must understand that PLL is not the sex offender treatment provider
 - Youth and caregiver must be in the same home

EXCLUSIONARY CRITERIA

- Actively psychotic clients
- Actively homicidal clients
- Actively suicidal clients
- Caregiver or youth with an Intelligence Quotient (IQ) of less than fifty (50)

Referrals are appropriate for ATP or Reentry?

Exceptions to the inclusionary/exclusionary rule must be approved in writing by PLL

Presupposition of PLL

Consequences of An Unchanged Parent

“A review of all available research data show that youth will return to past behavioral problems *if their parents remain unchanged* in the areas of **consistent limit setting, rebuilding emotional attachments, and improved communication.**”

Williams and Chang, p. 159

HOW IS PLL DIFFERENT?

Unique Packaging of PLL. . .

**Group + Family Therapy
Together with Wound
Work**

+
CBAT
(Family Wrap Around)



Participation And Graduation Agreement

Family Engagement KEY Touch Points



- **Motivational Phone Call**
- **Motivational Intake with JPO or Caseworker**
- **CM Services Throughout** (Ecomap, CBAT, Practicing with Family) – *Reentry only*
- **Reminder Calls**
- **Multifamily Group**
- **In Home Family Therapy (Coaching)**
- **Wound Work (Trauma Informed Care)**
- **Relapse Prevention – 30-60-90 Day**

JPO Help Sheet for Making PLL Referrals

Step #1- Probation Officer Determine if Youth Eligible Using Exclusionary Criteria |
Every Youth is eligible for PLL unless they fit one of the following exclusionary criteria:

PLL Inclusionary Criteria- Appropriate Referrals

- Youth's age is 10 to 18 years old
- Exhibiting emotional or behavioral problems, such as depression, anxiety disorders, substance abuse, oppositional defiant disorder, conduct disorder, ADHD, eating disorders, etc.
- **Must have a parent or caregiver present- foster parents and kinship care are welcome**
- Youth having committed a sex offense, as long as the following conditions are met:
 - Referral source must understand that PLL is not the sex offender treatment provider
 - Youth and caregiver must be in the same home

Step #2- Probation Officers State the Following Information to the Family:

- Hand out **A Plan Designed To Help** document, at interview and State the Following:
"Someone from a program called Parenting with Love and Limits or PLL for short will be contacting you next week to set up a time to meet with you in the office to go over an exciting program that is the first of its kind in the entire state of Colorado.

As you can see from the document is you have in your hand, if you decide to participate there are three advantages to you and your family:

- #1 **Gain Increased Chances for Getting Out of Probation, or Supervision, Faster.** - This means that if certain goals are met with your participation, your child may be eligible to complete treatment and be taken off supervision sooner. There are no guarantees but the odds will dramatically increase your participation in this program. Tell the families "this program is short-term and instead of spending 6 months or a year trying to solve the problems, PLL will help you to fix the problems in 3 to 4 months."
- #2 **Decreased Chances of Future Relapses.** - PLL is designed to address all of the behaviors that brought your child into the Juvenile Justice System and to make sure they never happen again. We are sure you never want to go through the court process again.
- #3 **No Cost and One Stop Services.** - If you are eligible after being screened, the program and the materials may be no cost to you. PLL is at no cost to you and may be the only program required.

There are **only 36 slots available** in our area for this program so we hope that you will be interested in at least hearing more."

If yes, then inform the family that a formal referral will be made and someone from PLL will be contacting them very soon.



MI Telephone Call



Motivational Interviewing Phone Call Script

- Question #1 “What are some of the difficult experiences that you have had to suffer in the last year as the result of these problems?” *[Estimated time of completion = 5 min]*
- Question #2 “When I get to know you better what qualities and strengths would I come to admire about you as a (person, parent, spouse, etc.)?” *[Estimated time of completion = 3-5 min].*
- Question #3 “What do you think will happen to _____ (your teen, child, marriage, or you personally) if the problems you described earlier remain unfixed in the next three months, six month, or even year from now?” *[Estimated time = 3-5 min].*
- Question #4 “Have you have seen a counselor for any of these problems before?” If “yes”: “What have other counselors missed with you? The reason I ask is that I don’t want to make the same mistakes twice.” *[Estimated time of completion = 2-3 min].*
- Question #5 “Do you want to fix the problem or problems you listed _____ (list them) fast, medium, or slow speed” *[Estimated time = 1 min].*

Motivational Interview Points

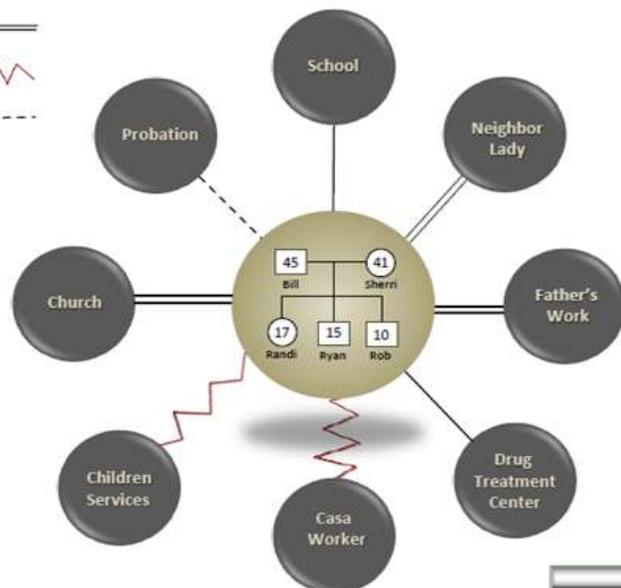
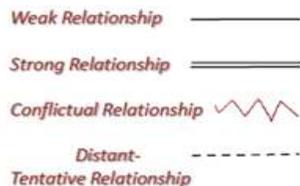
1. Into to Ideal MI Interview
2. **Look for Strengths in Parent (Bridging the Gap)**
3. JPO and Strengths in the youth
4. Locate Stressors
5. Overview of the program (Expectations)
6. **Bridging the gap between Stress and PLL**
 - (Family brought up Disrespect)
7. Exhibit A : Workbooks – Top buttons being pushed
8. **Setting clear boundaries (Include Prob. Sanctions)**
9. Clear Beginning, Middle and End at Treatment
10. ***Paradox*** – Harder boundaries – Tougher Requirements = Family wants to participate
11. Synchronizing with Probation

Family Engagement KEY Touch Points



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- Relapse Prevention – 30-60-90 Day

Ecomap



6 Stages of Readiness for Change

Precontemplation

- Do not see that they are part of problem/solution
- Feel situation is hopeless
- No intention of changing
- Want others to change
- Others see problem they cannot
- Minimize or rationalize

Action

- Person or family tries to change or stop problem
- Person or family tries to change environment
- Overlooks possible relapses
- If relapse or change fails recycles back to one of three earlier stages

Contemplation

- Acknowledge problem and their part in it
- Not ready for change yet
- Stalling – "analysis paralysis"
- Wait for magic sign
- Focus is only on problem

Maintenance

- Consolidate gains
- Relapse prevention-troubleshooting
- Potential to recycle is initially high
- Communicate that relapse is normal
- Goal: Spread moments of relapse further apart

Preparation

- Contracting and troubleshooting
- Ambivalent need final reassurances
- Dry Run Role Plays
- Make final adjustments

Termination

- Anticipatory guidance
- Letting go of "old self"
- Back-up plan
- When to use tune-ups
- Line up support systems and secure co-therapist

Prochaska, J.O., Norcross, J.C., & DiClemente, C.C. (1994).
 Changing for Good. New York: Avon Books.



Parenting with Love and Limits®

PARTICIPATION AND GRADUATION AGREEMENT

In order to participate in and graduate from the Parenting with Love and Limits (PLL) program, I understand and agree to follow these requirements:

Week	PLL Group	PLL Individual Coaching
Week #1	Group 1 – Venting	No coaching 1 st week
Week #2	Group 2 – Button Pushing + →	Coaching #1: Winning the Battle for Structure and putting all the protective factors on the radar screen
Week #3	Group 3 – Contracting + →	Coaching #2: Identifying Undercurrents, Feedback Loops and beginning to develop first Contract and if applicable, Aftercare Plan
Week #4	Group 4- Putting the Contract Together As a Group + →	Coaching #3: Continuing to draft written plans
Week #5	Group 5 – Creative Consequences (to stop disrespect, school problems, drug use, violence, not doing chores, running away etc.) + →	Coaching #4: Developing Countermeasures around written plans
Week #6	Group 6- How to Start Liking Each Other Again-Restore Closeness	Coaching #5: Further development of needed Countermeasures and intensive dress rehearsals
Week #7	No Group	Coaching #6: Assessment of written plans and changes made as needed
Week #8 +	No Group	Coaching #7: and on...continuing coaching until the following benchmarks are met: • For youth returning to the community – Finalize Aftercare Plan and insure CBAT Plan is ready to implement • Additional Coaching to troubleshoot unmet benchmarks (see below) and/or work on additional symptoms or seeds (i.e. unhealed wounds) • Develop Relapse Prevention Plan • Make 30/60/90 day callbacks and conduct tune up sessions as needed.

Key Benchmarks

- Attend 5 out of 6 group meetings with the exception of the 1st group.
- Attend the minimum required individual (family) coaching sessions and continue in coaching until the following benchmarks are met: Minimum # of family sessions required 8 to Graduate PLL.
 - In Home- Obeying Curfew and No Leaving Home - Without Permission
 - In School- Attend school and no ditching, and achieve passing grades
 - Out of Trouble With the Law (No further violations)
 - If applicable, remain Drug Free
 - Following the PLL Written Plan 80% or greater as Reported by Parents
 - Show evidence of participation in extracurricular activities, working, or doing community service, as well as meeting all court requirements (i.e. paying restitution, etc.)

Parent/Guardian's Signature _____
Youth Signature _____
Therapist Signature _____
Date _____

A Key Point to Ponder...

Presentation/Session	Ability to Recall	
	After 3 Hours	After 3 Days
Spoken Lecture	25%	10-20%
Written (reading)	72%	10%
Visual and Verbal (Illustrated Lecture)	80%	65%
Participatory (role plays, case studies, practice)	90%	70%

**“What I hear, I forget;
What I see, I remember;
What I do, I understand.”**

Old Chinese proverb, sometimes attributed to Confucius

Training Components	Skills Attained	Transfer to Job
Theory +	10-20%	5-10%
Demonstration +	30-35%	5-10%
Practice +	60-70%	5-10%
Feedback +	70-80%	10-20%
Coaching	80-90%	80-90%

Dale E. 1969. Cone of experience, in *Educational Media: Theory into Practice*. Wiman RV (ed). Charles Merrill: Columbus, Ohio
Joyce B and B Showers. 1981. Transfer of training: the contributions of coaching. *Journal of Education* 163(2): 163–172.

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TOP 7



WHY KIDS MISBEHAVE

REASONS WHY TOUGH TEENS MISBEHAVE

- Reason #1:** Button Pushing
- Reason #2:** Unclear Rules/Rules Not Mandatory
- Reason #3:** Misuse of Outside Forces
- Reason #4:** Teenagers are Drunk with Power
- Reason #5:** The Pleasure Principle
- Reason #6:** Thinking Two Steps Ahead
- Reason #7:** Peer Power

Father Video

7 Aces That Can Cause Parent Abuse

WHY KIDS MISBEHAVE

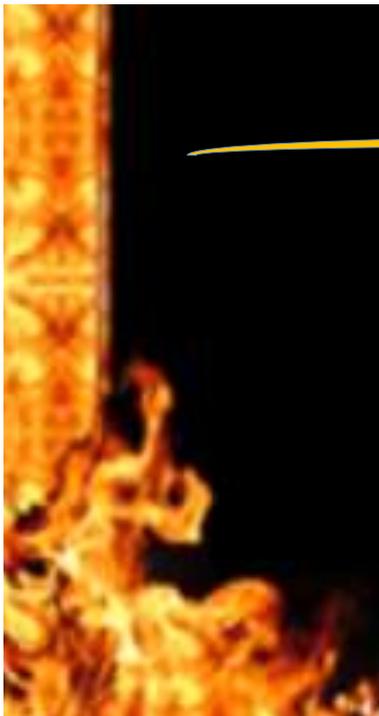


- Ace #1:** Disrespect
- Ace #2:** Truancy/Poor School Performance
- Ace #3:** Running Away
- Ace #4:** Teen Pregnancy
- Ace #5:** Drug or Alcohol Abuse
- Ace #6:** Threats/Acts of Violence
- Ace #7:** Threats of Suicide



Top 10 Parent **HOT** Buttons

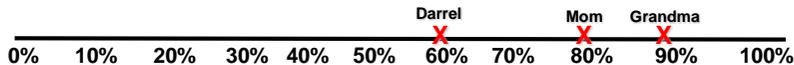
- 1) "You never let me do anything!"
- 2) "You don't love me."
- 3) "I hate you/this family!"
- 4) Swearing
- 5) "You're not my real Mother/Father. I don't have to listen to you."
- 6) A disgusted look, improper gesture or whiny voice
- 7) "I'm gonna kill/hurt you/myself/others."
- 8) Lying
- 9) "I hate school; I'm not going!"
- 10) "I'm going to leave or run away."



Top 8 Teen **HOT** Buttons

- 1) Preaching or nagging
- 2) Talking in chapters
- 3) Labeling
- 4) Futurizing
- 5) Instant problem-solving
- 6) You get moody sometimes
- 7) Not letting you experiment
- 8) Collecting criticisms

Family Stress Chart



Mom's Top Three Stressors

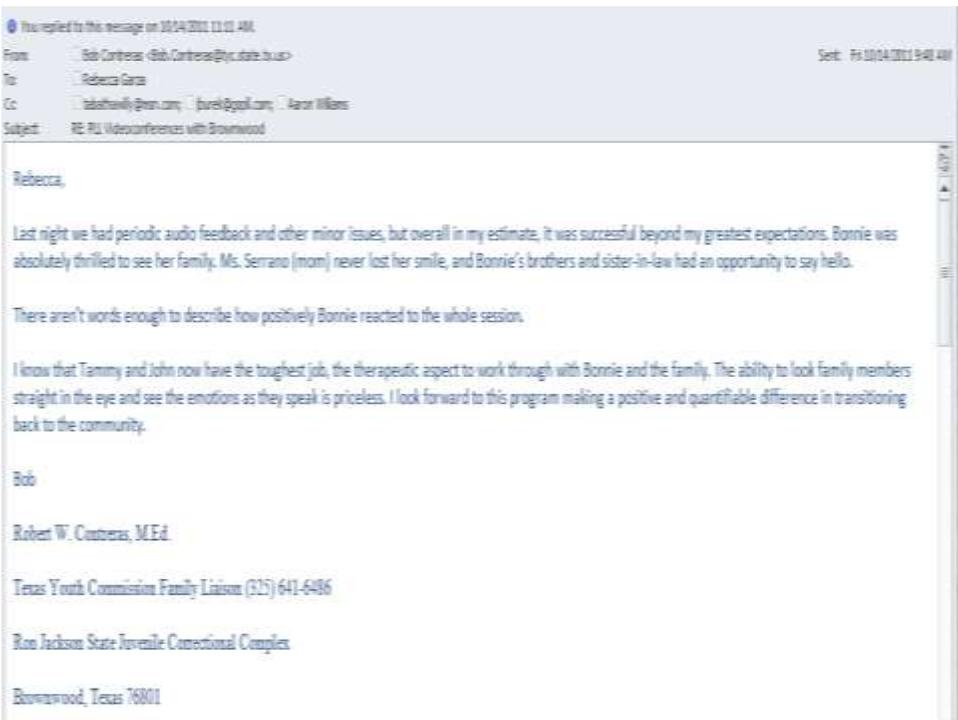
- #1 *Leaving home without permission and Coming home late (Curfew)* **70%↓**
- #2 *"Arguing with Grandma" (Disrespect)* **80%↓**
- #3 *"Smoking Pot" (Drug Use)* **80%↓**

Grandma's "Hypothetical" Top Three Stressors

- #1 *"Coming in late" (Curfew)* **80%↓**
- #2 *"Talking Back" (Disrespect)* **70%↓**
- #3 *"Sibling Fighting"* **40%↓**
- #4 *"Chores"* **90%↓**

Darel's Top Three Stressors

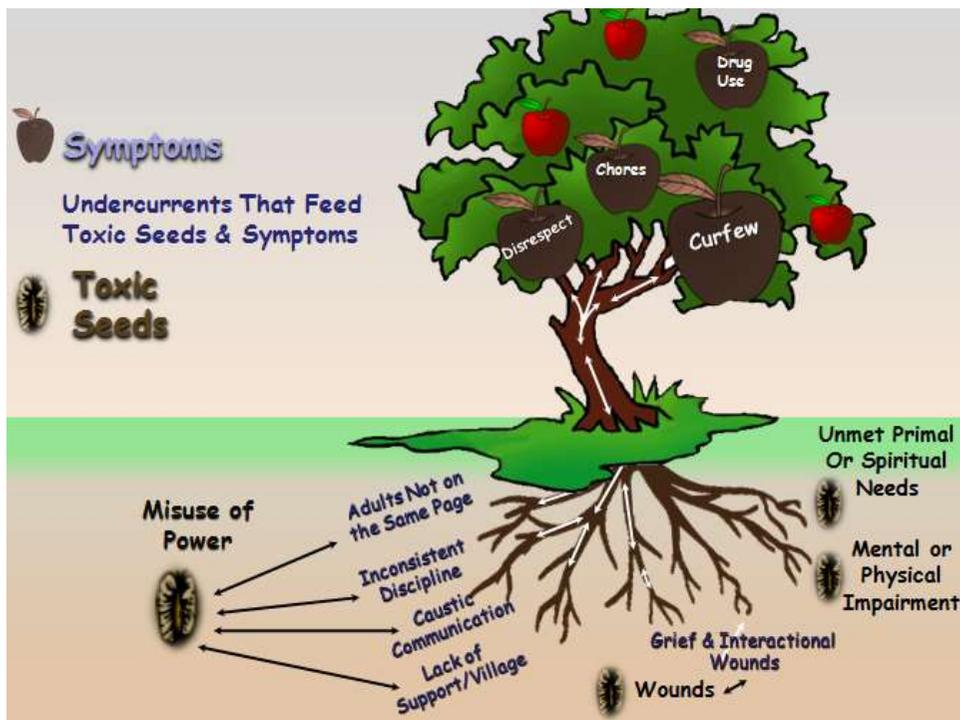
- #1 *"Coming home late and the ensuing argument" (Curfew)* **40%↓**
- #2 *"School -Suspensions and Poor Grades" (Grades)* **60%↓**



Family Engagement KEY Touch Points



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Summary of Major PLL Model Aspects

- ✓ Group + Family Therapy Together
Why Important: **Reduce Isolation**, Fill in Missing Skills, and **Quickly Reduce Parent Resistance**. Majority of juveniles from single parent homes
- ✓ Motivational Interviewing Manualized
- ✓ Group & Family Therapy Manualized
- ✓ Family Trauma Manualized Curriculum
- ✓ Spanish Curriculum & Workbooks
- ✓ Case Management - Community Based Action Team (CBAT)
- ✓ 5 Day *onsite* Training
- ✓ Staff Specifically Dedicated for Implementation (Director of Implementation)
- ✓ Use of Video Technology for Coaching That Removes Distance as a Barrier
- ✓ Fidelity Dashboard
- ✓ Monographs and Research Reports Included
- ✓ **Video Tape Supervision** to Ensure High Quality Assurance



Data and Results Driven



Dashboard

How this can change the face of
mental health delivery as we
currently know it?

Retool the provider to be outcome
driven through user friendly model





Data and Results Driven



Predictive Analytics

(aka “structured decision making”)

The ability to transform the therapist, the family, the supervisor, and the stakeholder to work smarter by replacing clinical guesswork with science and outcomes, reduce costs with a clear gauge of risk and uncertainty, and to add consistency and clarity to clinical decisions.[1]

[1] <http://www.fico.com/en/Communities/PredictiveAnalytics/Pages/how-can-predictive-analytics-help-me.aspx>





Child Behavior Checklist (CBCL) Results for: (Client Name)

Clinician: Caregiver: Pre-Test Date: Post-Test Date:

Purpose

PLI is a Model Designed to Reduce Severe Emotional and Behavioral Problems in Youth

- The Child Behavior Checklist (CBCL) is a validated, standardized assessment instrument that measures changes in emotional or behavioral problems of children as reported by parent/caregiver.

Administration of Scale

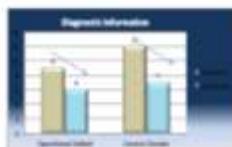
- The scale is administered two times: Before PLL begins and after PLL Graduation.
- Results are divided between Emotional Problems (such as depression, anxiety, or somat) and Behavioral Problems (such as aggression, rule-breaking, etc.) that have no medical explanation and Behavioral Problems such as aggression and rule-breaking.



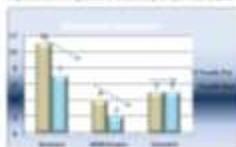
Outcomes

- If PLI is successful, the youth shows a decline from pre-test to post-test of two or more points.
- This drop means that the parent/caregiver views a significant positive change in their child's emotional and/or behavioral problems as a result of the PLL treatment model.

Subscales of specific changes in emotional & behavioral problems are presented below:



Oppositional Defiant and Conduct Disorder are prolonged patterns of antisocial behaviors such as serious violation of laws, social norms, and rules.



Emotional Problems consists of severe anxiety, withdrawal problems like depression, or physical problems like migraines.



Behavioral Problems: Aggression or violence or chronic rule-breaking behaviors associated with Conduct or ODD Disorder.

Dashboard



Readiness Scale Results For Alternative to Placement: Johnny Depp

Clinician: Ellen Souder Caregiver: Step-Parent Family Relation to Youth: Other Pre-Test Date: 5/3/2011 Mid-Test Date:

Readiness Scale

Purpose

The PLL model is designed to lower both parent and youth resistance to treatment.

- Parents and youth typically start treatment unmotivated to change or to take responsibility for the problem.
- If PLL is successful, the parent, youth, or both move through each stage of readiness to change.

Administration of Scale

- For Alternative to Placement youth and parents this scale is administered twice: before PLL begins and after PLL Graduation

Outcomes

- A high Pre-contemplation score on the pre-test followed by a lower score on the post-test is positive and indicates that the parent and/or youth are moving into contemplation.
- If a parent or youth scores low in Contemplation, Action, and/or Maintenance on the pre-test, but higher on the post-test, this indicates the parent or youth is progressing through the 3 stages of Change and is motivated to maintain those changes.

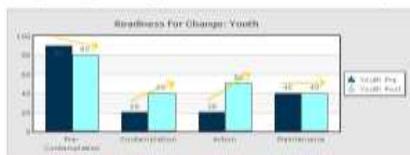
Stage of Change Definitions

Pre-Contemplation: Parent or youth does not see they are part of the problem and have no intention of changing.

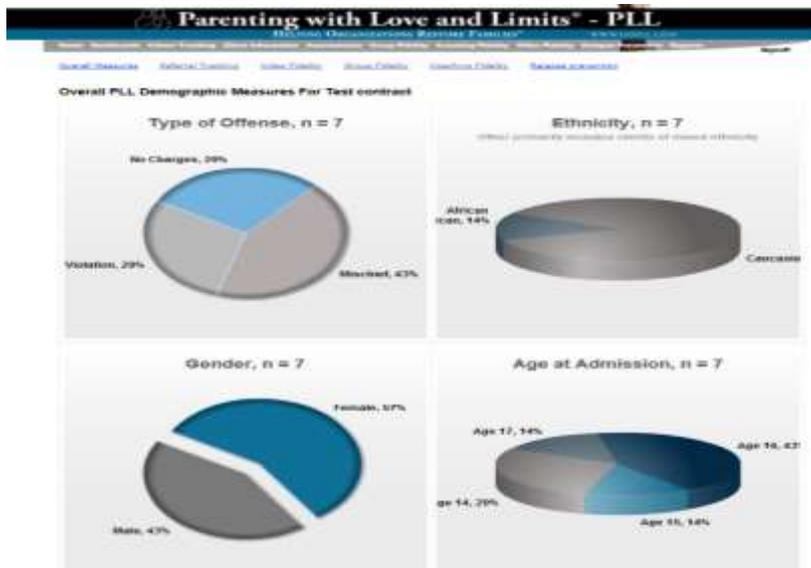
Contemplation: Parent or youth has awareness that a problem exists but no commitment to take action towards change.

Action: The parent or youth now wants change and initiates actions that may lead to change (i.e., seek help, follow the treatment plan).

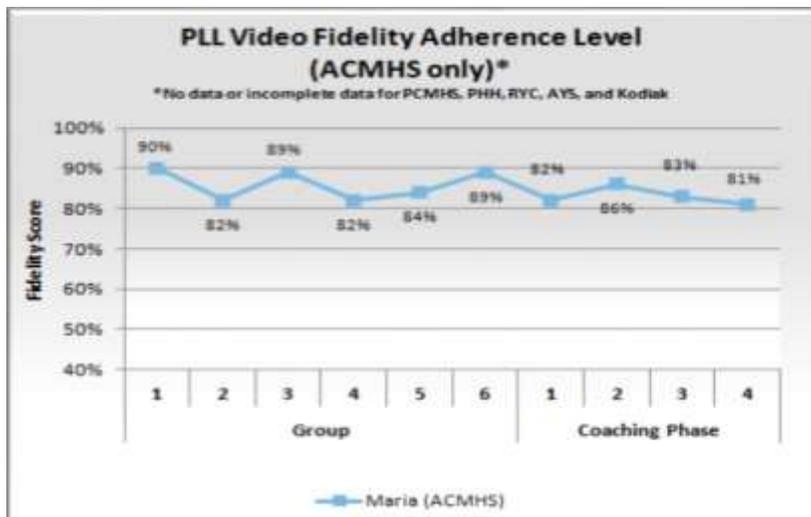
Maintenance: The final stage at which the parent and youth work to prevent relapse and consolidate gains attained during the action stage.



Dashboard



Fidelity Dashboard



Implementation & Sustainability

“Recent studies report that it can take up to 3 years for a service provider to successfully transport and implement an evidence-based model”

(source: Global Implementation Conference proceeding, August 15-17th, 2011 Washington, DC)

“A large body of research shows that systematic attempts to successfully implement evidence-based practices at the community level have faced numerous challenges and few community organizations are using research-based practices as intended” (Rohrbach, 2006; Kazdin, 2003)

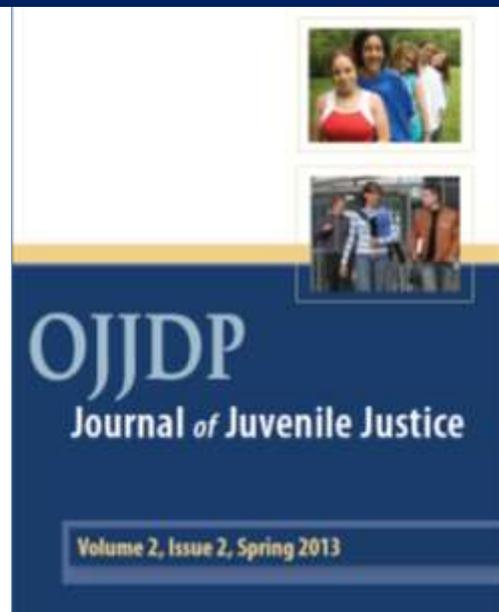
To dramatically shorten implementation time to the goal of 1.5 years (not 3 years), PLL has a point person specifically dedicated to the transportability of PLL with the service provider.

PLL Has An 86% Client Retention Rate Since

We are in this together!



Research and Outcomes



A Brief Summary of Recent OJJDP Journal of Juvenile Justice Article

A study on the PLL Reentry Program was published in *The Journal of Juvenile Justice*, Volume 2, Issue 2, Spring of 2013 as the feature article, titled, "Family-Focused Juvenile Reentry Services: A Quasi-Experimental Design Evaluation of Recidivism Outcomes." The results of the study include:

- Reduced recidivism for re-arrests, readjudications, and recommitments
- Effective treatment delivered in a significantly shorter length of service (71 days difference, see below); and
- 81% of youth and their families successfully completed the program.

Recidivism	PLL Reentry Study	Matched Standard Reentry
<i>Re-arrest rate</i>	28.2%	34.7%
<i>Felony arrest rate</i>	15.3%	23.4%
<i>Readjudication rate</i>	16.9%	25.8%
<i>Felony adjudication rate</i>	6.5%	12.9%
<i>Recommitment rates</i>	13.7%	20.2%
Length of Service	PLL Reentry Study	Matched Standard Reentry
<i>Average length of service (days)</i>	363.7*	434.9

A Point to Ponder. . .

Are Shortening Lengths of Stay Possible?

Current research demonstrates that after 6 months in residential, there is both a high risk of institutionalization and rapid diminishing returns. Shorter lengths of stay are not only possible with the right delivery system, but necessary to reduce high rates of relapses.

Answer . . . YES!

Frequent family visits and participation in family therapy is associated with successful outcomes at discharge.

Improvements such as the reduction of at-risk behaviors during the first six months of residential care suggest that a shorter length of stay correspond to treatment gains and potentially provides more bed availability [underline added]” (p. 560)

Source: Outcomes for Children and Adolescents After Residential Treatment: A Review of Research from 1993 to 2003 Heather J. Hair, M.Sc. *Journal of Child and Family Studies, Vol. 14, No. 4, December 2005 pp. 551–575*

Also, Compare the Annie E. Casey Foundation issue on “No Place for Kids” The Case for Reducing Juvenile Incarceration”

PLL Proven Outcomes: Champaign County – March 2013

Alternative
To
Placement



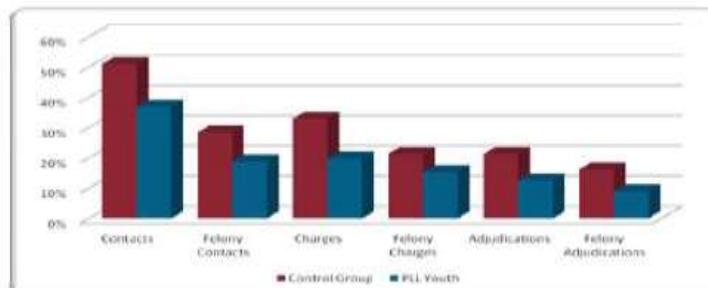
PLL Youth

- ❖ Average Age at First Offense: 14.8 years old
- ❖ 49.7% Violent Offenders
- ❖ 50.3% Charged with a Felony
- ❖ 74.2% Male
- ❖ 69.7% African American

Parenting with Love and Limits (PLL) is an evidence-based, family-focused alternative to placement and reentry program that aims to engage parents, improve youth behavior, and reduce both recidivism and the length of time a youth is in detention or residential placement.

In Champaign County, Illinois, PLL serves primarily as an Alternative to Placement (ATP) treatment program and also as a Transition/Linkage program for youth transitioning from the Juvenile Detention Center to the community. Research conducted by **Hornby Zeller Associates, Inc. (HZA)** showed

- ❖ 72% of all PLL families completed the program voluntarily;
- ❖ Youth behavioral and mental issues improved significantly ($p < 0.001$ in most cases) as measured using the Child Behavior Checklist;
- ❖ Family functioning improved significantly as measured using the Family Adaptability and Cohesion Effectiveness Scale IV ($p_{adjust} < 0.05$, $p_{t-test} < 0.01$);
- ❖ The recidivism rate for PLL youth was significantly lower than the matched control group in multiple measures (adjudications, charges, and contacts; see chart below);
- ❖ Families achieved all of these outcomes during a shorter length of service than the historical averages for both probation (88.7 days vs. 600 days) and community mental health (110.3 days vs. 210 days).



Specific Value Added Propositions PLL Brings to the Table

- ✓ Higher Parent and Family Involvement
- ✓ Data and Results Driven
- ✓ Research and Outcome Targets
- ✓ Quality Assurance
- ✓ Safely Reducing Residential Lengths Of Stay (LOS)
- ✓ Costs Savings Benefit (If Reduced LOS)

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