

# Cognitive Behavioral Specialist Roadmap

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## **Program Implementation Reminders:**

As Cog Specialists, you will act as the facility content expert on all matters involving cognitive behavioral interventions (CBI). It will benefit you to immerse yourself in research and the foundational concepts of CBI. The following information will provide you some guidance in informing your role and still be mindful of the need to use discretion or be creative to meet the end goal of providing evidence based interventions to the offenders at BTT.

## **General Rule to Apply to Program Implementation**

Any program implemented at Boys Totem Town must meet the following minimum criteria before it can be run:

- Program population will have similar level of risk as possible. In essence you want to place offenders with similar risks and needs in classes.
- The program has established criteria for appropriate referral indicators. There should be a prescriptive approach to placement that fits with the identified needs of the offender.
- Continuous Quality Improvement processes will be utilized to assess trainers, facilitators, model fidelity, and documentation. Programs must be open to observation and transparent in practices.
- Programs has developed and employed incentives and sanctions for offender participants. The incentives and sanctions should be based on attendance and established group norms.
- Programs has developed data tracking and reporting that include:
  - Attendance
  - Quality of participation
  - Dosage
  - Termination from group
  - Graduation Recidivism rates of referrals

## **Suggested Format for Program Coordination**

- **Establishing a program coordinator:** Each cog specialist should be assigned to coordinate the referrals, communication, and tracking of a specific group (e.g. Greg does Phoenix, Jaime does T4C, etc.). The specialist assigned will be responsible for all aspects of the group yet there must be collaboration between each specialist to ensure referrals are properly processed as well as prevent dual referrals into separate programs.
- **Clear communication of program scope and capabilities of the program to directors, institution and workers.** Each cog specialist should create a summary or abstract of the program assigned that would detail:

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- Clear definition of program content and criminogenic need is addressed through participation
- Clear referral process (whenever possible; attached to CSTS)
- Length of program(overall), as well as time, days and duration
- Communication of expectations for referring agents
- Communication of expectations for participants (i.e. start date, attendance requirements, rules, etc.)
- Minimum 6 month schedule of course offerings

### **Establishing and Running a New Program:**

Use the following checklist when planning and running a program

- Referrals properly screened for indicators and needs that fit appropriate program
  - Only kids with YLSI scores on file should be accepted
  - If no YLSI recorded, insist the YLSI be done by Worker/Agent
- Communication made to facility on class start and end times
- Meeting with all accepted referrals completed
- Class times clearly set before class begins
- Clear documentation process of participant attendance and participation. Whether through CogLog; Treatment notes; etc each session must be documented. The documentation format should include:
  - Resident name
  - Date of class
  - Content of class
  - Offender topic of skill role played, etc
- Purchasing of materials (i.e. flip charts, markers, charts, etc.)
- Supplies and all required materials available (i.e. manuals, handouts, markers, charts, etc.)
- Establishing data collection points and procedures
- Scheduling of primary facilitators and list of alternates/substitutes
- Protocols in place for CQI that includes facilitator evaluation scheduled
- Protocols in place for data collection (i.e. pre/post tests, participant tracking, etc.)
- Aftercare or follow-up procedures clearly defined

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## **Programs Session Follow Up**

Each session and cycle of a program should include follow up or debriefing that occurs between the facilitators of a session and between the Cog Specialists at the completion of a cycle.

### **Session Follow Up:**

- Facilitators should discuss overall impressions of class.
- Facilitators should process group dynamics and strategize for next session.
- Cog Specialist should engage any offender who had a crisis or inappropriate behavior during the session.
- Cog Specialist should enter session notes in appropriate offender tracking documentation.

### **Program Cycle Follow Up**

- Cog Specialists should meet with Dr Singh to discuss graduating offenders and relay overall impressions of each graduating offender
- Cog Specialists should catalogue all documentation (pre/post test; program evaluations; program testing; etc.) and store each cycle with Dr. Singh for evaluation
- Copies of all documentation should be sent to Administrative Evaluation Unit for tracking

## **Daily Activities**

In addition to the aforementioned duties and activities, you as Cog Specialist should be available as a resource for both your peers and the offenders. Other activities you should engage in include but are not limited to:

- Being a presence in communities to engage offenders and coach staff
- Being a advocate of alternative approaches with your peers
- Challenging and coaching peers who struggle with concrete approaches with offenders
- Reporting information and behaviors (both staff and offenders) that pose a security risk to management
- Skill building with parents to reinforce the skills being taught offenders
- Updating your knowledge and skill with CBI programs and practices
- Modeling effective CBI with offenders for peers
- Being a pro-social model for offenders
- Other