Treatment Outcome Differences Between Youth Offenders From a Rural Joint Commission Accredited Residential Treatment Center and a Rural Non-Accredited Center

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Purpose
The purpose of this study is to determine if accreditation, particularly The Joint Commission (TJC) accreditation, has a likelihood of improving juvenile risk factors that are present upon admission.

The Article
This article is based on an empirical study which looks at the value of accreditation via The Joint Commission (TJC) within a Residential Treatment Center (RTC) setting compared to a non-TJC accreditation treatment center. The authors begin by briefly explaining research that has culminated into and shown the need for this empirical study. The TJC accreditation guidelines supported by RTC services are explained; followed by risk factors that typically appear in youth offenders. The Youth Comprehensive Risk Assessment (YCRA) was the instrument applied by both facilities to evaluate the severity of the six risk factors upon admittance, in order to formulate a treatment plan. The residences re-evaluation would take place at 6-month intervals. Even though the TJC accredited RTC had higher YCRA risk factor scores, in four of the six risk areas at admittance, compared to the non-TJC accredited treatment center; results indicated the TJC accredited RTC had much lower YCRA risk factor scores during posttest evaluation than the non-TJC accredited facility.

What This Means for the Field
Since there are limited empirical studies regarding the value of accreditation, this article proves to be a valuable contribution to research in this area. Given the results from this study favored RTC accreditation by TJC for more positive outcomes than non-TJC accredited facilities, further research, specifically a longitudinal study, would deepen the understanding of long-term positive outcomes using a TJC accreditation facility. It is important to note the treatment of trouble youth takes time; thus the desire to provide the best practices and reach a more favorable outcome begins with the identification of the value of accreditation at treatment facilities.

Citation

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