RESIDENTIAL TREATMENT FACILITY FOR JUVENILE SEX OFFENDERS: EMPLOYEE’S KNOWLEDGE OF POLICIES AND PROCEDURES

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Abstract

of

RESIDENTIAL TREATMENT FACILITY FOR JUVENILE SEX OFFENDERS: EMPLOYEE’S KNOWLEDGE OF POLICIES AND PROCEDURES

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This study explored how knowledgeable employees of a residential treatment facility for male juvenile sex offenders were in the policies and procedures of their agency as well as how well their pre-employment training prepared them for work. This study is a cross-sectional quantitative survey research design, using both a criterion and convenience sampling design with 31 participants. The findings suggest that an overwhelming majority of participants are highly knowledgeable in the policies and procedures. All participants report being satisfied with their pre-employment training despite several open-ended question responses requesting better training. Almost all participants report having not read the employee handbook that is required of them upon employment and state they do not need more time to review the policies and procedures manual. Implications for social work research practice and policy are discussed.
DEDICATION

I would like to dedicate this project to my friend Rachel, my wonderful husband Chris and my brothers Brett, Bryan, and Brendon.

Rachel, I am so thankful to have your friendship. You and I met each other the first day of our MSW journey and have been friends ever since. We have struggled with personal, professional, and school related issues and persevered. I am so excited to watch our friendship grow.

To my brothers, I am proof that you can accomplish anything you set your mind on. I hope that you will continue striving for educational excellence. I love you all and am so proud to be your sister. Looking forward to being a part of each of your graduations in the future!

Chris, thank you so much for the support you have given me. I would never have been able to complete this project without your help. Thank you for putting up with my crazy schedule and often times neurotic behavior the past two years. I am so happy and blessed to be your wife.
I am very appreciative of my husband, family, and friends for their support while I pursued my Master’s degree. Thank you to my mom for providing me with motivation to continue through this process when I needed it most. To my dad, thank you for the support and kind words when I was feeling overwhelmed.

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Chapter 1

THE PROBLEM

Introduction

Earlier this year, this writer was put into a position that millions of residents in the United States are facing: being jobless with no income. An intense job search was started and resumes were submitted to almost fifty different agencies in and around the Sacramento area. Luckily, around the second week of actively searching for a job, this writer was called in for an interview working for an agency that specialized in treating juvenile sex offenders. The interview went so well that a position was offered on the spot and the process of background checks and medical screenings began.

Having had no previous knowledge or experience working with sex offenders, this writer was nervous about the experiences that she would encounter. The agency did require forty hours of training prior to the start of employment. This training consisted of reading the policies and procedures manual for four hours and spending the other thirty-six hours observing staff and residents in the house. A few days after completing the forty hours of training, this writer began working full time despite not having a full understanding of the responsibilities and duties soon to be faced. This was apparent in the first few weeks when the residents had to remind this writer about various policies and procedures which were not understood nor were being enforced.

Looking back on this experience, this writer was grateful for having a house full of older residents who were not taking complete advantage of my lack of experience and level of knowledge. However, there was also the realization that there were several times
when the potential for being placed in or having the residents being placed in higher risk or dangerous situations could have occurred based on my limited knowledge of agency policies and procedures. This writer came to the realization that the pre-employment training process the agency offered was not necessarily enough or adequate to properly educate a new employee on all of the details that can arise while working with juvenile sex offenders.

A few months later, one of the work-related trainings this writer attended focused on how horrible the living conditions are in various residential treatment facilities in the state of California. In recent months, there has been several residential treatment facilities closed or fined for various violations to state licensing requirements. As an individual who has worked in a residential treatment facility, it is this writer’s opinion that staff are not trained enough to handle the different psychological, physical, and emotional issues that arise within the residence.

Therefore, research could be used to examine the current knowledge level of employees working in residential treatment facilities. The residential treatment facility in this study is the facility where treatment for juvenile sex offenders takes place. With such a high risk population, having untrained employees who have little to no understanding of agency policies and procedures can actually be a detriment to the overall treatment process. This research hopes to explore the relationship between pre-employment training and an employee’s knowledge of policies and procedures in order to find a beneficial way to educate employees and reduce their chances of having them
become involved with unsafe or detrimental situations in the treatment of juvenile sex offenders.

**Background of the Problem**

What is the difference between being placed in a group home and being placed in a residential treatment facility? Group homes are usually houses that are owned by a social agency that hire employees to cook, clean, and maintain order while at the same time providing a safe atmosphere where juveniles can continue with their normal daily living with regard to going to school or participating in recreational activities (Zastrow & Kirst-Ashman, 2010). On the other hand, while residential treatment facilities have employees that help maintain order and create a safe space, the main focus is on treating problematic behavior (Efta-Breitback & Freeman, 2004).

Juveniles that are placed in group homes tend to be placed by child protective services (CPS) or some form of juvenile probation in the attempts to provide a structured living environment for youth (California Alliance of Child and Family Services, 2007). Juveniles that are placed in residential treatment facilities tend to be mandated by a court system (Perry & Orchard, 1992). Understanding the differences between the two types of out-of-home placements is vital when working with a very controversial set of clients: male juvenile sex offenders. In 1997, 4% of all crimes adjudicated in court were related to juvenile sexual offenses (Reitzel & Carbonell, 2006). Five years later, according to Gill and Raphel (2009), between 16% and 20% of all sexually related crimes were committed by youth 18 years old and younger.
Most juvenile sex offenders, upon adjudication for their offense, are then placed in a treatment facility. Reitzel and Carbonell (2006) state that in 1999, 7,511 juveniles were placed in residential treatment facilities for sexual offenses making juvenile sex offenders represent roughly 7% of all juveniles in residential treatment facilities for that year. The most recent census data for 2006, however, estimates that the number of juveniles placed in residential treatment facilities has decreased and is now roughly 6,700 (Sickmund, Sladky & Kang, 2008). Through their treatment, it becomes apparent that sexually offending youth face varying issues related to family, society, and their own sexual deviant behavior (Heggeness & Davis, 2010).

In order to receive the best possible treatment and reduce the chances of recidivism, it is vital that employees working in residential treatment facilities for juvenile sex offenders are well trained and knowledgeable with regard to the treatment population. Recent stories have been coming out in the news about residential treatment facilities being a breeding ground of continued deviant and criminal behavior (Ramshaw, 2010). It is essential that the underlying cause for the poor conditions is discovered and resolved; otherwise, the popularity of treatment facilities may diminish and juveniles who need treatment for rehabilitation may no longer have this option. This research aims to examine the current knowledge level of employees working in a residential treatment facility for juvenile sex offenders.

**Statement of the Research Problem**

Residential treatment facilities are facing severe backlash for the recent allegations of abuse and neglect of residents by staff and administrators (Ramshaw,
Exploring how knowledgeable employees are on the policies and procedures of their particular agency upon completion of their current pre-employment training, can have important implications for the overall success of residential treatment facilities. If current pre-employment training is not adequately preparing new employees for their job, then new training programs could be created to increase the quality of knowledge for employees.

By studying current research related to beneficial training techniques for new employees of residential treatment facilities, employers could create effective training programs that would ultimately increase the knowledge level of a new employee. It would be vital that the training program created would be taught uniformly so that all new employees would have the same knowledge level upon completion. Due to the fact that the training program created would be based off of related research and taught uniformly, employers could feel confident that all new employees would be properly trained and adequately prepared to work in a residential treatment facility.

**Purpose of the Study**

This study aims to distinguish which areas of pre-employment training are most and least effective for preparing employees to work in residential treatment facilities. Employees currently employed at a specific residential treatment facility will be tested on their knowledge of the agencies policies and procedures in the attempt to figure out which areas of pre-employment training helped prepare the employee and which areas of training need to be adjusted. With these research findings, a new training system may be
created that may increase employee’s knowledge and create more competent and knowledgeable employees.

**Research Questions**

There are two basic questions that this study hopes to address. The first question is how knowledgeable are residential treatment facility employees about the policies and procedures of their agency? The second question is how helpful was the pre-employment training in educating employees on the policies and procedures they must follow?

**Theoretical Framework**

According to Zastrow & Kirst-Ashman (2010), systems theory is a macro level theory that is comprised of fourteen different parts that, when put together, help explain how a system or organization is able to function. These parts include: system, boundaries, subsystems, homeostasis, role, relationship, input, output, feedback, interface, differentiation, entropy, negative entropy, and equifinality. When these fourteen parts are working properly, a system or organization is able to exchange vital information between itself and other systems (Kazemek & Kazemek, 1992). The ultimate purpose of systems theory is to allow social workers the ability to recognize that individuals play an important role in the overall function of complex systems or organizations (Kazemek & Kazemek).

A system is considered a set of elements that have been organized in a certain way that create a functional whole (Zastrow & Kirst-Ashman, 2010). Every system must have boundaries that separate one unit from another in terms of jobs or responsibilities; and at times, subsystems can be created from these boundaries and form a secondary
system that is smaller than the primary system. Homeostasis refers to when a system is able to maintain stability as well as having the ability to regain stability should something upset the balance (Zastrow & Kirst-Ashman). The term stability should not be associated with effectiveness as systems can be stable but not necessarily be effective.

Each system is comprised of individuals that are expected to follow certain roles. Roles refer to the established social behavior that every person within the system is expected to adhere to (Zastrow & Kirst-Ashman, 2010). It is expected that if an individual accepts his or her role, relationships will form. According to Zastrow and Kirst-Ashman, relationships are connections formed by “emotional exchanges, communication, and/or behavioral interactions (p. 23).” There are different types of roles and relationships depending on the system in which an individual belongs.

Moving on, Zastrow and Kirst-Ashman (2010) define input as when one system receives information from another system. Output would then be the response of the system upon receiving information. On occasion, systems will receive information from within and that is referred to as feedback. With all of this communication, an interface can be formed, allowing two different systems to come together and communicate (Zastrow & Kirst-Ashman). Systems that continue to receive input are then better able to grow and evolve than closed systems that lack communication (Kazemek & Kazemek, 1992).

Growing and evolving systems ultimately hope for differentiation to occur. This simply means that the system moves from being simple to being more complex and intricate (Zastrow & Kirst-Ashman, 2010). If a system is unable to become complex, it
can become disorganized and die in a process known as entropy. If a system is able to differentiate, it is able to move toward growth and development in a process known as negative entropy. No matter what, it is important to note that there is equifinality within any system. There is no one right way to run a system, but rather, there are several different ways that can lead to the same end result (Zastrow & Kirst-Ashman).

**Application of Systems Theory**

For the purpose of this study, the system in question refers to the participating agency that specializes in treating male juvenile sex offenders. There are several subsystems within the agency such as social workers, child care workers, probation officers as well as the residents of the agency. Each subsystem has boundaries that are defined by their responsibilities. Social workers are responsible for the emotional well-being of each resident; child care workers are responsible for maintaining a safe environment; probation officers are responsible for ensuring all aspects of the sentence are fulfilled; and the residents within the agency are responsible for completing their program.

This study will focus on what the current knowledge level of policies and procedures are for child care workers as well as how satisfied they were with the training given prior to being put in a position where they are responsible for the safety of residents. Each child care worker has a role to play within the agency. They are expected to act a certain way in order to model ideal behavior to the residents. When followed properly, these roles insure that the status quo is being maintained. Occasionally input will be received by outside agencies such as CPS, probation
departments, or licensing in an effort to increase the effectiveness of a child care worker. Once this input is received, existing policies may be changed or new ones may be created to ensure that each child care worker is working to the best of his or her ability.

Within this agency, there are also ways that child care workers can provide feedback to administration. Administration frequently distributes employee satisfaction surveys on topics such as workplace, pay, and training satisfaction. Aside from information being exchanged between the agency and the child care workers through surveys, information is also exchanged between the participating agency and probation departments, CPS, and/or the state licensing agency.

The participating agency in this study has shown tremendous growth since the beginning. Policies and programs have been created to ensure that only well qualified employees are hired and trainings have increased. With this being said, it is important not to get stuck in one way of thinking. New information and knowledge about policies and procedures for treating male juvenile sex offenders are constantly being discovered. It is important that agencies continuously train their employees on the most up to date information for the effective treatment of male juvenile sex offenders.

With regard to roles within the agency being studied, one can see that different people are expected to fulfill certain roles as they pertain to their job title. For example, it is the role of the probation officers and CPS workers to provide the agency with referrals for new clients. Administrators within the agency then review the referrals and choose which clients will be given a spot. Social workers are made aware of the new residents entering their caseload during clinical meetings.
Social workers are also responsible for completing various assessments and reports within the first few weeks the new resident is placed based off of the information received through individual and family sessions as well as residential staff. Residential staff members are responsible for transporting residents to and from school, doctor appointments, dentist appointments, and various other activities. Each employee is able to understand their role within the agency as it is directly correlated to their job title. This understanding allows for the agency to run as smoothly as possible.

**Definition of Terms**

For the purposes of this study, the following key terms are defined:

**Cognitive-Behavioral Therapy:** Modifying thoughts and actions by influencing an individual’s conscious patterns of thought (Zastrow & Kirst-Ashman, 2010).

**Counter-Transference:** A redirection of a psychotherapist’s feelings toward a client (Etchegoyen, 1991).

**Humanistic Approach:** Providing some comfort to the client while at the same time pushing the client to work on difficult treatment issues (Mifflin, 2000).

**Juvenile Sex Offender:** An individual under the age of eighteen who typically has fewer victims than an adult, has less violent offenses and are less aggressive than an adult. They usually do not meet criteria for pedophilia nor are they considered being predators. Rather, their offenses tend to be exploratory in nature (Gill & Raphel, 2009).

**Monogamy:** Having a single sex partner at a time (Mifflin, 2000).

**Polyandry:** Having more than one husband at a time (Mifflin, 2000).

**Polygamy:** Having more than one wife at a time (Mifflin, 2000).
Residential Treatment Facility: A type of housing for youth with behavioral problems that are too unruly for foster care but do not warrant being in a correctional facility. Most often, residential treatment facilities combine 24 hour supervision with therapeutic treatment for specific behavioral problems (GAO, 2007).

Transference: “A process that occurs during psychotherapy, in which patients act toward the therapist as they did or do toward important figures in their lives (Comer, 2004, p. 61).”

Assumptions

There are three assumptions that need to be considered for this study. First, there is the assumption that all employees in this study are twenty-one years old or older and have at least a high school diploma as are the current requirements for employment. Secondly, it is assumed that all employees attend trainings available to them upon being hired, in an effort to increase their knowledge level of the agency and the population in which they work. Lastly, it is assumed that every employee experienced the same amount and type of pre-employment training. This ensures that all employees could have relatively similar knowledge levels with regard to agency policies and procedures.

Justification

Several ethical principles discussed in the Nation Association of Social Workers (NASW) are in congruence with this study. The primarily ethical principle states that social workers could strive to “help people in need” and “address social problems (NASW, 2006, p. 5). As mentioned previously, residential treatment facilities are closing at an alarming rate due to all of the issues that have come up recently with regard to poor employee conduct and poor living
conditions. This research is addressing the social problem related to whether or not employees are being under trained by measuring their knowledge level and insight into agency policies and procedures.

Another ethical principle discussed by NASW states that social workers could “challenge social injustice (NASW, 2006, p. 5). Upon completion of this study, the data may be used to help create some type of training program that can provide individuals access to the most current information with regard to being an employee at a residential treatment facility. This could ultimately create competent and knowledgeable employees and decrease social injustices faced by residents.

If this change were to happen, perhaps current issues in residential treatment facilities would not occur anymore. After all, social workers ultimately strive to “respect the inherent dignity and worth of the person,” regardless of any issues they may have that require them being placed in a residential treatment facility (NASW, 2006, p. 5). It is hoped that individuals in need of residential treatment facilities continue to have them at their disposal and have them run by competent employees.

This research is important for the social work profession because it is attempting to examine and analyze a particular agency’s method of training new employees. Social workers strive to ensure that marginalized or at-risk populations receive the best services possible. It is important that social workers analyze current training methods within agencies working with marginalized or at-risk populations in order to find out whether those methods are beneficial and appropriate. If it appears as though the resources going in to funding certain training methods are no longer beneficial to an agency, then it would be essential that the social worker create a
new training method that would enhance the knowledge new employees receive during pre-employment training.

**Delimitations**

There are several limitations of this study. Firstly, this study is limited in that it only looks at pre-employment training as a factor leading employees being unknowledgeable about policies and procedures of their agency. This study does not account for other possible factors leading to employees lacking knowledge. No assumption can be made that employees who make mistakes do so because they are unknowledgeable about rules. It could just be that employees are not concerned about the rules.

Secondly, this study does not analyze any personnel’s demographical data due to the restrictions placed on this researcher by the participating facility and human subjects committee in order to be able to conduct the research and protect the privacy of the employees. Therefore, issues that may also account for employee’s knowledge or lack thereof such as age, gender, or religious affiliation were not collected in order to protect the privacy and confidentiality of information given by the employees.

Lastly, this study is based on a limited sample of one specific agency specializing in residential treatment of male juvenile sex offenders. This small and specific sample makes the data nearly impossible to be generalized to any residential treatment facilities whether or not they specialize in treating male juvenile sex offenders.
Summary

This chapter introduced the overall topic of this research study. Following the introduction, background information was given, a brief statement discussing the research problem was addressed, and the overall purpose of the study was given. Next, the hypothesis was stated and the research problem was discussed within the context of a theoretical framework. This chapter concluded with a definition of terms related to this study as well as assumptions, justifications, and limitations with regard to the study.

The following will be addressed in the next four chapters: there will be literature review related to this topic (Chapter 2); a description of the methodology used for this study (Chapter 3); an analysis of the data collected (Chapter 4); and a discussion on the conclusions drawn from the study data (Chapter 5).
Chapter 2

REVIEW OF THE LITERATURE

Introduction

This literature review will be organized into six sections that deal with residential treatment facilities for juvenile sex offenders and the policies and procedures associated with these types of facilities. The first section reviews the historical background of residential treatment facilities for juvenile sex offenders and policies and procedures (i.e., treatment modalities). The second section examines how employees could act in order to promote effective treatment. The third section describes characteristics of juvenile sex offenders. The fourth section examines positive results and negative consequences around actively supervising juvenile sex offenders. The fifth section looks at current trends in training employees who work in residential treatment facilities for juvenile sex offenders. The sixth section explores the relationship between employee conduct and supervision as it relates to employment training. The final section discusses gaps in the literature reviewed.

Historical Background

The world is comprised of hundreds of numerous societies that all differ from each other in certain details of behavior, especially when it comes to sex (Pettitt, 1970). Some argue that sex is pervasive as well as a dominant factor in primate group life (Fedigan, 1992). According to Pettitt, however, early groups of hominids wishing to be successful in continuing the species viewed sex between a male and female like a contract and not as pervasive. The act of mating would be a public event so the rest of
that particular society would know that the male is now responsible for the female and that the female will provide food and children to the male (Pettitt). Pettitt goes on to state that at this point in history the concept of marriage did not exist.

While the exact time that marriage was created is unknown, the fact is that monogamous marriage has become a social institution in American culture (Pettitt, 1970). Despite the fact that in one study of 475 societies, 409 societies were considered polygamous or polyandrous, the concept of monogamy is considered socially acceptable behavior due to the fact that the world’s most populated countries favor monogamy (Pettitt; Smith, 1962). Monogamy has actually become synonymous with morality which then led to the formation of the concept of sexual taboos when one does not conform (Pettitt; Smith). In another study looking at 250 societies, America was one of three societies that had generalized sexual taboos with the other two societies being illiterate (Murdock, 1949).

The generalized sexual taboos that have been formed within America have led to the criminalization of sexual acts that are considered immoral (George, 2001). Criminalizing sexual acts created a new group of legal offenders in the jail and prison systems known as sex offenders. Individuals convicted of a sexual crime would have the opportunity to receive treatment while in jail or prison. In recent decades, however, there has been a shift from treating sex offenders in jails and prisons to treating them in sex offender-specific programs (Smith, 1995).

For the most part, sex offender programs have historically included treatment only being available or offered in prison or other correctional facility settings. According to
Smith (1995), there were roughly 12 specialized sex offender treatment programs in 1976; however, that number has dramatically increased to over 1800 programs by 1992. It is important to note that the majority of these programs were created and conducted within the prison setting. Of all of these programs created in 1982, according to Knopp (1982), only 22 programs were residentially based and specifically designed for juvenile sex offenders. This number has also greatly increased since 1982, with hundreds of programs located across the United States (Cellini, 1995).

Brecher (1978) found that many sex offender programs in existence in the 1970s were not working in coordination with other public or private agencies. In fact, there was so little coordination between agencies that hardly any agreements with regard to effective and therapeutic treatment for sex offenders were made between correctional facilities and mental health facilities (Smith, 1995). Up until the late 1980s, there were only a few studies that focused on effective treatment outcomes for sex offenders.

The Association for the Treatment of Sexual Abusers (ATSA) was founded in the hopes of creating more research and understanding in dealing with the treatment of sex offenders (Prescott, 2001). According to Prescott, ATSA is an international organization that promotes standards of care for treating sex offenders, including standards with regard to professional competence. They espouse the belief that those who work with sex offenders maintain continuous attendance at conferences, workshops, and trainings in order to obtain necessary knowledge of working with sex offenders. Ultimately, one could not only have a professional degree and license, but that individuals interested in
working with sex offenders could become certified for such work (Prescott). As of now, certification is only available in Washington and Texas.

The history behind policies and procedures of residential treatment facilities for juvenile sex offenders, according to Roberts and Camasso (1991), focuses primarily on individual and group therapy/treatment. And in some cases, wilderness programs were also created as a form of treatment. Participants of treatment would participate in psycho-educational classes that focused on everything from social skills training to general sex education (Roberts & Camasso). Roberts and Camasso also identified important key components of treatment focused on enhancing an offender’s sense of empathy and creating an understanding of deviant sexual cycles.

Aside from psycho-educational classes, treatment facilities primarily used cognitive-behavioral therapy (CBT) as a treatment modality in treating offenders as it was shown to statistically have lower recidivism rates than other treatment modalities (Guarino-Ghezzi & Kimball, 1998). Cognitive-behavioral therapy focuses on three things: thoughts, feelings, and behaviors (Zastrow & Kirst-Ashman, 2010). Clinicians work on figuring out what feelings and thoughts are causing offenders to have problematic behavior. This is done by helping offenders work on changing their maladaptive thought processes in the hopes that the feelings associated with the thoughts will change and ultimately so will the behavior that occurs as a result of the thoughts and feelings (Jordan & Franklin, 2003).

Having a warm humanistic persona coupled with a strong background in different treatment techniques is considered the best combination any clinician can have
(Blanchard, 2002). Essentially, the clinician is able to provide some comfort to the sex offender while at the same time pushing the offender to work on difficult treatment issues. This firmness often provides no room for the offender to claim any confusion with regard to treatment (Blanchard).

On the other hand, having a warm persona without technique can actually be unproductive in treating sex offenders (Blanchard, 2002). Sex offenders will see this warm persona as naivety on the clinician’s part and try to charm or manipulate the therapist in the attempt to not work on treatment. This type of relationship can also give way to offenders claiming confusion while working on important treatment issues.

**Employee Conduct**

There are general assumptions that employees who work in residential treatment facilities for juvenile sex offenders need to have prior work experience in the field. Brandes and Cheung (2009) have found that this is not necessarily the case. Some researchers have suggested that there is no statistically significant relationship between years of experience working in the juvenile sex offender population and treatment outcome (Brandes & Cheung). This is not to say that having a degree, specific training, or work experience within the field is irrelevant.

According to Baker and Price (1997), having employees with experience working in related fields such as substance abuse or victims of sexual assault is an essential part of becoming an effective staff member. However, when hiring individuals with no prior work experience, research findings suggest caution to agencies to fully understand a prospective employee’s motivation for working in a field in which they have little or no
experience in (Baker & Price). Some individuals may choose to work with this population in order to figure out their own issues or problems, which could be detrimental in the overall treatment outcome of residents.

When hiring a new employee, officials need to look for several specific qualities within the individual that would promote effective treatment for juvenile sex offenders. According to Fernandez and Serran (2002), the first quality that is imperative to have is the relationship between staff members and residents. In order to create a positive treatment atmosphere, staff must work hard to create appropriate alliances with the residents. The use of self-disclosure can be a way to gain trust with residents. While this trust can be positive, Fernandez and Serran state that it is vital that staff members are using self-disclosure solely for the purpose of helping the resident reveal more about themselves and not as a way to serve the staff member’s needs.

Having staff believe that the resident can change as well as emotionally engaging with the residents to help facilitate that change are other ways to provide effective treatment (Fernandez & Serran, 2002). Fernandez and Serran define an emotionally engaged staff as a person who displays empathy, warmth, genuineness, respect, and attentive listening. It is also vital to have belief and hope that each resident will successfully complete their program and treat them accordingly. All of these qualities, when combined together, create a positive and therapeutic treatment alliance between the staff and the resident.

Once a well qualified employee begins to work in the residence, he or she will face a rather unique experience very specific toward working with juvenile sex offenders:
the concept of being in a no touch facility. In 2005, policies surrounding the use of touch with juvenile sex offenders began to emerge (Thomas & Wilson Viar III, 2005). The belief surrounding the concept of no touch was that any physical contact that was given to a sex offender could ultimately be misinterpreted as coming from an affectionate mindset.

The unintended consequences of enacting such policies, however, created the notion that there is only good touch or bad touch (Thomas & Wilson Viar III, 2005). Considering the fact that most juvenile sex offenders have had a previous history of being abused themselves, this reactive thought process of good versus bad can seriously confuse residents (Thomas & Wilson Viar III). Staff members are attempting to form attachments or bonds with the residents in the hopes to gain their trust, yet one of the main ways of showing attachment is through touch (Hunter & Struve, 1997).

The expectation that a resident could be open and vulnerable with a staff member may be unrealistic. The concept of no touch can also be seen as a set up for furthering the notion of good touch versus bad touch. According to Hunter and Struve (1997), there are actually several different types of touches that combine to create different experiences for each individual. As a juvenile sex offender, it is important to learn about the different types of touches (Hunter & Struve). In a no touch facility, however, if residents are caught touching staff or other residents, consequences are typically given (Thomas & Wilson Viar III, 2005). Therefore, during the entire course of treatment, any touch is considered bad. This all or nothing thinking can make the process of family reunification
and reattachment more difficult as the residents learn to fear being touched (Thomas & Wilson Viar III).

Having employees who are able to show care and compassion for what the residents are experiencing will create a positive therapeutic atmosphere necessary for the successful completion of their program. Despite the fact that the juvenile sex offenders live full-time at the houses belonging to treatment facilities, staff members have the ultimate responsibility to create the therapeutic environment through their own style of working as well as their personal and professional skills (Horvath, 2000).

**Characteristics of Juvenile Sex Offenders**

In order to properly appreciate what employees of residential treatment facilities face on a daily basis, it is necessary to understand the population in which they work. Juvenile sex offenders are a very diverse population with no real specific racial, religious, or ethnic majority (Schwartz, 1995). Schwartz goes on to state that over seventy percent of the population has lived in a two parent household but recently suffered the loss of a parent either through death, divorce, or incarceration. Most juvenile sex offenders attend school but tend to have truancies, behavioral problems, learning disabilities, frequently change schools, receive poor grades, and are considered socially inept and isolated away from same age peers (Hanser & Mire, 2008; Letourneau & Borduin, 2008; Schwartz, 1995).

Juvenile sex offenders begin committing offenses between the ages of five and nineteen years old, but the typical age of most offenders is between fourteen and fifteen years old (Hanser & Mire, 2008; National Council of Juvenile and Family Court Judges,
It has also been found that most juveniles that abuse other juveniles have a positive history of experiencing some type of abuse (Davis & Leitenberg, 1987; Hanser & Mire). Lastly, juvenile sex offenders tend to grow up in chaotic and instable homes with violent or unfriendly family members (Bourgon, Morton-Bourgon, & Madrigrano, 2005; Hanser & Mire; Letourneau & Borduin, 2008).

When one looks at victims chosen by juvenile sex offenders, it is apparent that the thought process is quite different than adult sex offenders. According to Gill and Raphel (2009), juvenile sex offenders tend to have fewer victims, are less aggressive, do not typically meet criteria for pedophilia, and typically have abuse that ranges from exploratory to aggressive assault. These characteristics, though generalized to the entire population of juvenile sex offenders, are not always going to be true. What is considered constant, however, is that it is impossible to compare juvenile sex offender behavior to adult sex offender behavior.

With the understanding that juvenile sex offenders were far different from adult sex offenders, researchers began to find ways of placing juveniles into categories for easier identification. Pithers, Gray, and Houchens (1998) began conducting research in the attempts to create a classification system for juvenile sex offenders. The classification system created has become empirically tested and relevant to clinicians within the field (Hanser & Mire, 2008). The researchers were able to relate and combine common characteristics of juvenile sex offenders into five main categories: highly traumatized, abuse-reactive, sexually aggressive, non-symtomic, and rule breaking (Pithers et al.).
The highly traumatized and the abuse-reactive categories are relatively similar. According to Pithers, et al. (1998), individuals would present with the highest levels of psychiatric disorders among all five categories. The highly traumatized would frequently show signs of post-traumatic stress disorder (PTSD) while the abuse-reactive would present with signs of oppositional-defiant disorder (ODD). Essentially, those who have been abused themselves show higher rates for mental health disorders such as PTSD (Boney-McCoy & Finkelhor, 1996). Both groups have a positive history for abuse, often by more than one individual. Lastly, highly traumatized and abuse-reactive individuals generally are the youngest of the five categories, yet have the highest number of victims (Pithers, et al.).

In the sexually aggressive category, there are higher levels of psychiatric disorders related to conduct disorder or other behavioral issues (Pithers et. al, 1998). In this category, one also finds that the act of penetrating the victim is a primary sexual issue and the sexually deviant behavior is more likely to occur because the abuser wants to abuse and not because they have necessarily been abused themselves. Most of the abusers that fall into this category are actually less likely to have been victimized in their life (Pithers, et. al). Other researchers have labeled this category of abuser as antisocial or confident due to the violent nature of the sexual offenses these youth commit (O’Brien & Bera, 1986; Worling, 2001).

The last two categories include the non-symptomatic and rule breaking abusers. Non-Symptomatic abusers, also known as the naïve experimenter, typically do not have any major psychiatric or mental health issues nor do they tend to have more than one or
two victims which required low levels of aggression (O’Brien & Bera, 1986; Pithers, et al., 1998). Most of the abusers in this category have had some previous history of being victimized, but the victimizer was most likely an extended family member. The rule breaking category is mostly represented by female sex offenders and does not really have much relevance for male juvenile sex offenders. This category involves the highest levels of sexualized behavior and the propensity to act out in non-sexual ways (Pithers, et al.).

These five categories help give employees working within the population a better understanding of the types of individuals in which they are working. If an employee has a better understanding of the offenders they work with, they will be much more likely to work more effectively and therapeutically with their residents (Pithers, et al., 1998). Once there is a basic knowledge of who juvenile sex offenders really are, employees can then learn how to actively and appropriately supervise these types of residents.

**Employee Supervision of Juvenile Sex Offenders**

When looking at how to properly supervise juvenile sex offenders in a residential treatment program, Baker and Price (1997) discuss six components each facility must have in order to promote a safe, supervised, and therapeutic atmosphere. These components are: adequate funding, supportive administrators, strong treatment model, good clinical supervision, adequate facility, and a clear philosophy or policy (Baker & Price). Essentially, if a facility is able to accomplish all six components, then the environment could be conducive to treatment.
Adequate funding refers to the fact that residential treatment facilities are responsible for supervising residents 24 hours a day as opposed to twelve or eighteen hours at an out-patient setting (Baker & Price, 1997). Agencies must be adequately funded to provide support staff responsible for the safety of residents at all times, including over-night (Cotton, 1991). Supportive administrators refer to having agencies be completely committed to understanding that re-offending will occur (Baker & Price). Agency administrators could be supportive enough to help staff members out when the entire agency is going through rough times such as having a resident re-offend.

In order to be supportive, it is essential to have a sound treatment model that is backed by research (Baker & Price, 1997; Gibson & Vandiver, 2008). This model is going to be something that staff members are highly trained in as well as able to refer back on if they are ever in a tough situation with a resident (Gibson & Vandiver). There could never be any confusion or trepidations when making a decision due to the presence of the treatment model (Baker & Price). Along with a treatment model, having clear agency philosophies or policies that clearly state rules and common goals for all will eliminate any confusion or manipulation that residents may try to use in order to escape facing treatment (Baker & Price).

The last two components that are required to ensure adequate supervision are incredibly important. Having good clinical supervision with staff members who are trained in working with juvenile sex offenders is vital to creating a supervised and therapeutic environment (Baker & Price, 1997; Thomas, 2003). Along with clinical supervision is the notion of having an adequate facility. Residential treatment facilities
could be physically and emotionally safe, not be overcrowded, and have space to accommodate all residents as well as space for staff members (Baker & Price; Thomas, 2003). If all six components are not met, the chances of running a highly supervised and therapeutically appropriate residential treatment facility are slim.

According to Green (1995), having residents be highly supervised helps to increase safety and decrease the use of maladaptive behaviors. For example, having fully qualified staff engaged in active supervision will help the offender control his deviant sexual impulses, create more appropriate impulses, and help manage dealing with high risk or emotional situations effectively (Green; Heinz, Gargaro, & Kelly, 1987). All of this can be done by having appropriate staff working who are able to process with residents when sexual or emotional issues arise (Thomas, 2003). By processing with staff, residents are less likely to act or resort to their old deviant behaviors (Green).

Fernandez and Serran (2002) also did research to determine what constitutes properly supervising juvenile sex offenders. Their research was used by the National Offense-Specific Residential Standards Task Force, an organization that was established to create uniformity in assessing residential treatment facilities for juvenile sex offenders. While there are several components listed that are imperative to creating a safe and supervised facility, they can be lumped into the following general categories: employee behavior and agency behavior (Fernandez & Serran).

Much like Baker and Price (1997) and Green (1995), Fernandez and Serran (2002) believe that well trained employees are vital in creating a safe atmosphere for residents. Employees could keep well-maintained boundaries, dress appropriately at all
times, not gossip about other staff or residents, and follow program norms with regard to policies and procedures (Fernandez & Serran). If employees are able to follow these necessary guidelines, they are then able to provide a positive and safe treatment atmosphere.

Staff members are not the only ones who are responsible for providing a safe and supportive atmosphere. Agencies as a whole have a responsibility to staff members and residents. According to Fernandez and Serran (2002), agencies could support all team decisions, treat everyone with respect, help honor confidentiality, and work together with all staff members to reduce staff splitting caused by residents.

If agencies were to enforce and follow the guidelines set by Baker and Price (1997), Green (1995) and Fernandez and Serran (2002), then the employees of such agencies would be well trained and able to provide adequate support and supervision to ensure a positive therapeutic atmosphere. If agencies do not enforce and follow such guidelines for training employees, the consequences could be enormous. As mentioned in the previous chapter, residential treatment facilities have recently been found to be sites of horrific supervision (Ramshaw, 2010). According to Ramshaw, this lack of supervision has led to an increase in media attention that has started to unveil some of the dangers that come with inadequate supervision.

In recent news articles about residential treatment facilities, several stunning issues surrounding inadequate supervision have emerged. According Langford and Ramshaw (2010), more than 250 confirmed cases of mistreatment in residential treatment centers have occurred in the last two years. Even with the large number of reported cases
of mistreatment, all of the centers discussed remain open and in full operation. Another treatment facility recently had employees arrested for physically abusing disabled children as well as failing to keep a child safe (Murphy, 2011). Despite being in supervised facilities, there are also reports that children are doing everything from attempting suicide to sexually acting out (Langford & Ramshaw; Ramshaw, 2010).

More stunning than anything, is the fact that some of the sexually acting out was not between residents, but rather, between one resident and a staff member (Langford & Ramshaw, 2010). According to Langford & Ramshaw as well as Ramshaw (2010), multiple residential treatment facilities have been shut down in the past few years due to not following licensing guidelines that would have ensured sexual acting out or suicide attempts would not have occurred.

Supervision has been so poor in some circumstances that youth have been able to run away from facilities, start fires, steal vehicles, consume alcohol or illicit drugs, steal and consume psychotropic medicine, or even die (Brooks, 2010; Langford & Ramshaw, 2010). It is essential that residential treatment facilities follow guidelines for supervision as suggested by researchers such as Baker and Price (1997), Green (1995), and Fernandez and Serran (2002). Inadequately supervised residents are capable of creating havoc as well as unsafe environments for proper therapeutic treatment for themselves and others.

Training for Employees

When looking at effective training techniques of new employees, Block (2007) mentions four different types of training that could be incorporated. The first part of training could focus on the individual being hired. Training could involve having the
employee first acknowledge his or her own conflicts and disputes for working in such an environment, including having them discuss their own life experiences and other possible issues that could lead to counter-transference, recognizing any disagreement they may have with the agencies treatment model, explaining that juvenile sex offenders will both repulse and attract people, and preparing them to begin hearing sexually abusive and explicit stories continually (Block).

Next, training could involve discussing the challenges that will be faced while working in a residential treatment facility (Block, 2007). These challenges include having to deal with the agency accepting inappropriate referrals, completing paperwork, staying up to date with agency standards as well as trainings, and dealing with dysfunctional families (Heinz, Gargaro, & Kelly, 1987). Employees need to recognize that the work they will be doing goes beyond just supervising adolescents. There will be challenges and learning opportunities that they will face on almost every shift (Block; Heinz, Gargaro, & Kelly).

The third aspect of training could address the residents themselves. Employees working in residential treatment facilities need to strive to make the home a friendly and inviting environment (Block, 2007). Block believes that this is done by creating routine and order around the home, helping enhance the residents’ social skills, and emphasize accountability for everything. If these three components are utilized, the home environment may then feel safe and comfortable for working on treatment issues.

The last aspect of training could examine how well the new employee is able to manipulate his or her environment. Residential treatment facilities use different types of
interventions to motivate treatment success. Having well-trained staff who know the proper use of each intervention is important for the overall success of treatment. Block (2007) mentions such intervention techniques like reward systems and behavioral interventions. Rewards and consequences, when used appropriately, can work well in a treatment environment (Block).

Other research has examined the importance of continuous training and education when hiring and training new employees (Ehrlich, Steele, & Montague Jr., 2005). It is believed that employees could at least have a bachelor’s degree in psychology, sociology, or a related field. If a prospective employee is unable to meet the education requirements, they could at least have some type of experience working with children who have sexual issues, talking with children and adolescents about sexual issues, and understand language surrounding offenders (Ehrlich, et al.).

According to Ehrlich, et al. (2005), prospective staff members who have met the educational requirements could receive forty hours of training annually in such fields as language of sex offending, current research on adolescent sex offenders, victimology and victimization issues as well as ethics and professional standards in working with juvenile sex offenders. It is not necessary to include all forty hours of training prior to hiring a new employee, but the training needs to be mandatory once they are hired (Ehrlich, et al.).

During the training process, the prospective staff member needs to become aware of his or her own sexual attitudes and beliefs in order to avoid stereotyping or labeling the residents (Ehrlich, et al., 2005). Aside from recognizing his or her own sexual issues as it
will relate to residents, the prospective staff members must also have some knowledge of working with involuntary residents who may be very angry or upset at their placement (Ehrlich, et al.). As with Block (2007), Ehrlich, et al. believe that prospective employees need to be as well educated and trained as possible in order to be effective workers.

Previous research has examined what agencies could be doing to provide training to prospective employees (Block, 2007; Ehrlich et al., 2005). Silverblatt (2010) explored what employees believe needs to occur in order to be satisfied with training. In order to be a happy and trained employee, relationship building with prospective new co-workers is important (Silverblatt). There needs to be some type of connection created between the prospective employee and current employees. This connection can also help the prospective employee have someone to turn to once they are working.

The emotion and excitement of working in a particular environment is also vital in having a happy and satisfied prospective employee (Silverblatt, 2010). Employees who are not excited about working in a particular field or agency will not be satisfied about any type of training, no matter how it is run. Prospective employees must be positive and view the new job with eagerness and excitement. If they have the positive energy, the satisfaction of training will be considered high as they are learning information they want to learn, not information they have to learn (Silverblatt).

The last thing that makes employees happy with their pre-employment training includes setting goals and working on them (Silverblatt, 2010). Most of the prospective employees are entering an agency at the lowest position. Employees who go through training with the mindset that they will go through the promotion ladder will be much
happier. The prospect of setting goals such as increasing education in order to have the opportunity of being promoted and then meeting those goals helps increase the prospective employee’s confidence about working for a particular agency (Ehrlich, Steele, & Montague Jr., 2005; Silverblatt).

**Policies and Procedures and Training Satisfaction**

There is limited research on training satisfaction of employees in residential treatment facilities for juvenile sex offenders as it relates to policies and procedures of a particular agency. The National Offense-Specific Residential Standards Task Force (1999) does mention four components of staff training as it relates to rules that are vital to have a competent residential treatment facility. The first component is the fact that agencies could make it a policy to only employ individuals who are competent and qualified to work (National Offense-Specific Residential Standards Task Force). This competence relates to having employees already have basic understandings of policies and procedures relevant to residential treatment facilities for juvenile sex offenders.

The second component states that agencies could provide relevant offense-specific orientations for new employees as well as continued in-service training to all current staff (National Offense-Specific Residential Standards Task Force, 1999). These types of orientations could provide employees with a good understanding of the types of individuals they will be working with as well as the types of offenses they may have committed. Once employed, trainings could continue on a fairly regular basis in order to keep updated on research and information specific to juvenile sex offenders (National Offense-Specific Residential Standards Task Force).
The last two components are somewhat similar. They involve creating a comprehensive communication system using a team approach for employees as well as requiring offense-specific supervision on a weekly basis to all staff that work directly with residents (National Offense-Specific Residential Standards Task Force, 1999; Thomas, 2003). These two components combine to create effective and open communication between staff working with residents and the rest of the agency. Creating a treatment team atmosphere helps to provide new employees with a support network of other employees who may have more experience. This support network combined with required weekly supervision by a supervisor can largely impact how good the new employee will be (National Offense-Specific Residential Standards Task Force; Thomas, 2003).

Gaps in the Literature

Unfortunately, despite the increasing population of juvenile sex offenders that come into residential treatment facilities, there is still limited research knowledge in this field. Several researchers agree that in order to better understand this growing population, more research must be completed (Brandes & Cheung, 2009; Efta-Breitback & Freeman, 2004; Hendriks & Bijleveld, 2008; Letourneau & Borduin, 2008;). The limited research that has been collected on sex offenders has mainly focused on male sex offenders. In fact, of all the literature examined, only one article even mentioned female sex offenders and their characteristics (Pithers, et al., 1998).

Also, most of the literature examined examined juvenile sex offender characteristics or effective therapeutic – offender relationships. It is interesting that there
is not much information or literature regarding staff members working within the juvenile sex offender population. Most of the focus is on the client and therapist interaction. While having a positive client/therapist relationship is extremely important for treatment purposes, having a positive client/residential staff relationship is also important. Clients in residential treatment spend the majority of their time interacting with residential staff members within the home and not with their therapist or social worker.

When literature does review what makes a successful therapist, how success is measured tends to be inconsistent or unknown (Efta-Breitback & Freeman, 2004). Each individual defines success differently, so there needs to be a unanimous definition for the phrase of successful treatment. This can be especially trying when some residential treatment programs run from relapse prevention or an abstinence model approach and other programs run from a harm reduction model. Each model measures success differently.

Lastly, most of the literature reviewed has been based on small sample sizes with little chance of reproducing the study (Brandes & Cheung, 2009). Having small sample sizes also decreases the ability to generalize the information to a larger population. In large scale research studies, the ability to have a large sample size allows for generalizing the data to a larger population and creates more valid or reliable results (Rubin & Babbie, 2008).

This study aims to address the lack of research around staff members who are not social workers or therapists. This study will examine training and supervision issues of staff members that work in the actual residence. It is this researchers hope that upon
completion of the study, more information will be known about how prepared staff members are to begin interacting with residents when they first begin working in a residential treatment facility for juvenile sex offenders.

**Summary**

First, this chapter described the historical background of residential treatment facilities for juvenile sex offenders and the policies and procedures associated with treatment facilities. Then, the literature was explored that addressed proper employee conduct while working with juvenile sex offenders. Next, there was a review of characteristics of juvenile sex offenders as well as appropriate employee supervision. Then there was a discussion on beneficial employee training. This chapter also examined literature on employee’s knowledge of policies and procedures related to the overall training satisfaction they had prior to beginning employment. Lastly, gaps in the literature were examined. The following chapter will address the methodology of this study.
Chapter 3

METHODS

Introduction

This chapter will discuss methods used for this study. The following are discussed in this chapter: the research question, research design, variables, study population chosen, the instrument used, and the procedures for gathering and analyzing the data. Finally, the protection of human subjects are also described.

Research Questions

There are two questions that this study hopes to address. The first question is how knowledgeable are residential treatment facility employees about the policies and procedures of their agency? The second question is how helpful was the pre-employment training in educating employees on the policies and procedures they must follow?

Research Design

This study is considered to be a cross-sectional quantitative survey research design that utilizes both close-ended and one open-ended question. The following is a more detailed account of the research design.

Quantitative Survey Approach. This approach was used in the attempt to find precise and generalized information from analyzed numerical data as opposed to analyzing content from an interview (Rubin & Babbie, 2008). In general, quantitative survey research studies aim to describe something, discover something new, or discover possible causal relationships (Kirk, 1999). This researcher was attempting to discover a possible causal relationship between the dependent variable and the independent
variables. Quantitative survey research tends to utilize surveys to collect and analyze data (Kirk).

There are several advantages to using a quantitative survey research approach. According to Kirk (1999) quantitative survey research can be conducted at a relatively fast pace for very little money. Researchers are also able to reach a larger population than using a qualitative approach, increasing the sample size and subsequent data (Grinnell, 1993). Surveys also make it easier for the researcher to get answers pertaining to tough issues as participants do not have to be concerned about an interviewer’s reaction (Rubin & Babbie, 2008). Lastly, surveys do not require the use of a trained interviewer that may be biased, unprofessional, or uneducated in how to conduct a proper interview (Grinnell).

Disadvantages to using a quantitative research approach include the fact that participants may skip questions or forget to answer questions (Kirk, 1999; Rubin & Babbie, 2008). This may be due to the fact that participants are experiencing question fatigue or do not understand the question that is being asked and have no way to get clarification (Grinnell, 1993). The survey itself may become problematic for a researcher if it was not written correctly. Finally, researchers are unable to observe behavioral responses to questions through the survey process like they are with a qualitative interview approach (Rubin & Babbie).

Cross-Sectional. This research is considered cross-sectional because the survey was only given at one point in time. Cross-sectional research tends to be used with exploratory or descriptive research designs (Grinnell, 1993). There are several
advantages to using a cross-sectional research design. This design is less time consuming and much more cost effective (Grinnell). The researcher only needs to survey participants once and does not need to keep track of all participants for future surveys (Rubin & Babbie, 2008).

Disadvantages of using a cross-sectional research design include the fact that the research is severely limited in discovering causal links if participants are only interviewed at one specific moment in time (Kirk, 1999). With longitudinal, cohort, or panel studies, more information about a particular topic or problem can be found as well as possible causal links. Knowledge of these links can then help contribute to finding a comprehensive plan for change.

Variables

The dependent variable is employee training satisfaction, which is defined as employee satisfaction with their current knowledge level of policies and procedures as well as their satisfaction with the pre-employment training. Satisfaction levels with regard to an employee’s knowledge are operationally defined as how well the employees know the policies and procedures of their agency upon completion of their pre-employment training. This will be measured as high, medium, or low level of knowledge.

There are three independent variables that will be addressed in this study. The first independent variable is employee’s knowledge of agency rules regarding employee conduct. This is defined by how knowledgeable current employees are on policies and procedures revolving around employee conduct such as employee dress code and proper
employee-resident boundaries. This will be measured as high, medium, or low level of knowledge.

The second independent variable is employee’s knowledge of agency rules regarding supervision of residents. This is defined by how knowledgeable current employees are on policies and procedures revolving around supervising residents such as the concept of active supervision and administering medication. This will be measured as high, medium, or low level of knowledge.

The third independent variable is employee’s satisfaction with their pre-employment training. This is defined by how prepared employees felt upon completion of their pre-employment training to fulfill their job requirements adequately as described in the agency’s policies and procedures manual. This will be measured as feeling prepared to work or not feeling prepared to work.

**Study Population**

This study was conducted at a residential treatment facility for juvenile sex offenders in Sacramento County. The study population was current employees of a residential treatment facility for juvenile sex offenders in Sacramento County. A total of 31 employees were surveyed. The population surveyed included both males and females. All of the participants worked a minimum of 35 hours a week. The participants were attending a mandatory staff meeting when they were asked to participate in the study.

**Sample Population**

Two different sampling methods were used for this study: criterion sampling and convenience sampling. Criterion sampling occurs when there is a very specific subtype
of the population that a researcher wants to study. The criterion sampling for this study was current employees of a residential treatment facility for juvenile sex offenders.

An advantage as well as a disadvantage to using a criterion sampling method is the fact that participants who are surveyed have similar characteristics. Having similar characteristics allows for an easier time of generalizing data to a larger population; however, these same similar characteristics may make it difficult for researchers to find participants. For example, they may have a great deal of knowledge on the subject being studied but not meet all of the criteria necessary to be a participant.

Convenience sampling relies on studying participants who are the most readily available (Grinnell, 1993). This is the most frequently used type of sampling in social work as it is the least expensive and most feasible to use (Grinnell; Rubin & Babbie, 2008). This research study used convenience sampling because the researcher surveyed employees who were attending a mandatory staff meeting. The sample size was 32.

**Instrumentation**

The survey used for the research contained a total of eighteen questions (See Appendix A). The first sixteen questions were multiple choice questions that addressed issues pertaining to the participant’s current knowledge level of policies and procedures of their residential treatment facility. On question seventeen, the participants were asked to identify three aspects of new employee training they wish could be improved. The last question was a multiple choice question that ascertained the amount of time the participant has been employed with the agency.

Some of the advantages to using a survey with close and open-ended questions
include the fact that close-ended questions are much easier to code and enter into a computer data analysis program. Close-ended questions also create better unity in participant responses, ultimately making information easier to process (Rubbin & Babbie, 2008). An advantage of including one open-ended question is the fact that it allowed participants the opportunity to discuss issues that the researcher did not think to include in the close-ended section of the survey.

There are several disadvantages to using close and open-ended questions. For the most part, close-ended questions do not allow for participants to include any thoughts or feelings regarding a question. Instead, participants must only choose an answer from a previously-generated list of responses that the researcher deemed important (Grinnell, 1993). This can create some problems if a participant does not feel any of the responses are appropriate and they may choose not to respond. Including an open-ended question can also have disadvantages in that it is very time consuming to code written data from open-ended questions and participants tend to respond to open-ended questions at a lower rate (Grinnell).

**Data Gathering Procedures**

Data was collected from child care workers who were currently employed at a residential treatment facility for juvenile sex offenders in Sacramento County. Prior to administering the survey, the researcher contacted the agency and requested permission to attend a mandatory staff meeting and administer the survey. At the mandatory staff meeting, consent to participate was obtained and the survey was administered.

Prior to administering the survey, the researcher introduced herself, the type of
study and the nature of the survey. Employees were given a brief explanation regarding the consent form and survey prior to asking for their participation. During the explanation of the research, it was emphasized that participation was completely voluntary. The consent forms and surveys were then passed out. Upon completion of the survey or decision not to participate in the survey, the participants placed their consent to participate forms and surveys in two separate boxes prior to leaving the room. This was done to ensure that the researcher did not know who had completed a particular survey or who had chosen not to participate in the survey.

**Data Analysis**

The data gathered was coded, entered and analyzed using the statistical package SPSS. The researcher entered the information into SPSS for statistical testing and analysis purposes. Frequency distributions of the independent and dependent variables were first described. Cross-tabulations and chi-square tests were also performed to compare the various independent and dependent variables. The open-ended question in the survey was analyzed by transcribing the information and determining the common themes. All of the responses to the open-ended question were transcribed and the content was reviewed until consistent themes emerged that could be coded, entered and analyzed on the computer (Rubin & Babbie, 2008).

**Protection of the Human Subjects**

Prior to administering the survey and gathering the data, a human subjects application was submitted for approval to the California State University, Sacramento Division of Social Work committee for the Protection of Human Subjects. The study was
approved as a minimal risk study. The anticipated risk or harm in the purposed research was no more than what is normally encountered in daily life or during the performance of routine physical or psychological examinations or tests. A letter from the assistant executive director of the agency was also provided to verify the agency’s support of the study.

Informed consent was obtained from each participant (Appendix B). The informed consent explained the purpose of the survey, the procedures, risks, benefits, compensation, and their right to not complete the survey or stop participating in the survey at any time. The consent form also indicated that confidentiality would be upheld in order to protect their privacy. The participants consented by signing the consent form.

Confidentiality was upheld by not collecting names or identifying information. The completed consent forms were stored separately from the surveys during the duration of the project and were only available to the researcher and her thesis advisor. The data will be destroyed approximately one month after the project is filed with Graduate Studies at California State University, Sacramento or June of 2011.

Summary

This chapter focused on the quantitative methods that were used in this research study. The study population was described as well as how the sample population was determined. Next, this chapter explained the research design, variables, the quantitative questionnaire, data collection procedures, data analysis, and the measures taken to ensure the protection of human subjects. The results of the data will be analyzed and discussed in the next chapter.
Chapter 4

DATA ANALYSIS

Introduction

This chapter examines the results of the survey. The demographics of the respondents will be examined followed by the responses of the participants as to how knowledgeable residential treatment facility employees are about the policies and procedures of their agency as well as how helpful the pre-employment training was in educating these employees on the policies and procedures. The responses of the three open-ended questions pertaining to dress code policies, conducting groups in the houses, and things employees wished had been covered during pre-employment training will also be discussed.

Demographics

A total of 31 full-time residential treatment staff participated in this study. In order to gain agency approval to conduct this study, this writer was unable to gather any identifying information from the participants who responded such as age, gender, or ethnicity. According to company policy stating an employee must be twenty-one years of age or older, this writer can deduce that all participants were at least twenty-one years old or older. The population studied consisted of full-time employees, working a minimum of 35 hours a week and were classified as residential treatment staff. No supervisors were included in this study. Of the 31 participants surveyed, 41.9% had been working with the agency for less than 1 year (Table 1).
Table 1

Demographics of Study Participants in Percents (N=31)

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Less than 1 Year</td>
<td>13</td>
<td>41.9</td>
<td>41.9</td>
<td>41.9</td>
</tr>
<tr>
<td>More than 1 Year</td>
<td>18</td>
<td>58.1</td>
<td>58.1</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Research Question One: How knowledgeable are residential treatment facility employees about the policies and procedures of their agency?

The following sections will examine how knowledgeable employees are with regard to agency policies and procedures based on specific policies and procedures with the highest reported levels of knowledge to the least reported levels of knowledge.

Policy One: knowledge of medical policies. Of the five main agency policies tested for in this study, medical policies were among the highest rated with regard to employee knowledge. Twenty-eight of the thirty-one participants (90.3%) agreed that they understood all agency medical policies (Table 2). When attempting to determine the relationship between those that did not understand all agency medical policies and the participants’ satisfaction level with pre-employment training chi-square tests were found not significant because there were cells that had an expected count less than five.
Table 2

Knowledge of Medical Policies in Percents (N=31)

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Knowledgeable</td>
<td>28</td>
<td>90.3</td>
<td>90.3</td>
<td>90.3</td>
</tr>
<tr>
<td>Not Knowledgeable</td>
<td>3</td>
<td>9.7</td>
<td>9.7</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Policy Two: comfort level in giving out consequences. Participants described a high level of comfort in giving out consequences for behavior compliance issues, with 90.3% agreeing that they were comfortable with this policy (Table 3). When attempting to determine the relationship between those that did not feel comfortable giving out consequences and the participants’ satisfaction level with pre-employment training, the chi-square test results were found not significant because there were cells that had an expected count less than five.

Table 3

Comfort Level with Consequences in Percents (N=31)

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Comfortable</td>
<td>28</td>
<td>90.3</td>
<td>90.3</td>
<td>90.3</td>
</tr>
<tr>
<td>Not Comfortable</td>
<td>3</td>
<td>9.7</td>
<td>9.7</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>
Policy Three: knowledge of the dress code policy. As with medical policies and giving out consequences, 90.3% of participants stated they understood the dress code policies (Table 4). Based off of an open-ended question, five participants mentioned parts of the dress code policy that are unclear. The most common unclear aspect of the dress code policy pertained to what was deemed acceptable for a resident to wear as part of their school uniform, with 3 of the 5 participants (60%) stating they needed clarification on “appropriate school dress code.” When attempting to determine a relationship between knowledge of dress code policy and the participants’ satisfaction level with pre-employment training chi-square test results were found not significant because there were cells that had an expected count less than five.

Table 4

Knowledge of Dress Code Policy in Percents (N=31)

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Knowledgeable</td>
<td>28</td>
<td>90.3</td>
<td>90.3</td>
<td>90.3</td>
</tr>
<tr>
<td>Not Knowledgeable</td>
<td>3</td>
<td>9.7</td>
<td>9.7</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Policy Four: knowledge of level system. When looking at how knowledgeable participants were with the level system, 83.9% stated they understood the level system (Table 5). Comparing participants’ knowledge of level systems with their knowledge of primaries, 92.3% stated that they were knowledgeable about both level systems and
primaries (Table 6). Seventeen participants (65.4%) stated that they were knowledgeable about the level system as well as all other policies. This is slightly lower than the 73.1% of participants who stated that they were knowledgeable about the level system as well as all other procedures. Of the participants who stated they understood the level system, 65.4% wished that they had received more in home training prior to employment. Lastly, 61.5% agreed they had knowledge of the level system as well as feeling as though they did not need more time to review the policies and procedures manual (P&P). Chi-square test results were found not significant in any comparisons because there were cells that had an expected count less than five.

Table 5

Knowledge of Level System in Percents (N=31)

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Knowledgeable</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledgeable</td>
<td>26</td>
<td>83.9</td>
<td>83.9</td>
<td>83.9</td>
</tr>
<tr>
<td>Not Knowledgeable</td>
<td>5</td>
<td>16.1</td>
<td>16.1</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>
Table 6

*Knowledge of Level System Compared to Other Variables in Percents (N=26)*

<table>
<thead>
<tr>
<th>Knowledge of Level System and Knowledge of Primaries</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>92.3%</td>
<td>7.7%</td>
</tr>
<tr>
<td>Knowledge of Level System and Knowledge of Policies</td>
<td>65.4%</td>
<td>34.6%</td>
</tr>
<tr>
<td>Knowledge of Level System and Knowledge of Procedures</td>
<td>73.1%</td>
<td>26.9%</td>
</tr>
<tr>
<td>Knowledge of Level System and Wanted More In Home Training</td>
<td>65.4%</td>
<td>34.6%</td>
</tr>
<tr>
<td>Knowledge of Level System and Do Not Need Time to Review P&amp;P</td>
<td>38.5%</td>
<td>61.5%</td>
</tr>
</tbody>
</table>

*Policy Five: having read the entire handbook.* This policy was rated the lowest among participants with regards to actually completing. It is agency policy for all new employees to read through the company handbook. Only 67.7% of participants stated they had read the handbook thus complying with agency policy (Table 7). Comparing participants who read the entire handbook to other policies and procedures, the following was found: 90.5% of participants who read the employee handbook also had knowledge of the level system; 85.7% had knowledge of conducting primaries; 66.7% had knowledge of all other policies; 71.4% had knowledge of all other procedures; 66.7% wished they had had more in home training; and 23.8% stated they did not need more time to review the P&P prior to employment (Table 8). Chi-square test results were
found not significant in any comparisons because there were cells that had an expected count less than five.

Table 7

*Employee Handbook in Percents (N=31)*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Read</td>
<td>21</td>
<td>67.7</td>
<td>67.7</td>
<td>67.7</td>
</tr>
<tr>
<td>Did Not Read</td>
<td>10</td>
<td>32.3</td>
<td>32.3</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Table 8

*Employee Handbook Compared to Other Variables in Percents (N=21)*

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Read Employee Handbook and Knowledge of Level System</td>
<td>90.5%</td>
<td>9.5%</td>
</tr>
<tr>
<td>Read Employee Handbook and Knowledge of Primaries</td>
<td>85.7%</td>
<td>14.3%</td>
</tr>
<tr>
<td>Read Employee Handbook and Knowledge of Policies</td>
<td>66.7%</td>
<td>33.3%</td>
</tr>
<tr>
<td>Read Employee Handbook and Knowledge of Procedures</td>
<td>71.4%</td>
<td>28.6%</td>
</tr>
<tr>
<td>Read Employee Handbook and Wanted More In Home Training</td>
<td>66.7%</td>
<td>33.3%</td>
</tr>
<tr>
<td>Read Employee Handbook and Do Not Need Time to Review P&amp;P</td>
<td>23.8%</td>
<td>76.2%</td>
</tr>
</tbody>
</table>
Procedure One: knowledge of active supervision. Of the five main agency procedures tested for in this study, knowledge of active supervision was among the highest rated with regard to employee knowledge. Thirty-one of thirty-one participants (100%) agreed that they understood all agency active supervision procedures. It was not possible to determine the relationship between those that did not understand all agency active supervision procedures and the participants’ satisfaction level with pre-employment training since 100% of participants agreed that they understood active supervision.

Procedure Two: knowledge of code greens. Participants described a high level of knowledge in being able to follow code green procedures, with 100% agreeing that they were knowledgeable with this procedure. It was not possible to determine the relationship between those that did not feel knowledgeable with calling code greens and the participants’ satisfaction level with pre-employment training since 100% of participants agreed that they understood code green procedures.

Procedure Three: knowledge of no-touch procedure. Participants also described a high level of comfort in being able to follow no-touch procedures, with thirty participants (96.8%) agreeing that they were comfortable with this procedure (Table 9). When attempting to determine the relationship between those that did not feel comfortable with following no-touch procedures and the participants’ satisfaction level with pre-employment training the chi-square test results were found not significant because there were cells that had an expected count less than five.
Table 9

Knowledge of No Touch Procedure in Percents (N=31)

<table>
<thead>
<tr>
<th>Knowledgeable</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid</td>
<td>30</td>
<td>96.8</td>
<td>96.8</td>
<td>96.8</td>
</tr>
<tr>
<td>Not Knowledgeable</td>
<td>1</td>
<td>3.2</td>
<td>3.2</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Procedure Four: knowledge of house group procedures. Participants described being knowledgeable in being able to conduct house groups, with 90.3% agreeing that they had high levels of knowledge with regard to this procedure (Table 10). Based off of the open-ended question, four participants listed aspects of house group procedures that were unclear to them. All four participants (100%) stated that house group procedures are inconsistent, with one participant elaborating that it is not understood what topics are appropriate to be discussed during certain groups. Chi-square test results were found insignificant because there were cells that had an expected count less than five.
Table 10

Knowledgeable in Conducting House Groups in Percents (N=31)

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Knowledgeable</td>
<td>28</td>
<td>90.3</td>
<td>90.3</td>
<td>90.3</td>
</tr>
<tr>
<td>Not Knowledgeable</td>
<td>3</td>
<td>9.7</td>
<td>9.7</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Procedure Five: knowledge of conducting primaries. Participants described being knowledgeable in conducting primaries, with 26 participants (83.9%) stating they felt knowledgeable in conducting primaries and 5 participants (16.1%) stating they did not feel knowledgeable with this procedure (Table 11). Comparing participants who had knowledge of conducting primaries to other policies and procedures, the following was found: 61.5% of participants who had knowledge of conducting primaries also had knowledge of all other policies; 73.1% had knowledge of all other procedures; 69.2% wished they had had more in home training; 42.3% stated they did not need more time to review the P&P prior to employment (Table 12). Chi-square test results were found not significant in any comparisons because there were cells that had an expected count less than five.
Table 11

*Knowledge of Conducting Primaries in Percents (N=31)*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Knowledgeable</td>
<td>26</td>
<td>83.9</td>
<td>83.9</td>
<td>83.9</td>
</tr>
<tr>
<td>Not Knowledgeable</td>
<td>5</td>
<td>16.1</td>
<td>16.1</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Table 12

*Knowledge of Conducting Primaries Compared to Other Variables in Percents (N=26)*

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge of Primaries and</td>
<td>61.5%</td>
<td>38.5%</td>
</tr>
<tr>
<td>Knowledge of Policies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge of Primaries and</td>
<td>73.1%</td>
<td>26.9%</td>
</tr>
<tr>
<td>Knowledge of Procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge of Primaries and</td>
<td>69.2%</td>
<td>30.8%</td>
</tr>
<tr>
<td>Want More In Home Training</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge of Primaries and</td>
<td>42.3%</td>
<td>57.7%</td>
</tr>
<tr>
<td>Do Not Need Time to Review P&amp;P</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Research Question Two: How helpful was the pre-employment training in educating employees on the policies and procedures they must follow?

The following sections will examine how satisfied employees are with regard to pre-employment training on the policies and procedures they must follow with the highest reported levels of satisfaction to the least reported levels of satisfaction.

Pre-Employment Training One: satisfaction of pre-employment training. Surprisingly, 100% of participants stated that they were satisfied with the pre-employment training they received. Due to the lack of variable variation, this writer could not compare this variable to other variables tested through chi-square testing.

Pre-Employment Training Two: feeling knowledgeable about procedures at the end of training. Despite participants unanimously agreeing that they were satisfied with their pre-employment training, only 23 participants (74.2%) stated that upon completion of training they felt knowledgeable with agency procedures (Table 13). Comparing participants who stated they felt knowledgeable about procedures at the end of training to other variables, the following were found: 56.5% also wished they had received more in home training and 39.1% stated they did not need more time to review the P&P manual (Table 14). Chi-square test results were found not significant because there were cells that had an expected count less than five.
Table 13

*Procedure Knowledge after Training in Percents (N=31)*

<table>
<thead>
<tr>
<th>Valid Knowledgeable</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledgeable</td>
<td>23</td>
<td>74.2</td>
<td>74.2</td>
<td>74.2</td>
</tr>
<tr>
<td>Not Knowledgeable</td>
<td>8</td>
<td>25.8</td>
<td>25.8</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Table 14

*Knowledge of Procedures Compared to Other Variables in Percents (N=23)*

<table>
<thead>
<tr>
<th>Knowledge of Procedures</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>And Wanted More In Home Training</td>
<td>56.5%</td>
<td>43.5%</td>
</tr>
<tr>
<td>And Do Not Need Time to Review P&amp;P</td>
<td>39.1%</td>
<td>60.9%</td>
</tr>
</tbody>
</table>

*Pre-Employment Training Three: employee wish to have more in home training.*

Of the 31 participants studied, 20 participants (64.5%) agreed that they wished they could have had more in home training prior to employment (Table 15). Chi-square test results were found not significant because there were cells that had an expected count less than five.
Table 15

_Wish to Have More In Home Training in Percents (N=31)_

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid</td>
<td>Agree</td>
<td>20</td>
<td>64.5</td>
<td>64.5</td>
</tr>
<tr>
<td></td>
<td>Disagree</td>
<td>11</td>
<td>35.5</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
</tr>
</tbody>
</table>

*Pre-Employment Training Four: feeling knowledgeable about policies at the end of training.* Despite participants unanimously agreeing that they were satisfied with their pre-employment training, only 19 participants (61.3%) stated that upon completion of training they felt knowledgeable with agency policies (Table 16). Comparing participants who were knowledgeable about policies to other variables, the following was found: 94.7% were also knowledgeable about procedures; 42.1% wished they had had more in home training; and 31.6% stated they did not need more time to review the P&P (Table 17). Chi-square test results were found not significant because there were cells that had an expected count less than five.
Table 16

*Policy Knowledge after Training in Percents (N=31)*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid Knowledgeable</td>
<td>19</td>
<td>61.3</td>
<td>61.3</td>
<td>61.3</td>
</tr>
<tr>
<td>Not Knowledgeable</td>
<td>12</td>
<td>38.7</td>
<td>38.7</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Table 17

*Knowledge of Polices Compared to Other Variables in Percents (N=19)*

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge of Policies And Knowledge of Procedures</td>
<td>94.7%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Knowledge of Policies And Wanted More In Home Training</td>
<td>42.1%</td>
<td>57.9%</td>
</tr>
<tr>
<td>Knowledge of Policies And Do Not Need Time to Review P&amp;P</td>
<td>31.6%</td>
<td>68.4%</td>
</tr>
</tbody>
</table>

*Pre-Employment Training Five: needing to review the policies and procedures binder longer prior to employment.*  While only 61.3% of participants felt knowledgeable in policies (Table 16) and 74.2% felt knowledgeable in procedures (Table 13), 61.3% of participants disagreed, stating that they did not need more time to review the policies and procedures binder prior to employment (Table 18).  Chi-square test results were found not significant because there were cells that had an expected count less than five.
Table 18

Review Policies and Procedures Binder More in Percents (N=31)

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid</td>
<td>Agree</td>
<td>12</td>
<td>38.7</td>
<td>38.7</td>
</tr>
<tr>
<td></td>
<td>Disagree</td>
<td>19</td>
<td>61.3</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>31</td>
<td>100.0</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Open-Ended Question

The final question of the survey was an open-ended question that asked the participants to name up to three things that they wish had been covered during their pre-employment training. Two of the top things that participants wished had been better covered during their pre-employment training were related to training and consistency. The top wish that 76.2% of participants had was that they had received better training. The second wish, that there was better consistency within the agency to follow the same policies and procedures, was reported by 33.3% of participants. As each participant was able to list up to three wishes, there is some overlap in percentages, causing the total percentage between the top wish and the second highest wish to total more than 100%. The open-ended question allowed participants to elaborate on reasons why they did not feel as knowledgeable about the policies and procedures of the agency in hopes that the information received could be incorporated into future trainings.

Summary

This chapter examined the results of the survey. The demographics of the respondents were examined followed by the responses of the participants as to how
knowledgeable residential treatment facility employees were about the policies and procedures of their agency and how helpful the pre-employment training was in educating these employees on the policies and procedures. In the next chapter, a discussion on the results is presented.
Chapter 5

CONCLUSIONS

Introduction

This chapter summarizes the key data gathered in this study. The knowledge level of employees with regard to policies and procedures of the agency as well as how satisfied these employees were with their pre-employment training will be discussed. This chapter will also address the limitations of the study as well as implications of this study for social work. Lastly, recommendations for further research and for the agency being studied will be discussed.

Summary

Exploring how knowledgeable employees are on the policies and procedures of their particular agency upon completion of their current pre-employment training as well as how satisfied they were with the training received is vital for administrators of residential treatment facilities to know and understand in order for staff members to be properly trained to deal with the intense job atmosphere they will face. This study explored how knowledgeable employees were with the current policies and procedures of their agency as well as how satisfied they were with their pre-employment training. The results of the study revealed that employees have a high degree of knowledge of the policies and procedures of the agency and were satisfied with their pre-employment training.

Because of the limited number of participants in this study, chi-square test results were unable to be obtained due to cells having an expected count less than five. A
significant portion of participants stated they had a high level of knowledge of policies and procedures despite not having read the employee handbook. Most participants stated that while they did not need more time to review the policies and procedures manual, they did feel as though more in-home training would have been beneficial during their pre-employment training.

There were also a few surprising results. One hundred percent of participants stated that they were satisfied with the pre-employment training that they received during the multiple choice section of the survey. The second to last question was an open-ended question asking participants to state things they wish could be better. Seventy-six percent of the responses in the open-ended section included some way in which pre-employment training could be better. This discrepancy could be due to the fact that multiple choice questions can become tiresome for participants, as mention in Chapter 3.

Discussion

This study aims to distinguish which areas of pre-employment training are most and least effective for preparing employees to work in residential treatment facilities. This researcher compared different variables related to policies, procedures, and training satisfaction. When using the systems theory model to examine the findings, it can be noted that the findings and knowledge will be beneficial in educating administrators on how to create a successful training program for newly hired employees of this residential treatment facility for juvenile sex offenders.

According to research, well trained employees are vital for creating a safe atmosphere for residents (Baker & Price, 1997; Fernandez & Serran, 2002; Green, 1995).
Interestingly enough, every participant stated that they felt highly knowledgeable about the policies and procedures of the agency and was satisfied with the pre-employment training received. This is despite the fact that a large number of employees stated they wanted better pre-employment training in their response to the open-ended question. This may be due to the fact that a large majority of participants have worked with the agency for over a year and may have received their knowledge of policies and procedures through practice and not through the pre-employment training.

Other research suggests that employees be knowledgeable about behavioral interventions such as reward and consequence latter’s (Block, 2007). Essentially, employees need to understand what behavior constitutes rewards as well as what behavior deserves a consequence. Should a behavior deserve a consequence, employees need to follow the “latter” of consequences starting with the least punitive and increasing as the behavior continues. This study had similar findings that suggest that most participants felt comfortable using and giving out consequences for negative behavior. When employees are trained on how to use the consequence system appropriately, it can be highly effective in creating a positive and therapeutic treatment atmosphere (Block).

This researcher was attempting to find the relationship between training and employee knowledge. Research states that having clear philosophies or policies help to eliminate any confusion or manipulation that residents may try to use on staff in order to escape facing treatment (Baker & Price, 1997). Other research adds that having well trained staff with experience working with juvenile sex offenders is vital to creating a supervised and therapeutic environment (Baker & Price; Thomas, 2003). The results of
this study mimic the literature in that clearly the participants are being trained well enough to report having high levels of knowledge in all agency policies and procedures.

When looking at some of the findings from this study, a flaw with regard to the study design became apparent when there was a discrepancy between a multiple choice answer and an open-ended answer. As mentioned previously, 100% of participants stated they were satisfied with their pre-employment training despite 76% of participants stating that pre-employment training needed improvement. As Grinnell (1993) mentioned, close-ended questions can be problematic due to the limited amount of available responses given to the participant. It may have been that participants did not find any appropriate answer on the close-ended question and chose not to leave the question blank but rather answer in a perceived desirable way. This researcher was happy to have included an open-ended question where participants were free to discuss any important issues as is recommended by Rubbin and Babbie (2008).

**Limitations**

The limitations of this study include the number of participants (N=31), the limited number of variables addressing knowledge level of policies and procedures, and the collection method. The findings of this study cannot be generalized to larger populations due to the fact that there were a small number of participants. This study only looks at pre-employment training as a factor leading employees being unknowledgeable about policies and procedures of their agency and does not address any other factors.
There is no analysis of any personnel’s demographical data due to the restrictions placed on this researcher by the participating facility in order to be able to conduct the research and protect the privacy of the employees. The researcher’s bias could have also affected the design of the study, data collection and analysis as the researcher was interning at the participating agency at the time of the study.

Also, this study is based on a limited sample from one specific agency specializing in residential treatment of male juvenile sex offenders. In order to continue researching on this topic, the study needs to be duplicated and applied to a larger population that could be much more representative. It would be important for future research to utilize a representative probability sampling method.

Implications

This study has implications for social work policy and practice. Though there is some research on training employees who work in residential treatment facilities, there is hardly any information on facilities specializing in juvenile sex offenders. It is this researcher’s hope that the information presented in this study will be acknowledged by others and further research will be done on how and what to train newly hired employees working in residential treatment facilities for juvenile sex offenders.

On a micro level, employees need to advocate for adequate training that fully prepares them for their work environment, especially when working with a difficult population. If employees of residential treatment facilities were being advocates for themselves, the likelihood of facing burnout would be minimal and the feelings of being supported and cared for by their place of employment would be higher. It would also be
beneficial to the residents that staff understands their internal and external motivations for working with this particular population.

On a mezzo level, the findings within in this study can help administrators of the agency examined find alternative methods of training that may be more beneficial to newly hired employees. Also, administrators can become aware of what has been working and what has not been working with regard to their policies and procedures for new employees. It is important to note that the policies and procedures the agency has created are consistent with the research in creating and maintaining a safe working atmosphere for staff.

When looking at the macro level, state and federal policies could examine this research as well as similar research prior to making funding decisions. Non-profit agencies have limited access to resources that for-profit agencies are able to utilize. This decrease in funding can affect the amount and type of trainings offered to employees. New policies could be put in place to help non-profit agencies cover the cost of professional trainings vital for the target population.

**Recommendations**

The purpose of this study was to explore the knowledge level of employees working at a residential treatment facility for juvenile sex offenders as well as how beneficial they thought the pre-employment training was. The following is a list of recommendations for future research and social workers as well as recommendations for the agency in this study:

*Future Research*
• More research could be done on effective training techniques for newly hired employees in residential treatment facilities specifically focusing on the treatment of male juvenile sex offenders.

• It is imperative to demand agencies to properly train and hire competent employees so that issues such as what occurred in the Texas group home mentioned in a previous chapter do not occur.

• As social workers, it is vital to advocate for policies that will be beneficial to employees of residential treatment facilities as well as for policies that will benefit the residents in these facilities.

• As social workers, it is also important to advocate for funding for residential treatment facilities and they are a necessity in treating juveniles who have a problem and rehabilitating them to lead normal and successful lives. Without the option to have treatment, juveniles could be lost to the juvenile justice center where they could encounter more legal problems.

  
  
  Agency

• A unified training program could be created to ensure that all newly hired employees are trained the same way. This would decrease the amount of deviation there currently is between knowledge level of newer employees and employees that have been with the company longer.

• Some type of test or other measurable instrument needs to be created for both the employee handbook and the policies and procedures manual. This test should be
given prior to converting from pre-employment training to full time work and newly hired employees could be required to pass the test and assure administrators that the employee has actually read the material.

- Once a test has been created, administrators could determine what the appropriate test score would need to be for an employee to be allowed to work directly with clients and offer opportunities for those who do not pass the test to go back and train for longer.

- Based off of open-ended questions received from the participants, the agency could incorporate more in-home training. This type of training allows for the new employee to fully integrate the material with a trainer present as well as to fully comprehend his or her duties prior to working full time.

**Conclusions**

The primary purpose of this study was to examine how knowledgeable employees of a residential treatment facility for male juvenile sex offenders were in the policies and procedures of their agency. The second purpose was to determine how helpful the pre-employment training was in preparing them to work. The findings from this study suggest that while employees are highly knowledgeable about the policies and procedures of the agency, the knowledge most likely stems from work experience with the company rather than through their pre-employment training. Future research could examine how length of employment affects knowledge levels or how practical work experience has been beneficial in increasing knowledge of agency policies and procedures. This study needs to be duplicated in order to validate the findings.
APPENDIX A

Survey Questionnaire
Survey

The following questions will address your current knowledge of policies and procedures at ______________. Please circle the most appropriate response according to what you believe is your current understanding of the policies and procedures.

1. I understand ALL Medical Policies (PRN; psychotropic meds; Med Designee; etc.)
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

2. I understand the concept of Active Supervision
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

3. I understand the level system (promoting; demoting; blocks; privileges; etc.)
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

4. I feel comfortable giving out consequences to residents for behavior compliance issues when necessary
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

5. I understand ALL facets of the dress code policy
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

What facets of the dress code policy do you NOT understand?

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________
6. I understand the differences between calling a Code Green and a Code Red
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

7. I understand basic concepts for ALL house groups
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

   What concepts for house groups do you NOT understand?
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

8. I feel comfortable in my ability to conduct primaries
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

9. I have read the entire employee handbook
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

10. I understand what it means to be a “no-touch” facility
    a. Strongly agree
    b. Agree
    c. Disagree
    d. Strongly disagree
The following questions will address your satisfaction level regarding your pre-
employment training at __________. Please answer the questions according to how
you felt after completing the 40 hours of in-home training.

1. I was satisfied with the pre-employment training I received
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

2. I felt knowledgeable of ________’s policies at the end of my training
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

3. I felt knowledgeable of ________’s procedures at the end of my training
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

4. I wish I had had more in-home training prior to employment
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree

5. I wish I had had more time to look over the policies and procedures binder prior
to beginning employment
   a. Strongly agree
   b. Agree
   c. Disagree
   d. Strongly disagree
6. Please list three things you wish had been covered during your pre-employment training:
   a. ______________________________________________________________
      ______________________________________________________________
      ______________________________________________________________
   b. ______________________________________________________________
   c. ______________________________________________________________
      ______________________________________________________________

7. How long have you been employed at ________?
   a ___Less than 1 years
   b ___More than 1 years
APPENDIX B

CONSENT TO PARTICIPATE IN RESEARCH FORM
Consent to Participate in Research

You are invited to participate in a research study that will be conducted by Tracy Wilson, a Master of Social Work student at the Division of Social Work, California State University, Sacramento. This study will explore the knowledge level of current employees regarding policies and procedures of juvenile residential treatment facilities.

Procedures:
After reviewing this form and agreeing to participate you will be given a survey containing multiple choice and fill-in questions. The survey should take approximately ten to fifteen (10-15) minutes to complete. The survey is confidential and no names will be recorded.

As a participant in the survey you can decide to stop taking the survey at any time and not answer or skip any specific questions.

Risks:
The discussion of some of the topics on the survey may illicit some emotional responses such as disappointment or even personal inadequacy as you consider how much knowledge you have of the policies and procedures of your company. If needed, you can contact Sacramento County Access Team at 916-875-9980, for free mental health referrals.

Benefits:
Your completion of this survey may help administrators understand how knowledgeable their employees are on the policies and procedures of this juvenile residential treatment facility. In addition, by being a part of this study, you may also gain personal insight into how knowledgeable you are about the policies and procedures of your company.

Confidentiality:
All information is confidential and every effort will be made to protect your privacy. Your responses on the survey will be kept confidential. Information you provide on the consent form will be stored separately from the completed surveys in a locked cabinet in a secure location at the researcher’s home. The researcher’s thesis advisor will have access to the completed surveys for the duration of the project. The final research report will not include any identifying information. All of the data, including every completed survey, will be destroyed approximately one month after the project is filed with Graduate Studies at California State University, Sacramento.

Compensation:
Participates will not receive any kind of fiscal compensation.

Rights to withdraw:
If you decide to participate in this survey, you can withdraw at any point. During the survey, you can elect to skip or not to answer any specific question or stop at any time.
If you have any questions you may contact the researcher, Tracy Wilson, via e-mail at XXXXXXX@yahoo.com. Or, if you need further information, you may contact the researcher’s thesis advisor:

Maria Dinis, Ph.D., MSW  
Division of Social Work  
(916) 278-7161  
dinis@csus.edu
Consent to Participate as a Research Subject

I have read the descriptive information on the Research Participation cover letter. I understand that my participation is completely voluntary. My signature or initials below indicate that I have received a copy of the Research Participation cover letter and I agree to participate in the study.

Signature or Initials: _____________________________ Date: __________

If you have any questions you may contact the researcher, Tracy Wilson, at XXXXXX@yahoo.com.

Or, if you need further information, you may contact the researcher’s thesis advisor:

Maria Dinis, Ph.D., MSW
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References


