

# Savannah Family Institute

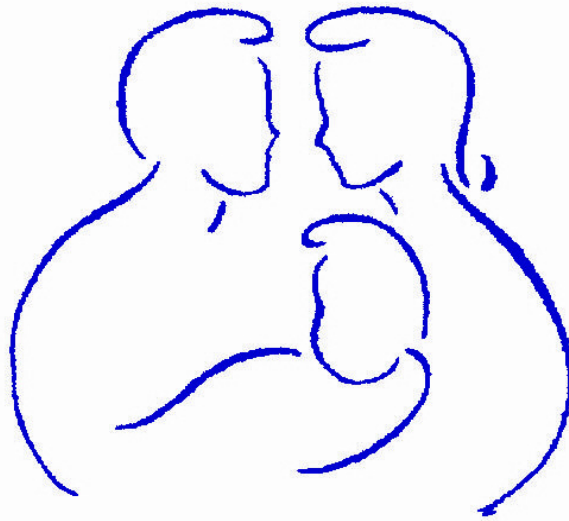
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*Helping Professionals, Parents, and Tough Teens Find Solutions*

## ***Parenting with Love and Limits®***

**CENTER OF EXCELLENCE**

**OPERATIONS MANUAL**



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# TABLE OF CONTENTS

Introduction to SFI Center of Excellence Manual .....	1
SFI VISION .....	1
SFI MISSION .....	1
Pre-Operations Plan.....	2
Post-Operations Plan .....	7
Appendix A: Financial <i>pro forma</i> .....	10
Appendix B: Job Descriptions .....	13
Appendix C: Outcome Measure Procedures .....	17
Appendix D: Sample Referral Form.....	19
Appendix E: Four Day Certification Training Agendas .....	20
Appendix F: Recommended Props for PLL Group Therapy Classes .....	25
Appendix G: Button Buster Script.....	26

# **SFI CENTER OF EXCELLENCE OPERATIONS MANUAL**

## **INTRODUCTION**

This manual is designed to assist the SFI Center of Excellence with the step-by-step directives necessary to successfully implement the *Parenting with Love and Limits*<sup>®</sup> (PLL) System of Care, including both PLL Group Therapy and follow-up PLL Individual Family Therapy aftercare programs for oppositional defiant, substance abuse, and conduct disordered children and teens who may be referred by local Juvenile Court and Probation Departments.

It is important that the directives defined in this operations manual be adhered to as closely as possible to help assure positive treatment outcomes. It is the role of the Savannah Family Institute assigned program supervisor to assist the Center of Excellence staff to be successful in implementing the PLL System of Care.

## **THE SFI VISION**

The U.S. Census Bureau estimates that eleven million teenagers go beyond normal adolescent rebellion to engage in out of control or extreme behavior. To stop this epidemic, Savannah Family Institute (SFI) presents a “love and limits” approach that is unlike anything else currently available.

A review of the ongoing research shows that the adjudicated adolescents will avoid returning to delinquent acts if their parents improve in the areas of limit setting, emotional connections, and improved communication (Williams & Chang, 2000). However, instead of empowering parents to take charge of the problem, juvenile justice has primarily focused on the individual youth. SFI firmly believes that parents can be empowered to take charge of their youths’ problem behaviors and substance abuse when given the right playbook and set of tools.

## **THE SFI MISSION**

SFI’s mission is to be the best system of care prevention provider, using the PLL System of Care to empower parents of difficult and defiant children and teens in juvenile justice systems through SFI Centers of Excellence.

## PRE-OPERATIONS PLAN

Below is a list of steps that the Center of Excellence (COE) will need to complete before implementing the PLL System of Care and before we conduct the 5-day Center of Excellence Certification training with your staff. An SFI Program Supervisor will be assigned to you as the point person and will form the advance team that will personally visit your site to directly assist with the successful implementation of the pre-operation steps.

### **STEP ONE: DETERMINE THE SPECIFIC SERVICE DELIVERY TARGET AREA.**

As a Center of Excellence, you need to determine the service area where you will implement the PLL System of Care. The following criteria are recommended to help you determine your service delivery target area:

1. Population size of the county where your agency is located. Those agencies in smaller counties or counties with sparse populations may wish to serve more than one county in their geographic region.
2. Driving distance from your agency location. It is recommended that you target a thirty to forty mile radius from your agency as your targeted areas unless your agency is located in a very rural area.

### **STEP TWO: DEFINE THE TARGET POPULATION FOR SFI SERVICES.**

The PLL System of Care is custom designed for all parents and caregivers of teenagers who fall into the out-of-control or extreme stage. PLL contains elements that can effectively treat a wide range of problem teens with different types of symptoms, such as substance abuse, depression, ADHD, mental illness, and extreme problem behaviors exhibited in oppositional defiant and conduct disorders.

Recommended inclusionary criteria:

1. 11 – 17 years old
2. Most common DSM IV diagnosis: Oppositional Defiant, Conduct Disorder, Substance Abuse
3. Has shown two or more of the following behaviors consistently for longer than six months:

<input type="checkbox"/> Persistent and serious lying	<input type="checkbox"/> Ditching school repeatedly
<input type="checkbox"/> Physical cruelty to people or animals	<input type="checkbox"/> Stealing
<input type="checkbox"/> Running away repeatedly	<input type="checkbox"/> Bullying or threatening others
<input type="checkbox"/> Destruction of property	<input type="checkbox"/> Setting fires
<input type="checkbox"/> Threats of suicide	<input type="checkbox"/> Defying adult requests/rules
<input type="checkbox"/> Using or possessing weapons	<input type="checkbox"/> Sexual misconduct like rape
<input type="checkbox"/> Alcohol or drug abuse	<input type="checkbox"/> Quickly loses their tempers

### **❑ STEP THREE: DEFINE THE REFERRAL SOURCES FOR PLL SERVICES.**

The following are typical referral sources for PLL services:

1. Juvenile courts
2. Child protective services agencies
3. Junior and senior high schools
4. Self referrals from concerned parents
5. Mental health boards/committees
6. Insurance companies as a preferred provider for troubled adolescents

### **❑ STEP FOUR: DEFINE AND SOLIDIFY FUNDING SOURCES FOR PLL SERVICES.**

What will be your funding sources for PLL services?

1. Medicaid
2. Partial funding through juvenile court or child protective service agencies
3. Budget line item - Department of Juvenile Justice
4. Grant dollars
5. Private insurance
6. Private pay
7. Sliding fee scale payment

### **❑ STEP FIVE: DETERMINE THE NUMBER OF FAMILIES THAT YOUR AGENCY CAN FEASIBLY SERVE OVER THE NEXT 12 MONTHS AND DO AN INTERNAL RETURN ON INVESTMENT (ROI) AND COST OF CARE ANALYSIS.**

Appendix A contains a financial pro forma for a typical *Parenting with Love and Limits*<sup>®</sup> Center of Excellence, along with a listing of line item descriptions and important assumptions. SFI will provide you with an Excel<sup>®</sup> spreadsheet version of the *pro forma*. Please use the spreadsheet and the assumptions detailed in Appendix A to determine the number of families you will likely serve, the number of trained therapists you will need, and your resulting costs and financial returns from the PLL program. SFI will be happy to assist you in this analysis.

It is recommended that first year programs limit group size to six to eight youth until the treatment teams gain more experience. Our *pro forma* reflects this recommendation. However, we should point out that Centers of Excellence can run multiple PLL Group Therapy groups over the course of a week to meet the COE's targeted number of families served.

COE's will need to inform SFI how families will be served and the number of staff that will be used to provide the services.

**❑ STEP SIX: MAKE SURE THAT THE COUNSELORS IDENTIFIED TO CONDUCT PLL ARE MOTIVATED VOLUNTEERS AND THAT THEY MEET THE MINIMUM QUALIFICATION CRITERIA.**

You will WANT counselors who volunteer with a stated strong desire to use the PLL System of Care and to meet for supervision one hour per week, counselors who also do not mind constructive supervision feedback and who want to improve their overall clinical skills. The program will fail if the COE selects someone who is less than enthusiastic. **INTERNS ARE HIGHLY DISCOURAGED FROM APPLYING BECAUSE THEY ARE TRANSITIONAL, THEY ARE STILL IN TRAINING AND THEY LACK THE HIGH LEVEL OF SKILL NEEDED.**

Two counselors are needed for each multifamily PLL group, plus you will need one or more master's level therapists to conduct the follow-up PLL Family Therapy for each family.

In recruiting staff, the following qualifications should be considered:

1. Master's level counselors to serve as the primary facilitator(s) of the PLL multifamily group therapy sessions and AFTERCARE PLL Family Therapy sessions.
2. The therapist should be licensed in your particular state so as to facilitate proper reimbursement for billed services.
3. Assistant group facilitators may have less than a master's level degree, but must be certified in the SFI model.

*Note: Licensed bachelor level therapists may be considered as potential primary group and family therapists if they can document clinical competency and experience. Each case will be considered on an individual basis and must be approved by the assigned SFI supervisor.*

*Note: A copy of proposed job descriptions for PLL therapists is found in Appendix B of this document.*

**❑ STEP SEVEN: DEFINE THE FACILITY WHERE THE PLL MULTI-GROUP THERAPY WILL OCCUR.**

Each PLL parenting group will require two rooms:

1. One room that can accommodate the teens, possibly some of their siblings and their parents. This room will need to comfortably accommodate approximately fifteen people. Tables are recommended.
2. A second room will be needed for the teen's breakout group sessions.

Rooms should be properly lit, properly cooled or heated, and void of unnecessary distractions. The location of the meeting place should be consistent from week to week.

**❑ STEP EIGHT: PURCHASE THE AUDIO/VISUAL EQUIPMENT NEEDED TO FACILITATE THE PLL MULTIFAMILY GROUP THERAPY SESSIONS.**

The following will be needed:

1. Two television sets, one for each of the two rooms.
2. Two video players, one for each of the two rooms.
3. Two white boards or flip charts, one for each of the two rooms.
4. One overhead projector or LCD machine and compatible computer with PowerPoint (2003 recommended).

**❑ STEP NINE: IT IS RECOMMENDED THAT A PROGRAM DIRECTOR FOR PLL SERVICES BE IDENTIFIED TO OVERSEE THE PROGRAM WITHIN THE AGENCY AND TO SERVE AS A POINT PERSON.**

This person should be trained in PLL and may be one of the facilitators. A proposed job description for the Director of PLL Services may be found in Appendix B of this document.

**❑ STEP TEN: AGENCY STAFF SHOULD BE SELECTED WHO WILL BE RESPONSIBLE FOR ORDERING/PROCURING REQUIRED PLL PROGRAM MATERIALS (BOOK, PARENT AND TEEN WORKBOOKS, AND SURVIVAL KIT WORKBOOK) THAT ARE REQUIRED FOR THE FACILITATION OF THE PLL MULTIFAMILY GROUPS AND INDIVIDUAL FAMILY COUNSELING. NOTE: THIS PERSON CAN ALSO BE THE PROGRAM DIRECTOR**

A proposed job description for this position may be found in Appendix B of this document.

**❑ STEP ELEVEN: DEFINE RESPONSIBLE PERSONNEL AND PROCEDURES FOR COLLECTION OF PRE-TREATMENT AND POST-TREATMENT OUTCOME MEASURES. NOTE: THIS PERSON CAN ALSO BE THE PROGRAM DIRECTOR**

SFI makes the following recommendations:

1. Two or three persons should be trained in the process of proctoring pre-test and post-test evaluation tools. Procedures should be clearly outlined. Recommended outcome measure tools, along with instructions for procuring outcome measures, can be found in Appendix C.
2. Dr. Thomas Smith, a research specialist at Florida State University, will oversee the pre-test and post-test outcome measure procedures and will work closely with your assigned program director.

Dr. Tom Smith's direct contact number is (850) 644-9555. His e-mail address is [tsmith@mailers.fsu.edu](mailto:tsmith@mailers.fsu.edu)

**❑ STEP TWELVE: DEFINE THE PROCEDURES AND FORMS THAT WILL BE USED FOR MAKING A REFERRAL FOR YOUR PLL PROGRAM.**

SFI makes the following recommendations:

1. A referral procedure should be developed in consultation with each of your primary referral sources. The procedure should be clear, simple, and easy for the referring agency to execute.
2. Responsible staff should be identified for the referring agency.
3. The Center of Excellence staff responsible for receiving the referral should be clarified.
4. A referral form should be developed and made available to each referral source.

*Note: A sample referral form can be found in Appendix D.*

**❑ STEP THIRTEEN: ORGANIZE DATES AND TIMES FOR PLL CERTIFICATION TRAINING**

PLL certification training requires four full days of intensive training. All therapists and counselors must successfully complete certification training to be permitted to facilitate the PLL System of Care. Training dates must be cleared with Savannah Family Institute and will be facilitated by a certified SFI therapist.

A complete agenda for the four-day certification training may be found in Appendix E.

**❑ STEP FOURTEEN: ESTABLISH A SUPERVISION SCHEDULE WITH YOUR ASSIGNED SFI SUPERVISOR.**

Each Center of Excellence is required to have the following regimen of supervision.

1. Four hours of phone conference supervision per month for ten months of the year.
2. Scheduled Booster Training Sessions in the second and following years.

Supervision will follow the PLL Group Therapy and PLL Family Therapy supervision manuals. Your SFI supervisor will help you set up and implement the SFI supervision model.

**❑ STEP FIFTEEN: IMPLEMENT A MARKETING PLAN FOR PLL SERVICES IN YOUR COMMUNITY USING THE MARKETING TOOLS PROVIDED FOR YOU.**

1. Marketing strategy
  - a. Identify the primary referral sources to your PLL program
  - b. Personalize the SFI brochure to your agency and have professionally printed. (Note: SFI is able to provide customized SFI brochures for your agency upon request at fair market prices.) A free brochure template is provided upon request.



2. Schedule Groups and Establish Start Date
3. Organize and schedule key stakeholder meetings and present an overview of PLL using the materials provided for you. You may choose to complete this step with individual stakeholders or with a group of stakeholders.
4. Distribute brochures for parents to referring agencies so that they can hand them out to perspective parents. Replenish these PLL brochures when needed.
5. Confirm and clarify the referral procedures with each referring agency.

## **POST-OPERATIONS PLAN**

After the pre-operation steps are completed and the initial four-day certification training is completed, the Center of Excellence will be ready to implement the PLL System of Care and start seeing clients. To assist in this implementation the following post-operational steps are recommended:

### **☐ STEP ONE: COMPLETE THE FOLLOWING OPERATIONAL STEPS IN ADVANCE OF EACH PLL GROUP**

1. Make sure that each room is properly prepared with seating and audiovisual equipment.
2. Make sure that all PLL group materials are at the group site in the proper quantity for group participants.
3. Make sure that all needed props are present for the PLL group(s). A list of these props can be found in Appendix F.
4. Make sure that nametags and ink markers are present for each group participant.
5. Make sure that attendance sign in sheet is available for each group.
6. All parents scheduled to begin group should be called twenty-four to forty-eight hours in advance of the start of the group to encourage them and remind them concerning the start of their group

### **☐ STEP TWO: OPERATIONAL GUIDELINES FOR PLL GROUPS**

1. Group facilitators should be present fifteen minutes early for each group and greet participants as they arrive.
2. Have each group participant sign in on the attendance sheet
3. Have each group participant fill out and wear a name tag.
4. Start the group on time each week.
5. Follow the PLL Group Therapy Leader's Guide, adhering as closely as possible to recommended time frames.
6. End each group session on time.
7. Pass out the PLL Parent and Teen workbooks and the paperback book, Parenting Your Out-of-Control Teenager.

8. Cancel group sessions only when it is absolutely necessary. Canceling sessions will result in loss of momentum. If a session is cancelled, all group participants should be notified 24 hours in advance.
9. Pre-test measures are to be given before first group begins and post-test measures are to be given after the last parenting group and then again after the last family therapy session - See Appendix C.

### **□ STEP THREE: OPERATIONAL GUIDELINES FOR PLL FAMILY THERAPY**

1. Each family participating in the PLL Group Therapy should be assigned an SFI-certified family therapist to provide follow-up PLL Family Therapy.
2. These guidelines should be followed with regard to making family therapy assignments based upon carefully evaluated stress and risk factors:
  - a. Adolescents who are judged to be high risk should be immediately assigned to their family therapist, and should immediately begin receiving family therapy, even before they start group therapy.
  - b. Adolescents who are judged to be low to moderate risk must receive family therapy at the same time they are going through the PLL Group Therapy. For example, if the parent or caregiver does not engage in at least one individual coaching (i.e., PLL Family Therapy) before Class #3 of PLL Group Therapy, or at the very least by Class #5, the parent's motivation for participating in any aftercare is significantly reduced. This is because, having been exposed so far only to Group Therapy, they may have seen only small changes at this point. Or, they may falsely believe that the skills they acquired in group therapy will magically work without the need to address underlying family problems, such as marital discord, disagreement in parent philosophies, inconsistency, yelling, etc. When these new skills fail, the parent will feel more hopeless, and believe that nothing will work. Therefore, the COE must use the Button Buster script (See Appendix G) to integrate both PLL Group and Family Therapy together.
3. PLL Family therapy should be implemented and facilitated in accordance with the PLL Family Therapy Supervision Manual.
4. The number of family therapy sessions is seven to ten, depending upon the particular family need.
5. Counselors will use the Survival Kit with PLL Family Therapy. Each set of parents will receive a Survival Kit Study Guide (required) and optionally, a Survival Kit Video, to go with their copy of Parenting Your Out-of-Control Teenager they received in Group Therapy.



## Parent Survival Kit

- 1 Parenting Your Out-of-Control Teenager Book
- 1 Study Guide
- 1 7-Step Educational Video Series

Parents will use the study guide exercises to create their very own contract that is custom designed to work with their particular teenager. In this way, the book, the video, and the study guide work in tandem to maximize the parent's knowledge base and ability to quickly turn around their troubled teen.

6. At the time of discharge from PLL Family Therapy, the outcome measures are given to the family in accordance with the outcome measures protocol.

### **STEP FOUR: COLLECT, CORRELATE, AND PREPARE A PROGRAM OUTCOME RESEARCH DATA REPORT TO PRESENT TO JUVENILE COURT AND LOCAL COMMUNITY BOARDS AT 6 & 12 MONTH INTERVALS.**

*Note: It is imperative that outcome data be reported to primary stakeholders and referring agencies.*

Dr. Thomas Smith, a research specialist at Florida State University, will coordinate with your program director to analyze the data and help you prepare the research data reports.

Dr. Tom Smith's direct contact number is (850) 644-9555. His e-mail address is [tsmith@mailier.fsu.edu](mailto:tsmith@mailier.fsu.edu)

### **STEP FIVE: CONDUCT QUARTERLY MEETINGS WITH PRIMARY STAKEHOLDERS AND REFERRING AGENCY TO TROUBLESHOOT AND REFINE PROGRAM**

## APPENDIX A – FINANCIAL *pro forma*

Revenue Generated from PLL						
		Rates	Hours of Services		Rev/Youth	
1	Georgia	Medicaid Group Therapy Rate (per hr)	\$ 56.00	12	6 2-hr sess	\$ 672.00
2	Georgia	Medicaid Individual Therapy Rate (per hr)	\$ 87.00	12	8 1.5-hr sess	\$ 1,044.00
<b>Total Revenue for One Youth (w/Parents)</b>					<b>\$ 1,716.00</b>	

Agency Name <span style="background-color: yellow; padding: 2px;">Typical Agency</span>											
<i>pro forma for Parenting with Love and Limits®</i>											
3	# Youths per Group	6	8	6	8	6	8	6	8	6	8
4	# Therapists Required	2	2	2	2	4	4	6	6	8	8
5	Total # Youths Served	24	32	48	64	96	128	144	192	192	256
<b>Revenue:</b>											
6	85%	Medicaid	\$35,006	\$46,675	\$70,013	\$93,350	\$140,026	\$186,701	\$210,038	\$280,051	\$373,402
7	15%	Insurance/ Private Pay	\$6,178	\$8,237	\$12,355	\$16,474	\$24,710	\$32,947	\$37,066	\$49,421	\$65,894
8		Other funding									
9	Total Gross Revenue		\$41,184	\$54,912	\$82,368	\$109,824	\$164,736	\$219,648	\$247,104	\$329,472	\$439,296
10	15.0%	Allowance for Uncollectibles (% of PP)	(\$927)	(\$1,236)	(\$1,853)	(\$2,471)	(\$3,707)	(\$4,942)	(\$5,560)	(\$7,413)	(\$9,884)
11	<b>Net Revenue</b>		<b>\$40,257</b>	<b>\$53,676</b>	<b>\$80,515</b>	<b>\$107,353</b>	<b>\$161,029</b>	<b>\$214,706</b>	<b>\$241,544</b>	<b>\$322,059</b>	<b>\$429,412</b>
<b>Direct Cost:</b>											
12	\$ 25.00	<b>Therapist Wages</b>									
13		Group Therapy Hrs (12 hr/grp x 2 ther/grp)	\$2,400	\$2,400	\$4,800	\$4,800	\$9,600	\$9,600	\$14,400	\$14,400	\$19,200
14		Indiv. Therapy Hrs (8 sessions x 1.5 hr/sess)	\$7,200	\$9,600	\$14,400	\$19,200	\$28,800	\$38,400	\$43,200	\$57,600	\$76,800
15		Supervision Hrs. (3 hrs/ther/mo.)	\$1,800	\$1,800	\$1,800	\$1,800	\$3,600	\$3,600	\$5,400	\$5,400	\$7,200
16		Preparation Time (2hrs/ther/mo)	\$1,200	\$1,200	\$1,200	\$1,200	\$2,400	\$2,400	\$3,600	\$3,600	\$4,800
17	36.0%	<b>Employee Benefits</b>	\$4,536	\$5,400	\$7,992	\$9,720	\$15,984	\$19,440	\$23,976	\$29,160	\$38,880
18		<b>Material Cost</b>	\$1,296	\$1,728	\$2,592	\$3,456	\$5,184	\$6,912	\$7,776	\$10,368	\$13,824
19		<b>SFI License Fee</b> (Training-Supervision-Outcome Research)	\$15,000	\$15,000	\$15,000	\$15,000	\$21,120	\$28,160	\$31,680	\$42,240	\$56,320
20	<b>Total Direct Cost</b>		<b>\$33,432</b>	<b>\$37,128</b>	<b>\$47,784</b>	<b>\$55,176</b>	<b>\$86,688</b>	<b>\$108,512</b>	<b>\$130,032</b>	<b>\$162,768</b>	<b>\$217,024</b>
21	<b>Return on Revenue/Cont. to Overhead</b>		<b>\$6,825</b>	<b>\$16,548</b>	<b>\$32,731</b>	<b>\$52,177</b>	<b>\$74,341</b>	<b>\$106,194</b>	<b>\$111,512</b>	<b>\$159,291</b>	<b>\$148,683</b>
22	<b>ROR%-Return on Revenue</b>		<b>17.0%</b>	<b>30.8%</b>	<b>40.7%</b>	<b>48.6%</b>	<b>46.2%</b>	<b>49.5%</b>	<b>46.2%</b>	<b>49.5%</b>	<b>46.2%</b>

## APPENDIX A – FINANCIAL *pro forma* (continued)

### Key Assumptions

- Line 1:** In the yellow area, enter the Medicaid reimbursement rate for Group Therapy for your state. Line 1 will then calculate the revenue per youth for 6 two-hour sessions of PLL Group Therapy.
- Line 2:** In the yellow area, enter the Medicaid reimbursement rate for Individual Family Therapy for your state. This line will then calculate the revenue per youth for 8 1 ½ - hour sessions of PLL Family Therapy.
- Line 3:** It is recommended that first year programs limit group size to six to eight youth until the treatment teams gain more experience. Therefore, this line shows either 6 or 8 youths per group for all of the scenarios shown for varying numbers of total youth served. **Important: Group sizes of less than 6 youths will have a significant adverse effect on financial returns from the PLL program.**
- Line 4:** This line shows the number of trained therapists we typically train for the number of youths we expect to treat in a year. We arrive at this number based upon a very conservative assumption of 8 Group Therapy classes per year run by each pair of trained therapists. This rule does not apply when you fall below 48 youths served, because you must have a minimum of one pair of therapists to run groups. **Important: The numbers of therapists shown in this line, running only 8 Group Therapy classes per year, along with the attendant Family Therapy sessions, supervision time and preparation time (see Lines 13 through 16), only account for 26% of each therapist’s total work time. This means that these therapists can be assigned other duties aside from PLL, or that you can choose to dedicate larger percentages of each therapist’s time to PLL and have fewer PLL trained therapists.**
- Line 5:** This line shows a range of numbers of youth served.
- Line 6:** In the yellow area, enter the approximate percentage of your referrals who would be covered by Medicaid. This line then shows the total Medicaid revenue for the different numbers of youth served.
- Line 7:** When you enter your Medicaid percentage in Line 6, this line automatically assigns the remainder to “Insurance/Private Pay” and calculates the total revenue for same for the different numbers of youth served.
- Line 8:** This line is a “catch-all” to account for any other sources of funding, examples of which would include grants or subsidiary funding from state DJJ.
- Line 9:** This line totals up the total revenue from Medicaid, Insurance/Private Pay and Other Funding.
- Line 10:** In the yellow area, enter the approximate percentage of Insurance/Private Pay billings that are never collected. This line then calculates the total dollar amount that is not collected.
- Line 11:** This line corrects the revenue for the portion that is never collected, and represents the total actual annual income from the PLL program.
- Line 12:** In the yellow area, enter the average hourly wage for the therapists who will be trained to do PLL. **Important: The *pro forma* only charges the PLL program with the time the therapists spend on the PLL program. When calculating the financial returns**

**from PLL, it is assumed that the remainder of their time is charged against other projects.**

**Line 13:** This line calculates the cost for therapist wages for Group Therapy for the various numbers of youth served, taking into account that there are two therapists for each Group Therapy session.

**Line 14:** This line calculates the cost for therapist wages for individual Family Therapy for the various numbers of youth served.

**Line 15:** This line calculates the cost for therapist wages for the time they spend in telephone supervision with SFI (3 hours per month per therapist).

**Line 16:** This line calculates the cost for therapist wages for the time they spend in preparation for supervision and therapy (assumed to be 2 hours per month per therapist).

**Line 17:** In the yellow area, enter the employee benefits as a percentage of therapist wages. If the therapists are contractors, then this may be zero (0) %. This line will calculate the cost of therapist benefits for the therapist hours dedicated to PLL.

**Line 18:** This line calculates the total annual cost of PLL materials required for each youth served at \$54.00 per youth entering the program.

**Line 19:** This line calculates the annual license fee cost for the Center of Excellence, which is \$220.00 per youth entering the program, but not less than \$15,000 annually.

**Line 20:** This line totals up all direct costs for the PLL program, including Therapist Wages and Benefits, cost for PLL materials and PLL license fees.

**Line 21:** This line calculates the total annual profit (or contribution to overhead in the case of non-profit agencies) for the PLL program, subtracting the total direct costs in Line 20 from the total Net Revenue in Line 11.

**Line 22:** This line calculates the total annual profit or contribution to overhead, as a percentage of the total Net Revenue.

**Important: The assumptions we have made in the *pro forma* are representative of what we typically see in agencies like yours. However, these assumptions have a significant impact on the financial calculations. Therefore, if you have reason to believe that the reality of your situation is somehow very different from the assumptions we have detailed above, please contact us and let's work together to put together a more accurate pro forma for your agency.**

# APPENDIX B - JOB DESCRIPTIONS

## COUNSELORS - DIRECT SERVICE PROVIDERS FOR THE PLL SYSTEM OF CARE

### I. Definition

The COE counselors provide *Parenting with Love and Limits*® System of Care services for those clients referred to them in accordance with the PLL Group Therapy and Family Therapy Manuals.

### II. Responsible to:

The Executive Director of the Center of Excellence (COE)

### III. Qualifications

- A minimum of a Master's Degree in social work, psychology, marriage and family therapy or a counseling-related field.
- Licensed, certified or registered individuals as identified by appropriate licensing, certifying or registering bodies.
- Designated agency staff supervises the PLL Clinical Staff.
- Experience in in-home services preferred
- Knowledge in adolescent and family therapy required
- Effective written and oral communication
- Effective crisis intervention skills

### IV. Duties and Responsibilities

- Provides PLL System of Care in accordance with PLL Group Therapy and Family Therapy Manuals.
- Conducts thorough, accurate mental health assessments, documenting findings according to agency regulatory standards.
- Works hours established by the agency.
- Provides family education, skills, training, and individual, family and group therapy using the 15-step Parenting with Love and Limits® System of Care.
- Utilizes "active listening" techniques to help families de-escalate and begin setting priorities.
- Provides advocacy work with schools, court, and other social service agencies as needed.
- When appropriate, arranges for follow-up and ongoing case management after termination to ensure that referral to ongoing services occurs smoothly.
- Attends in-service training by employer and PLL Booster Trainings.
- Attends and participates in weekly case consultation sessions and business meetings as established the agency..
- Keeps thorough and up-to-date family records and charting.
- Cooperates in efforts to provide support and back-up for fellow therapists.

- Dresses appropriately per agency guidelines.
- Does necessary communication with insurance companies and funding agencies as needed.
- Assumes any other responsibilities as may be appropriate as directed by the Clinical Director.

#### **V. Organization Relationships**

- Works with the Clinical Director in the facilitation of effective PLL Services.
- Communicates with other agency staff for effective service to the community

#### **VI. Job Relationships**

Supervised by: Clinical Director, Executive Director

#### **VII. Orientation and Evaluation**

At least a three-week orientation under the supervision of the Clinical Director/Executive Director. Evaluated after a 90 day probationary period and annually thereafter by the Clinical Director/Executive Director.



## **SFI Program Director-Job Description**

### **I. Definition**

The purpose of the PLL Program Director is to assist the Clinical Director of this agency in the implementation and oversight of the PLL System of Care and its supporting staff.

### **II. Responsible to:**

The Clinical Director of this agency.

### **III. Qualifications**

- Trained and Certified in SFI's *Parenting with Love and Limits*<sup>®</sup> System of Care
- Experience in organizational and administrative skills highly desirable
- Computer skills needed
- Knowledge in adolescent and family therapy required
- Effective written and oral communication
- Effective crisis intervention skills

### **IV. Duties and Responsibilities**

#### **A. SFI Staff Recruitment**

1. Advertise
2. Interview
3. Schedule Training

#### **B. PLL Program Implementation.**

1. The PLL System of Care in accordance with PLL Group Therapy and Family Therapy Manuals.
2. New SFI Staff Orientation
  - a. Develop a protocol for orientation to the SFI System of Care
  - b. Oversee each person's orientation and be sure it is complete before assigning clinical duties

#### **C. Organize and plan for PLL Staff Certification and Booster Training(s) in concert with the assigned external Savannah Family Institute Program Consulting Supervisor.**

#### **D. Liaison/Staff encouragement/Morale**

1. Create opportunities to increase morale
2. Assist staff with solving PLL Programmatic problems

#### **E. Clinical Systems Development**

Create and implement policies and standards to most efficiently deal with paperwork issues, i.e., case notes, intake procedures, treatment planning.

#### **F. Oversee Referrals**

1. Assign referrals to PLL clinical staff

2. Track referrals
3. Assist administrative staff in procedure/issues related to incoming referrals

G. Clinical Staff Evaluations

1. 90 day evaluations
2. Annual evaluations
3. Review these with Clinical Director
4. Keep pertinent records in personnel files of commendations/ reprimands/ warnings/memos as a record of items needing to be addressed with SFI staff members.

**V. Organization Relationships**

- A. Works with the Clinical Director in the facilitation of effective clinical staff management and oversight
- B. Communicates with other agency staff for effective service to the community

**VI. Job Relationships**

Supervised by the Clinical Director

**VII. Orientation and Evaluation**

At least a three-week orientation under the supervision of the Clinical Director. Evaluated after a 90-day probationary period and annually thereafter by the Executive Director.

# APPENDIX C - OUTCOME MEASURE PROCEDURES

## What Exactly Do We Want to Study?

We need answers to several important research questions, because they strike at the very heart of the reasons why our teens misbehave and how we can stop the misbehavior.

**A. Does the 6-week PLL Parenting Group and Family Therapy model lower recidivism (re-arrest rates) for adjudicated youth as compared to adjudicated youth who do not receive the PLL System of Care?**

Court records will indicate re-arrests in both groups. We will be review these records after 6, 12, and 24 months to determine if youth in the PLL group had dramatically lower rates than the control group, which did not receive the PLL treatment model.

**B. Does the 6-week PLL Parenting Group move the parent and teen from one stage of readiness to another? For example, if the parent starts off in the pre-contemplative state, can the program raise his level of consciousness enough to move him into a contemplative state?**

One of the main problems facing mental health today is parent apathy, a general lack of desire to take charge and stop their teens' problems themselves. The early evidence has shown that the PLL System of Care can reduce parental resistance, thereby increasing the likelihood that parents will take charge of their teens' problems. We use the following readiness scale to measure this question.

<p><b>Pre-contemplation</b></p> <ul style="list-style-type: none"> <li>▶ Do not see that they are part of problem/solution</li> <li>▶ Feel situation is hopeless</li> <li>▶ No intention of changing</li> <li>▶ Want others to change</li> <li>▶ Others see problem they cannot</li> <li>▶ Minimize or rationalize</li> </ul>	<p><b>Contemplation</b></p> <ul style="list-style-type: none"> <li>▶ Acknowledge problem and their part in it</li> <li>▶ Not ready for change yet</li> <li>▶ Stalling – "analysis paralysis"</li> <li>▶ Wait for magic sign</li> </ul>	<p><b>Preparation</b></p> <ul style="list-style-type: none"> <li>▶ Contracting and troubleshooting</li> <li>▶ Need final reassurances</li> <li>▶ Dry Run Role Plays</li> <li>▶ Make final adjustments</li> </ul>
<p><b>Action</b></p> <ul style="list-style-type: none"> <li>▶ Person or family tries to change or stop problem</li> <li>▶ Person or family tries to change environment</li> <li>▶ Overlooks possible relapses</li> <li>▶ If relapse or change fails recycles back to one of three earlier stages</li> </ul>	<p><b>Maintenance</b></p> <ul style="list-style-type: none"> <li>▶ Consolidate gains</li> <li>▶ Relapse prevention-troubleshooting</li> <li>▶ Potential to recycle is initially high</li> <li>▶ Communicate that relapse is normal</li> <li>▶ Goal: Spread moments of relapse further apart</li> </ul>	<p><b>Termination</b></p> <ul style="list-style-type: none"> <li>▶ Anticipatory guidance</li> <li>▶ Letting go of "old self"</li> <li>▶ Backup plan</li> <li>▶ When to use tune-ups</li> <li>▶ Line up support systems and secure a co-therapist</li> </ul>

**C. Do parents show a significant change in negative attitudes toward their difficult teenagers?**

**D. Will parents and teens report a significant change in their ability to nurture and become tender?**

## **Research Instruments**

### **#1- Prochaska's Stages of Readiness Scale**

This instrument is free of charge and can be used by the graduates. The authors of the instrument ([www.uri.edu](http://www.uri.edu)) just ask that we send them the results so that it can help them refine the instrument.

Both the teens and parents (Mom and Dad) are asked to fill out this instrument before they take the first *Parenting with Love and Limits*<sup>®</sup> class, and then again immediately after the last class.

### **#2- Hudson's Index of Parental Attitudes (IPA)**

You will need to purchase this instrument from Walmyr Publishing at the website [www.walmyr.com/famscales.html](http://www.walmyr.com/famscales.html).

As with the Stages of Readiness Scale, both the teens and parents (Mom and Dad) are asked to fill out this instrument before they take the first *Parenting with Love and Limits*<sup>™</sup> class and then again immediately after the last class.

### **#3- Olson's Parent –Adolescent Communication Scale**

See ATTACHMENT- You will need to purchase this instrument at the website.

<http://www.facesiv.com/studies/fip.html>

As with the Stages of Readiness Scale, both the teens and parents (Mom and Dad) are asked to fill out this instrument before they take the first *Parenting with Love and Limits*<sup>®</sup> class and then again immediately after the last class.

### **#4- The Child Behavioral Checklist (CBCL)**

You will need to purchase this instrument from the website [www.aseba.org](http://www.aseba.org). This is the most expensive instrument. There are two versions, a CBCL version for teens and one for parents. You will need both versions.

As with the Stages of Readiness Scale, both the teens and parents (Mom and Dad) are asked to fill out this instrument before they take the first *Parenting with Love and Limits*<sup>®</sup> class and then again immediately after the last class.

# APPENDIX D - SAMPLE REFERRAL FORM

Referral for: ___PLL Group Therapy	___ PLL Family/ Crisis Intervention
------------------------------------	-------------------------------------

Date of Referral: \_\_\_\_\_ Date of Disposition: \_\_\_\_\_ N/A

Referred By: \_\_\_\_\_ Is Treatment Court-Mandated? YES NO

Referring Agency: \_\_\_\_\_ E-mail: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Male Female **Circle One** SSN: \_\_\_\_\_ Medicaid NO YES if yes # \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Home Address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address (if different): \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address (if different): \_\_\_\_\_

Reason(s) for Referral:

<input type="checkbox"/> Persistent and serious lying	<input type="checkbox"/> Ditching school repeatedly
<input type="checkbox"/> Physical cruelty to people or animals	<input type="checkbox"/> Stealing
<input type="checkbox"/> Running away repeatedly	<input type="checkbox"/> Bullying or threatening others
<input type="checkbox"/> Destruction of property	<input type="checkbox"/> Setting fires
<input type="checkbox"/> Threats of suicide	<input type="checkbox"/> Defying adult requests/rules
<input type="checkbox"/> Using or possessing weapons	<input type="checkbox"/> Sexual misconduct like rape
<input type="checkbox"/> Alcohol or drug abuse	<input type="checkbox"/> Quickly loses their tempers

Offense(s) and/or Charge(s) (If Applicable):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Pertinent Family/ Legal / Social History: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***FAX COMPLETED FORM TO xxx-xxx-xxxx - ATTN: PLL PROGRAM DIRECTOR***

**FOR OFFICE USE ONLY:**

Date Client Contacted: \_\_\_\_\_ Contacted By Whom: \_\_\_\_\_ Assessment Date: \_\_\_\_\_

Agency Referred to \_\_\_\_\_ Date Referral Form Faxed to Agency Delivering Services: \_\_\_\_\_

Name of Referral Agency Staff \_\_\_\_\_ Apt Date \_\_\_\_\_ Fax Form back to above #.

## APPENDIX E - FOUR DAY CERTIFICATION TRAINING PART ONE

### ***Parenting with Love and Limits***<sup>®</sup> **Group Therapy**

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Based on Dr. Sells' book Parenting Your Out-of-Control Teenager, this two-day certification training will show you how to set up, market, and conduct your own 6-week *Parenting with Love and Limits*<sup>®</sup> Group Therapy parenting program. On the second day, you will conduct an actual parenting class with real families. As part of the training, each trainee will receive the parenting program kit.

#### **Parenting Your Out-of-Control Teenager: 7 Steps to Reestablish Authority and Reclaim Love**

by Scott P. Sells, Ph.D. (St. Martin's Press, 2001)

Every teenager rebels against authority at some point – talks back, breaks curfew, or disobeys. But literally millions of teens go beyond normal adolescent rebellion to engage in out-of-control or dangerous behavior. Now, in this breakthrough guide, Dr. Scott Sells will finally give you a permanent, positive method to reestablish authority and reclaim love with even the most difficult teenager.



#### **Parenting With Love and Limits<sup>®</sup> Group Therapy Certification Training**

Group facilitators present the PLL Group Therapy model using live demonstrations through the “Inner/Outer” Circle and parent and teen breakout groups. Teens will be just as involved as their parents in all areas of the group.

Facilitators will show each parent how to execute and deliver consequences to stop the teen's 7 aces or big guns of disrespect – truancy, violence, teen pregnancy, threats of suicide, and alcohol and drug use.

#### **Certification Training Kit Includes:**

- 1 Parenting Your Out-of-Control Teenager book
- 1 PLL Class Video DVD (All Six Parenting Classes)
- 1 PLL Group Therapy Leader's Guide
- 5 Parent Workbooks
- 5 Teen Workbooks
- 1 Course Announcement Poster
- 1 Graduation Certificate

## PLL Group Therapy Certification: Agenda

### Day One

- 9:00 am – 10:00 am      The Use of Icebreakers- Why is this a Good Beginning Intervention
- Overview of Six Classes
- ▶ Class #1- Venting and Why Teens Misbehave
  - ▶ Class #2- Button Pushing and Button Busters
  - ▶ Class #3 – Contracting and Recruiting Outside Helpers
  - ▶ Class #4 – Inner-Outer Circle Contracting and Troubleshooting
  - ▶ Class #5 – Neutralizing the 7 Aces
  - ▶ Class #6 – Restoring Nurturance and Graduation
- 📺 Video Demonstration: The Inner-Outer Circle and a Panel of Parental Experts
- What Makes This Seminar Different From Typical Parent Educational Experiences
- ▶ The Inner Outer Circle
  - ▶ How the Teenager is Engaged
  - ▶ Breaking Parental Resistance
  - ▶ The 7 Aces Parents Only Night
- 10:00 am – 10:15 am      Break
- 10:15 am – 12:15 am      Key Terms and Definitions of Group Process
- ▶ Stages of Group Developmental What to Expect and When
  - ▶ How to Form Linkages
- Learn Process #1- The Art of Venting
- ▶ Empathizing Not Sympathizing (What's the difference?)
  - ▶ How do you gently neutralize a monopolizing or agitated parent or teen?
  - ▶ Can You Form Linkages?
- Learn Process #2- Solution Talk and Complements
- ▶ Get Parents and Teens to Move From Problem Talk to Solution Talk
  - ▶ Can You Skillfully Give Complements?
  - ▶ Can You Use the Rubber Band Technique?
- Learn Process #3- Inner/Outer Circle and Button Pushing
- ▶ Can you be playful and getting parents and teens to buy into your playfulness and produce their own buttons?
  - ▶ Can you set up and execute an inner outer circle?
  - ▶ Can you use freezes and form linkages with outer circle?
  - ▶ Can you use handouts and connect to bigger picture?
- 12:15 pm - 1:00 pm      Lunch
- 1:00 pm - 2:00 pm      Learn Process #4- Demonstrate the Unpredictable Assignments
- ▶ Can you “think on your feet” and sell an important but tough assignment?
  - ▶ Can you model playfulness and use inner/outer circle?
- 2:00 pm – 2:15 pm      Break
- 2:15 pm – 3:00 pm      Learn Process #5- Demonstrate How to Construct Ironclad Rules
- ▶ Can you show parents how to “connect the dots” and go from a problem to a

concrete and literal rule?

- ▶ Can you take a complex concept like contracting and simplify it?

Learn Process #6- How to Construct Complete Contract thru Inner/Outer Circle

3:00 pm –4:30 pm

- ▶ Can you show parents how to put together a complete contract together?
- ▶ Can you use inner outer circle and linkwith outer circle of parents?

4:30 pm –6:00 pm

Learn Process #7- How to Construct a Positive Incident Report with Teens

- ▶ Can you convince the toughest of teens to be softer to their parents?
- ▶ Can you orchestrate the use of a positive incident report?

Learn Process #7- How to Construct a Positive Incident Report With Teens

- ▶ Can you integrate movie clips into learning?
- ▶ Can you use experiential exercises like “nurturing a plant” to facilitate learning?
- ▶ Can you sell a tough concept like nurturance?

## Day Two-Live Supervision with Real Families and How to Supervise

9:00 am – 10:00 am

Final Prep before Families Arrive and Overview of How to Supervise- Participants will use Supervision Manual to supervise Dr. Sells

10:00 am – 12:00 pm

Class #1 with Live Families-Observing the SFI Trainer

12:00 pm – 12:30 pm

Lunch – Families and Workers Eat Together

12:30 pm --- 2:30 pm

Class #4 with Live Families-Observing the SFI Trainer

2:30 pm --- 3:00 pm

Debriefing With Families and Counselors

3:00 pm – 5:00 pm

**Using the Supervision Treatment Fidelity Manual**



# APPENDIX E - FOUR DAY CERTIFICATION TRAINING PART TWO

## Family Therapy Certification Training



Based on Dr. Sells' first book, Treating the Tough Adolescent (Guilford, 1998), this two-day intensive training will provide participants with the ability to effectively employ the *Parenting with Love and Limits*® Family Therapy Model of Practice for treating difficult adolescents and their families. Participants will be part of a treatment team that will view families and difficult adolescents through a one-way mirror or closed-circuit TV.

At the conclusion of each session, family members will discuss with the group the strengths and weaknesses of the treatment approach. The SFI Trainer will interview difficult and resistant families to demonstrate the process of getting “unstuck” and how to integrate theory into practice.

It is highly recommended that these trainees have a master's degree and a good foundation in system's theory.

You will receive a Parent Survival Kit, and Book of Handouts as part of the course.

### Parent Survival Kit



- 1 Parenting Your Out-of-Control Teenager Book
- 1 Study Guide
- 1 7-Step Educational Video on DVD

Parents will use the study guide exercises to create their very own contracts custom designed to work with their own teenagers. The book, the video, and the study guide work in tandem to maximize the parents' knowledge base and ability to quickly turn around their troubled teens.

### Recommended texts:

Haley, J. (1987). *Problem-solving therapy*. Boston: Jossey-Bass

Minuchin, S. (1974) *Families and Family Therapy*. Cambridge, MA: Harvard University Press

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

Selekman, M. D. (1993). *Pathways to Change: Brief therapy solutions with difficult adolescents*. New York: Guilford Press.

Supervising Counselors and Therapists: A Developmental Approach (Jossey-Bass Social and Behavioral Science Series) by [Cal D. Stoltenberg](#), [Ursula Delworth](#)

## PLL Family Therapy Certification: Agenda

### AGENDA: DAY 1

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8:30 AM – 9:30 AM	An Overview of the 15-Step Model (Chapter 3) Process vs. Content: The Key To Turning the Tide Role-play: How to Gauge the Client's Readiness/Increase Motivation
9:30 AM – 9:45 AM	BREAK
9:45 AM – 11:00 AM	Engaging the Resistant Parent and Teen: Knowing the Stages of Readiness ◆ Pre-contemplation ◆ Contemplation ◆ Preparation ◆ Action ◆ Maintenance and Termination 📺 Video Demonstration: When You Fail To Start Where the Client Is 📺 Video Demonstration: The Boy Who Heard Voices at School Role-play: Moving the Client From One Stage to the Other
11:00 AM – 12:00 PM	Setting Clear Rules and Consequences/Troubleshooting (Chapter 4)
12:00 PM – 1:30 PM	<i>Lunch on Own-See the Sights and Relax</i>
1:00 PM – 2:00 PM	Role Play: Creating Custom Fit Consequences and Troubleshooting Role Play: Engaging a Tough Adolescent
2:00 PM – 2:15 PM	Break
2:15 PM – 3:15 PM	Button-Pushing: Changing the Process and Timing of Confrontations Between Parent and Teenager (Chapter 5) 8 Anti-Button Pushing Strategies Role-play: How to prepare parents not to take the bait
3:15 PM – 4:30 PM	Neutralizing the Adolescent's 7 Aces: A Menu of Consequences That Work (Chapter 6)
5:45 PM – 7:00 PM	Live family counseling session

### AGENDA: DAY #2

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8:30 AM – 9:45 AM	In-Depth Discussion of Live Family Sessions Review of Key Videotaped Segments
9:45 AM – 10:00 AM	BREAK
10:00 AM – 11:00 PM	Role Play: Custom Fit Aces
11:00 PM – 12:00 PM	Mobilizing Outside Helpers Like Friends Neighbors and Police Officers (Chapter 8)
12:00 PM – 1:30 PM	<i>Lunch on Your Own-Relax and See the Sights</i>
1:30 PM – 2:30 PM	Role Play: Working With Outsiders 📺 Video Demonstration: Probation Officers and Empowerment
2:30 PM – 2:45 PM	BREAK
2:30 PM – 3:30 PM	Restoring Nurturance and Tenderness (Chapter 7) Video Demonstrations: Going Through the Father to Reach the Son; Ray: A Failure in Establishing Nurturance
3:30 PM – 4:30 PM	Role Play: Demonstrating Soft Talk—Wrap-Up

# APPENDIX F - RECOMMENDED PROPS FOR PLL GROUP THERAPY CLASSES

## All Classes

- *Parenting with Love and Limits*® Parenting Class Videos (on DVD)
- Parent and Teen Workbooks
- Parenting Your Out-of-Control Teenager book
- TV and DVD Player
- Name Tags
- Dry Erase Board or Easel Board
- Pens/Pencils/Markers/Dry Erase Markers/Paper
- Post-It Notes and Reward Treats
- Refreshments (Optional)
- Coloring books, Paper, Crayons for Younger Siblings (Optional)

## Class 1

- List of Survey Questions for “Top Answer” Game
- 2 Bells
- Small Table
- Rubber Bands

## Class 2

- “Age” Cards
- Air Conditioning Filter
- Hat with “Unpredictables” for Parents and Teens
- Assorted Props: i.e., Stuffed Animal, Squirt Guns, Wig, Kazoo, Bubbles

## Class 3

- Your Specific State Laws and Resources Handout (Make This Up Yourself)
- Hat with “Unpredictables” for Parents and Teens for Homework

## Class 4

- Magnifying Glass
- Positive Parent Reports

## Class 5

- Pre-arranged Child Care (Optional)
- Movie and Popcorn for Teens (Optional)
- Positive Teen Reports

## Class 6

- “The Great Santini” Movie on DVD
- Plants for Nurturance
- Magic Wand
- Graduation Diplomas

# APPENDIX G

## Button Buster Script

### Class #2-Hour #2 –Parent’s Only Breakout

#### Script to Motivate Parents into Coaching (i.e., Family Therapy)

##### Overall Goals and Objectives:

- (1) To clearly answer the question “what’s in it for me?” to come to their first coaching session before the next parenting class (Class #3) to role play, practice, and implement their button busters and to begin to move towards contracting.
- (2) To “strike while the iron is hot” and avoid the placebo effect. For example, if the parent or caregiver does not engage in at least one individual coaching (i.e., PLL Family Therapy) before Class #3 of PLL Group Therapy, or at the very least by Class #5, the parent’s motivation for participating in any aftercare is significantly reduced. This is because, having been exposed so far only to Group Therapy, they may have seen only small changes at this point. Or, they may falsely believe that the skills they acquired in group therapy will magically work without the need to address underlying family problems, such as marital discord, disagreement in parent philosophies, inconsistency, yelling, etc. When these new skills fail, the parent will drop back into the pre-contemplative state, will feel more hopeless, and will believe that nothing will work.
- (3) To be convincing in the delivery of the script. To sign up each parent or caregiver at the end of Class #2 before they leave to go home.
- (4) To deliver the script in such a way that the parents see the coaching as a natural part of the healing process, rather than something that is optional or auxiliary.

##### **Step #1- Read the First Two Paragraphs of the Script as Written**

*Now that you are more skilled at recognizing your buttons, its time to show you what you can do in response to getting your buttons pushed. We affectionately call these strategies “Button Busters.”*

*Please take a moment to look at an overview of all 5 Button Busters on page 12 of your Parent Workbook.*

##### **Step #2- Deviate from the Written Script and Apologize In Advance to Parents**

*Parents, I want to apologize, because in the next hour we don’t have enough time to get into all the details of how each of these 5 Button Busters on page 12 [Stand up and physically point to page 12 on several of your parents’ workbooks] will work for your particular child.*

*Because I only have an hour, I will be presenting an overview of each Button Buster, like an appetizer. Each Button Buster I will present will have a video clip of parent actors demonstrating how to successfully use each one with your teen.*

*But the video clip demonstration is just a quick two-minute overview. I want to warn you ahead of time. Some of you will see the video clip on the button buster of “Short and To the Point,” for example, and say to yourself, “This will not work with my child” or “I don’t*

*agree with what just happened,” or “It looks too good to be true.”*

### **Step #3- Introduce the Concept of Coaching and What is in it for the Parents**

*This is why we meet with each of you and your child before our next class for a one-on-one individual coaching meeting, to “**tweak**” and custom-fit the button buster you like or pick from the menu of these 5 [Stand up and physically point to page 12 on several of your parents’ workbooks] and our bonus secret weapon button buster called “being unpredictable” that we will share at the end of class. Here is what is in it for you and your child to come to just one coaching meeting between now and the next time we meet.*

### **Step #4- Give a Concrete Example of What Coaching Looks Like**

*First of all, am I right to assume that all of you here want this problem with your child fixed fast? [Pause and wait for a “yes”] Can I see a show of hands? OK, great. Fast forward in your workbook and turn to page 15 to see a concrete example of how we use coaching to get down to business and to begin fixing the problem FAST.*

*On page 15 you will see a template or “paint by numbers” kit to customize the “Exit and Wait” button buster for your particular child.*

*For example [pick a parent and state their name] if you like the video clip we are about to show on “Exit and Wait” or thought it had POTENTIAL, we would sit down with you and your child to pick out:*

- 1. What the unacceptable behaviors are [physically get up and point to this section on page 15]*
- 2. The statement that you would make to your child telling him that the conversation is overheating and that it is time to exit from the conversation and cool down, letting your child know that you are not just blowing him off.*
- 3. What to do if your child follows you when you exit from the argument.*

*All of these details have to be tweaked and worked out ahead of time. Otherwise, if you use these Button Busters without the coaching session, it could go horribly wrong. You could be using the right tool, but in the wrong way. Does everybody understand what I mean and the critical importance of tweaking the tool before going into battle with your child and using it? [Wait for nonverbal shaking of the heads in agreement]*

### **Step #5- Make Your Conclusion Statement and Go Back to the Script**

*So at the end of tonight and before you leave, I have my calendar appointment book [hold it up] and I will give you times that I am available for our coaching meeting. I will go around the room and each of you will choose the time you want on a first come first serve basis.*

*So to summarize...if you want the problem with your child fixed fast, you will seize this opportunity. Because as we saw from our button pushing role play in the last hour, without coaching, the odds are greatly in your teen’s favor of playing the button game better than you and defeating you in arguments. I think it is time that we even the playing field, don’t you?*

### **Go Back to the Script - A. Underlying Motives**