Evaluation of The Bail Supervision Scheme for Children (Pilot Scheme)
Catherine Naughton, Sean Redmond, Barry Coonan
Acknowledgments

The REPPP research team from the School of Law in the University of Limerick, commissioned by the Department of Children and Youth Affairs to complete this evaluation has benefited from the assistance of many groups and individuals.

We sincerely acknowledge

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<td>BS</td>
<td>Bail Supervision</td>
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<td>BSS</td>
<td>Bail Supervision Scheme</td>
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<td>Court 55</td>
<td>The Children Court located in Smithfield, Dublin</td>
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<td>DCYA</td>
<td>Department of Children and Youth Affairs</td>
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<td>Extern</td>
<td>BSS Service Providers</td>
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<td>IYJS</td>
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<td>JLO</td>
<td>Juvenile Liaison Officer</td>
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<td>MST</td>
<td>Multisystemic Therapy</td>
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<tr>
<td>Oberstown</td>
<td>Oberstown Children Detention Campus</td>
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<tr>
<td>Probation</td>
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<td>REPPPP</td>
<td>Research Evidence into Policy Programmes and Practice</td>
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I welcome this Evaluation Report of the Bail Supervision Scheme (BSS) and note the very positive findings.

The Bail Supervision Scheme was established by my Department with the aim of providing the courts with an alternative for children who were at risk of bail denial. The BSS provides intensive intervention for children’s caregivers to facilitate sustainable change by complying with bail conditions while remaining in the community. The scheme not only benefits the young person and their families, but the whole community.

I wish to acknowledge the work of the Research Evidence into Policy Programmes and Practice (REPPP) within the School of Law in the University of Limerick for conducting this evaluation. The evaluation was carried out by Catherine Naughton, Sean Redmond and Barry Coonan. My grateful appreciation also goes to all who inputted into the evaluation process, especially the families of the children who had been involved in the scheme and the Therapists who work so professionally with the families of the children.

The BSS, led by my Department, is a multi-award winning project having received recognition both nationally and internationally. In the Correctional Excellence Awards category at the 2019 International Corrections & Prisons Association (ICPA) conference held in Buenos Aires it received the “Community Corrections Award”. It also received this years “Excellence Through Collaboration” award at the Civil Service Excellence and Innovation Award for its collaborative work. I wish to acknowledge the agencies, statutory and non-statutory bodies, who made this possible. The bodies involved include the Courts, An Garda Síochána, the Probation Service, Oberstown Children Detention Campus, Tusla and, of course, Extern who are commissioned to operate the scheme on behalf of my Department.

I am very pleased to note that the evaluation shows the scheme has been successful in meeting its aims in the areas of reducing offending by the children involved in the programme; ensuring greater compliance to the bail conditions laid down by the court as well as ensuring that 85% of those that completed BSS attracted a non-custodial option at their sentencing hearing.

I also wish to highlight the importance that re-engagement by the children, in either education or training, proved to be a very positive influence on ensuring good outcomes.

My Department are now looking at progressing plans to expand the scheme and make it available to a larger cohort of children who come before the courts.

Dr Katherine Zappone, T.D.

Minister for Children and Youth Affairs
Executive Summary

The Department of Children and Youth Affairs (DCYA) designed a Bail Supervision Scheme (BSS) to provide the courts with an alternative for young people who were at high risk of bail denial. The BSS incorporates the evidence-based Multisystemic Therapy (MST) model within the normal court processes (for example, supports provided by court services, Young Persons Probation and An Garda Síochána). Young people at high risk of bail denial tend to have complex needs; they may have experienced multiple adversities, be early school leavers and live in challenging environments. Such conditions place additional challenges on the young person’s ability to adhere to the strict bail conditions laid down by the court. The MST model provides intensive support for the young person’s caregiver in his or her home. Taking a holistic strengths-based, collaborative, problem-solving approach, the BSS team works predominantly with the caregiver to help them to support the young person. By tackling barriers to positive change within the young person’s home and community environment and facilitating the caregiver to challenge the young person’s problematic behaviour, the BSS aims to facilitate sustainable pro-social change in the young person’s behaviour.

Following a tender process in 2016, DCYA commissioned Extern to provide a pilot BSS for young people attending the Children Court (Court 55) in Smithfield, Dublin. Following an implementation period, DCYA commissioned the School of Law in the University of Limerick to evaluate the BSS. The evaluation combined multiple methodologies including a quasi-experimental design and incorporated multiple data sources to test a theory of change. It investigated whether the BSS worked (outcomes) and sought to identify the conditions that facilitated the observed outcomes (process). The report presents these findings.

1 See Oberstown quarterly factsheet on the characteristics of young people detained: https://www.oberstown.com/campus-stats/
2 The term ‘caregiver’ refers to the relevant adult who has agreed to take on the caregiver role and work directly with the BSS team for the duration of the scheme (this term may include, for example; the young person’s parent, an extended family member, or foster carer).
3 The Extern worker responsible for implementing the BSS. All members of the BSS team are also MST therapists.
4 A social justice charity that works with young people to promote change. Extern was commissioned by DCYA to implement the BSS in September 2016.
5 A method that uses a pre-existing group for comparison against a treatment group to estimate the causal impact of an intervention on a target population. It is an alternative to a randomised control trial (experimental) where random assignment of individuals is not feasible.
6 Refers to an ex-ante statement proposing a causal chain about how bail supervision will contribute to impact. The evaluation tested this theory of change.
DID THE BAIL SUPERVISION SCHEME WORK?

Systematic analyses of both primary (research interviews)\(^7\) and secondary (administrative)\(^8\) data sources provide substantive evidence that the BSS contributed to positive changes in the participating young people’s behaviour.

Using a quasi-experimental design in partnership with the An Garda Síochána Analysis Service (GSAS),\(^9\) the evaluation evidenced a 72 per cent reduction in reoffending (six months post-BSS compared with six months pre-BSS). The control group (young people outside Court 55 for which the presiding Judge refused bail) experienced a reduction in reoffending of 37 per cent over an equivalent timeframe. As such, **on average the young people enrolled on the BSS had a reduction in reoffending almost twice that of the control group.**

Combining findings from analysis of both Extern’s case records and interview data provides evidence that the young people who completed BSS with a planned exit\(^{10}\) showed marked improvement in adherence to bail conditions as the intervention progressed. Indeed, **the majority of young people who completed the intervention demonstrated full adherence to bail conditions on exit.** In addition, of the 13 young people who completed a full course of MST intervention, 11 **attracted a non-custodial disposal at the sentencing hearing,\(^{11}\) thereby avoiding detention.**

WHY DID THE BAIL SUPERVISION SCHEME WORK?

The findings identified several factors at multiple levels that contributed to positive outcomes for young people.

- Governance: The evaluation identified the role of the oversight group as central to the **‘buy-in’ of statutory agencies** with the service provider Extern, a non-statutory agency. The evaluation also identified the key role of the ‘character’ of governance, in particular the **open-door policy and informal communication** between the chair of the oversight group and the BSS manager,\(^{12}\) in timely and effective problem-solving for the scheme.

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\(^7\) Over 40 stakeholders participated including young people, their caregivers, frontline professionals, management and decision makers. See Table 4 for a full breakdown.

\(^8\) Data from Extern, the Garda Analysis Service, Multisystemic Therapy (MST) Institute and the Irish Youth Justice Service.

\(^9\) Located in Garda Headquarters in the Phoenix Park, the GSAS is responsible for providing analytical support to the Garda organisation

\(^{10}\) Where the discharge of a case occurred by mutual agreement of the MST team and caregiver; and when the MST-defined discharge criteria were met (see Appendix 4 for further details).

\(^{11}\) The hearing where the Judge decides on sanctions for the young person’s behaviour (the specific incidence(s) that resulted in contact with the justice system and subsequent referral to BSS).

\(^{12}\) The Extern service manager and trained MST supervisor who is responsible for supervising the BSS team and the implementation of BSS.
• Court Services: **Positive advocates** from within the court setting (in particular, the Judge and court Garda sergeant) and a **proactive BSS team** contributed to **engagement of legal representatives**, which was necessary to ensure continual referrals.

• Interagency collaboration: The BSS team\(^{13}\) developed **purposeful working relationships** with other frontline professionals where **informal communication** was considered key. These relationships, together with accumulating **good news stories** from young people who were enrolled in the scheme, ensured ‘buy-in’ to the scheme by collaborating agencies. This practical and proximal evidence of effectiveness ensured the **developing confidence in the scheme** on the part of various agencies, which facilitated continuing interagency collaboration and a referral pipeline.

• Implementation: **Robust adherence** to the nested evidence-based programme within the BSS.

• Ongoing **teamwork** between BSS team members and the external MST consultant enabled the team to **share knowledge and skills** to identify and implement the best strategies for the young people and their families.

• Caregivers appreciated that BSS team members came to their **home**, and were **non-judgemental, empathic and flexible**.

• Likewise, frontline professionals (Garda Case Managers,\(^{14}\) Court Staff, Probation Officers, Tusla Social Workers and legal representatives) **complimented the work undertaken by the BSS team**.

**CONCLUSION**

The evaluation found that BSS enabled young people at high risk of bail denial to **adhere to bail conditions** and **reduce reoffending** by effectively supporting their caregivers. This ensured that these young people remained in the community instead of detention during the remand\(^{15}\) process. The findings also suggest that the progress made by the young people while enrolled on BSS meant that they were better placed to **attract a non-custodial option** at their sentencing hearing.

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\(^{13}\) The Extern workers responsible for implementing the BSS. All members of the BSS team are also MST therapists. Where appropriate they are referred to as therapists.

\(^{14}\) Members of An Garda Síochána who case-manage young people targeted as at high risk of offending.

\(^{15}\) During the period between the initial hearing and final discharge of a case, a young person may be either remanded on bail or detained on remand. Young people enrolled on the BSS are remanded on bail to the BSS.
Introduction

This report presents findings based on a comprehensive evaluation. We have structured the report for a policy audience and for readers with an informed interest. First, we present key findings, followed by an overview of the methodology and a detailed findings section. The reader can consult and examine a detailed methodology in the Appendices at their discretion.

BACKGROUND
In October 2016, following a tender process, the Department of Children and Youth Affairs (DCYA) commissioned Extern, the national voluntary organisation working with children and young people, to provide a Bail Supervision Scheme (BSS) for children at high risk of remand to detention in the Dublin area. DCYA intended the BSS to be a direct alternative offering to the court when considering remanding a child to Oberstown Children Detention Campus (Oberstown).

WHAT IS THE BAIL SUPERVISION SCHEME?
Several jurisdictions have used bail supervision to improve bail compliance by young people, reducing reoffending and thereby reducing the demand for detention during the remand period (Redmond, 2017). However, the BSS in Ireland views the on-remand period as a potentially significant opportunity for behaviour change and differs from other jurisdictions in that it incorporates the evidence-based Multisystemic Therapy (MST) model within normal court processes. MST is an intensive family-based intervention; therapists work predominantly with the young person’s primary caregiver to facilitate sustainable pro-social change in the young person’s behaviour. MST aims to facilitate change to ensure that the young person remains at home, is in education/training/working, and is not arrested on new charges. The MST model also aims to encourage the young person towards pro-social peers/activities. To ensure that the changes achieved are sustainable, MST aims to improve family functioning and the family’s support network. It also facilitates the development of caregivers’ skill necessary to generalise the learning and handle future problems. MST aims to be flexible to fit within caregivers’ lives; it is delivered to the home and also provides caregivers with on-call support 24 hours a day, seven days a week over a three- to five-month period.

The BSS is supported by an oversight group, which is composed of representatives from: the Irish Youth Justice Service (IYJS), Department of Children and Youth Affairs (DCYA), An Garda Síochána (AGS), Young Persons Probation (YPP), Oberstown Children’s Detention Campus (Oberstown), Tusla (The Child and Family Agency) and Extern, the BSS service providers. The oversight group advises on general project governance matters and supports
the programme to negotiate anticipated and unanticipated service related and logistical problems, and, where required, to facilitate changes of tack (Redmond, 2017).

To ensure accurate targeting of the BSS for young people at high risk of bail denial, the scheme was initially confined to referrals from Oberstown of young people detained on remand. It was offered at their second court appearance following the initial remand. In July 2017, as part of the oversight group’s role to facilitate the optimum operation of the scheme, a strategic decision was made to extend it to accept referrals of young people at high risk of bail denial from Court 55, at their first appearance. This change ensured a continual source of referrals to the scheme and avoided having to detain young people on remand in the first instance. The pilot scheme was initially confined to a catchment area of within 20 miles of the Children Court in Smithfield, Dublin 7. During the evaluation period, the oversight group altered the referral criteria to facilitate the extension of the catchment area to include one young person from the Navan area.

MST Services eligibility criteria placed certain restrictions on referrals to BSS.
• Age restrictions: to be eligible, young people are required to fall within an age range of 12–17 years (inclusive) with a minimum of three months prior to their 18th birthday.
• Living requirement: to be eligible young people are required to live with a suitable adult who agreed to act as a caregiver for the duration of the scheme.

As MST is incorporated within normal pre-trial court processes, the BSS team were required to liaise with both statutory and non-statutory agencies. Statutory agencies include AGS, Oberstown, YPP, Tusla and Court Service (the judge and staff in Court 55; Dublin District Children Court). Non-statutory agencies include defence and prosecution legal teams and a variety of local agencies, including educational establishments, youth services, community groups, drug counselling services and local sports groups.

AIMS OF THE EVALUATION
The evaluation was designed to examine both outcomes (behavioural changes) and processes (mechanisms that contributed to the outcomes). The outcome evaluation covered the performance of the bail supervision programme from May 2017 to June 2018. The process evaluation covered the programme’s implementation from commencement.

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The international organisation that developed the evidence-based MST model and oversees its implementation. [http://www.mstservices.com/](http://www.mstservices.com/)

This term is meant in the broadest sense to refer to the court processes that occur in the time period between initial court hearing and the final disposal of a case.

This enabled a bedding-in period when the bail supervision programme was established within the institutional framework that it needed to operate within (e.g. consultations with state agencies and courts). It was accepted that during this period referrals would be low and that it would take a certain period to encourage a pipeline of suitable referrals. However, it is appropriate to evaluate the implementation of the programme (to include bedding-in assumptions) from commencement.
The outcome evaluation included a quasi-experimental element, exploiting the opportunity offered by the limited reach of the bail supervision programme to certain children within the catchment area of the pilot scheme. The quasi-experimental element of the evaluation compared the trajectories of selected young people who were not eligible for BSS because they lived in locations not covered by the scheme (control group) with all children provided with bail supervision over the evaluation period (intervention group). Garda administrative data (PULSE\footnote{PULSE: Police Using Leading Systems Effectively, An Garda Síochána’s IT system used to record crime-related incidents and intelligence reports.}) was analysed to identify any distinguishing features in terms of their level of offending between the two cohorts. However, it is important to note that while PULSE crime data is an objective measure of offending, it has limitations. It is dependent on both the detection and recording of specific incidences of crime by An Garda Síochána. Bias could arise given that young people enrolled on the BSS were clearly subject to comprehensive ongoing surveillance. This level of surveillance could logically link to increased detection rates compared to the control group. The relatively small sample size ($n=22$) was a challenge to the evaluation design. However, adopting a contribution analysis approach, which facilitated the triangulation of multiple methods and data sources, supports conclusions reached.

The outcome evaluation included an examination of the contribution of the BSS to individual behaviour change in young people. Used alone evaluations which employ experimental designs may offer causal connections between intervention and outcome but there can often be a black box effect meaning that it is difficult to know how or why something worked, not just whether it worked. Evaluating contribution is an important balancing enquiry, which attempts to forensically examine multiple data sources to determine how and why certain outcomes were achieved.

The process evaluation examined the implementation of bail supervision against the key assumptions made when the service was commissioned. Assumptions in part relate to assured programme fidelity\footnote{A measure of adherence to the criteria/protocols of a programme.} of MST by Extern. However, implementation assumptions also covered external factors, which predict optimum performance but are outside the immediate control of the service providers. This wider examination of programme implementation context considered the performance of stakeholders and support structures for the programme against initial assumptions, often called enabling or critical success factors.
Key Findings: At a Glance

**DID THE BAIL SUPERVISION SCHEME WORK? OUTCOMES**
- The reduction of offending for young people enrolled on BSS was almost twice that of the control group.
- There was evidence of improved adherence to bail conditions.
- 85 per cent of young people who completed BSS with a planned exit attracted a non-custodial option at their sentencing hearing.

**HOW DID BAIL SUPERVISION SCHEME WORK? PROGRAMME THROUGHPUT**
- 31 young people referred, 20 enrolled, 13 had a planned exit from BSS.

**WHY DID THE BAIL SUPERVISION SCHEME WORK? PROCESS**
- Strong governance, advocates and ‘good news stories’ laid the foundations for ‘buy-in’ and interagency collaboration.
- Governance was flexible, effective and efficient.

*Implementing Multisystemic Therapy nested within the Bail Supervision Scheme*
- MST was implemented with fidelity.
- MST analytical model described as a basic model that afforded the flexibility to adapt to individual family’s needs.
- BSS team’s skills, strong teamwork and problem solving together with external MST input contributed to successful outcomes.
- Family Engagement in BSS was vital to obtaining positive outcomes.

*Challenges in adapting the MST model to fit the Bail Supervision Scheme’s requirements*
- BSS requirement to report breaches in bail compliance hampered family engagement in the scheme.
- Perceptions of inadequate treatment duration by caregivers and frontline professionals existed. However, these perceptions were countered by the statistical data indicating little or no further benefit from extending planned scheme duration.
- MST eligibility criteria effectively excluded those living in residential care, those outside the acceptable age range and those presenting with complex mental health needs.

**REPUTATION**
- Stakeholders within the justice system reported confidence in the Bail Supervision Scheme.
Methodology

Our evaluation strategy was significantly informed by Contribution Analysis\(^{21}\) (Mayne, 2008), and incorporated a quasi-experimental design. Contribution Analysis, a step-by-step approach ensured a rigorous, systematic and feasible evaluation which provides plausible evidence that the intervention contribution to the documented outcomes.

Several issues, including ethical considerations and the limited numbers of young people enrolled on the scheme prohibited the use of a randomised controlled trial design in the evaluation. However, the research team utilised a naturally occurring control group – young people remanded to detention from non-pilot areas – in a quasi-experimental design to analyse changes in re-offending. Importantly our evaluation design provided triangulated evidence\(^{22}\) from multiple data sources and methodologies, which enabled us to conclude that the scheme made an important contribution to the documented outcomes. A detailed methodology can be found in Appendix 1.

OVERARCHING RESEARCH QUESTIONS

1. Did the Bail Supervision scheme (BSS) work? More specifically, did the BSS contribute to changes in the young person’s behaviour including reduced re-offending and adherence to bail conditions?

2. How did the BSS work? More specifically how many young people were referred to, enrolled on and completed the BSS during the evaluation period and what were the factors that facilitated or acted as a barrier for referrals?

3. Why did the BSS work? More specifically, how did the BSS processes facilitate or act as a barrier to obtaining the observed outcomes?

AREAS EVALUATED

1. If the BSS worked: Outcomes for the young person, changes in behaviour including:
   - Re-offending patterns
   - Bail compliance
   - Sanction applied by the courts at sentencing hearings.

\(^{21}\) A realist methodology proposed by Mayne (2008), which follows a six-step process based on a theory of change to provide plausible evidence that an intervention contributed to the documented outcomes.

\(^{22}\) The incorporation of data from multiple sources and comparison of findings from multiple methods to ensure consistency of findings and therefore strengthen the evidence obtained.
2. How the BSS worked: Programme throughput:
   - The BSS referral
   - Enrolment
   - Scheme exit patterns

3. Why the BSS worked: Processes
   - The underlying mechanisms, which contributed (either facilitated or acted as a barrier) to the observed outcomes
   - Implementation of the MST model (fidelity)
   - The operating environment (how the MST model fitted within BSS)

4. Reputation: Confidence in the scheme (by collaborative agencies)
Findings

In this section, we present detailed findings identified from analysis of multiple data sources in relation to ‘If (Did)’ ‘how’ and ‘why’ the BSS worked. In ‘Did the BSS work’, we present findings on outcomes. We also provide an overview of the context of the young people referred to the BSS. In ‘How the BSS worked’, we outline throughput (inputs and outputs) and factors, which facilitated or acted as a barrier to these processes. Finally, in ‘Why the BSS worked’, we present findings on the processes which contributed to the observed outcomes.

Did the Bail Supervision Scheme Work? : Outcomes

In this section, we initially present findings in relation to behavioural change. First, we compare levels of reoffending for young people who were enrolled on the BSS to a control group (quasi-experimental design). We then summarise the context for the five young people who were chosen as case studies for the evaluation. Next, we present the findings in relation to young people’s compliance with their bail conditions, behavioural changes and sanctions delivered by the court at sentencing hearing.

Reduction in Levels of Re-offending

The Garda Síochána Analysis Services (GSAS) compared Garda PULSE crime detection data for the young people who received bail supervision (intervention group) to young people who were remanded to detention (control group) over an equivalent timeframe (see Appendix 1, page 38).

- **Intervention group:** The average offending rate for 6 months pre-BS was 6.3 offending days while the offending rate 6 month post-BS was 1.8 offending days, a decrease of 72 per cent (see Figure 1 and Table 1 below).

- **Control Group:** The average offending rate for 6 months prior to an equivalent BS start date was 5.5 offending days while the offending rate 6 months post an equivalent BS completion data (including a period of pre-sentencing detention) was 3.5 offending days, a decrease of 37 per cent (see Figure and Table 1 below).

Young people who received BS had on average a higher offending rate (6.3 offending days) pre BS compared to the control group (5.5 offending days). Offending reduced for this group by 59 per cent during the intervention and continued to reduce by another 13 per cent in the 6 months after the intervention.

This amounts to a total reduction of 72 per cent in the average offending rate from 6 months post BS when compared to 6 months prior to BS.
The young people in the control group experienced a reduction in offending rate of 29 per cent following detention on-remand. This trend reduced further by 8 per cent in the (6 month) period equivalent to the intervention group. The control group therefore experienced a total reduction of 37 per cent in the average offending rate 6 months post equivalent interval when compared to 6 months prior to remand.

Therefore, the average reduction in offending rate for young people who received BS was almost twice that of the young people in the control group.

Table 1: Average-offending rates for the intervention (BS) and control groups six months pre, during BS/equivalent interval and six months post BS

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<th>Offending Rates (Number of days an offence was recorded on PULSE)</th>
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<td>Pre-BS</td>
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<tr>
<td><strong>Intervention (BS)</strong></td>
<td>6.3</td>
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<tr>
<td><strong>Control</strong></td>
<td>5.5</td>
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</tbody>
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Figure 1: Average-offending rates for both intervention (BS) and control groups six months pre, during BS/equivalent interval and six months post BS.
Who were the young people referred to the Bail Supervision Scheme?

Case Studies

We planned to select five representative case studies for closer and focused examination of both outcome (behavioural change) and the BSS processes. We invited all caregivers and young people enrolled on the BSS during the evaluation period to take part in the evaluation. Six caregivers attended interview. As these families were deemed representative of the more challenging cases, we selected five of the six attendees as case studies. During interview, the Judge acknowledged that all five young people had very problematic offending behaviour, and the BSS manager described them as some of their more challenging cases. The five case studies selected therefore highlight the complex contexts of the young people enrolled on the BSS.

In this section, we present a summary of the five case studies based on a synthesis of the analysis of Extern’s case summaries for these five young people and interview data. Interview data consisted of the interviews with the young people themselves, their caregivers and frontline professionals who had direct experience of working with them and their families (see Figure 5 and Table 4 in Appendix 1). We also refer to the PULSE crime detection data for these five young people. As the sixth young person was not selected as one of the five case studies, we did not incorporate the data from the interviews with his caregiver or BSS therapist in this section but it was included within the process evaluation.

First, we outline the young people’s contexts, demographics, behavioural challenges and home environment. Next, we outline behavioural changes including adherence to bail conditions and court outcomes.

THE YOUNG PEOPLE

When enrolled on the BSS, the young people, all boys, were aged between 16 and 17 years. All presented as early school leavers, associated with anti-social peers and were not engaged in pro-social activities. These young people were recorded on the PULSE system for an average of 3.8 offences (minimum two, maximum 13) in the six months prior to enrolling on the BSS (see Table 2). The young person who had two recorded offences differed from the other four young people in that the seriousness of his first offences meant that he bypassed the Garda Diversion system.

Frontline professionals described one young person as experiencing suicide ideation and attributed this to his chaotic home life. Respondents described two other young people as
presenting with developmental delay. For one such young person his developmental delay was linked to the malign influence that his anti-social peers had on both his drug use and his criminal behaviour. Frontline professionals and caregivers also linked four of the young people’s problematic drug use to their criminal activity. Consistent with this, two of the young people described the negative influence their peer group had on their behaviour and linked their problematic substance use to their offending. Three of the five caregivers described how the young people’s offending was negatively influenced by peers. To highlight the complexity presented by the young people, another caregiver described their young person as quiet and lacking in confidence; however, frontline professionals described him as a leader among his peers.

HOME ENVIRONMENT

All the young people lived in areas of economic deprivation. During the intervention, only one young person lived in a two-parent household. Both parents were in employment and the family lived near a supportive extended family. Two of the young people lived with their biological mother, while the remaining two young people lived with extended family for the duration of the BSS. At enrolment, only one young person had contact with his biological father. Four of the young people had family histories of crime; for example, one young person’s father was in prison while his older brother was subject to a probation bond. Respondents described that four of the mothers had problematic substance use; one mother was also described as presenting with mental health challenges. This specific family was described as in a ‘constant state of crisis’. Family violence was a major issue for another family.

On average the young people were enrolled on the BSS for 146 (maximum 195, minimum 49) days. Four of the five families completed the BSS with a planned exit (see Table 2 below). Two young people were on their second referral to the BSS, which they completed with a planned exit. Interventions undertaken with the five families are outlined in the section on Intervention below.

Table 2: Length of the BS and pre, post and during BS Offending Rates (based on PULSE data), Bail Compliance and Court Sanctions for the five case studies

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23 Once a young person is found guilty of a crime, a judge may choose to place them on a probation bond. This sanction means that the young person remains in the community while under the supervision of the Probation Service.
24 The young person who had an unplanned exit from the BSS was enrolled for 49 days.
25 One young person had an early exit from his first referral to the BSS as there was a fear that if he waited he would be sentenced to adult prison (as opposed to detention to Oberstown). He received a three-month sentence. After a post-release period of about four months, he reoffended and was brought back before the Courts. A second young person was remanded to Oberstown during the intervention; this resulted in an early exit (the case was discharged), and he was later referred to BSS. Following a second referral both cases were reassessed to ensure there was a change in circumstance to warrant another course of MST treatment before re-enrolment on BSS.
### Evaluation of BSS, Naughton, Redmond, Coonan

<table>
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<th>Offences recorded</th>
<th>Bail Adherence</th>
<th>Court Sanctions</th>
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<td>Length of BS (Days)</td>
<td>Pre-BS</td>
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**IMPROVED ADHHERENCE TO BAIL CONDITIONS**

A key objective of the BSS was supporting caregivers to encourage young people to observe their bail conditions. An indication of bail compliance for young people who are repeat offenders is offence reduction. As we report, the quasi-experimental design evidence demonstrates a significant positive difference in offending rates between the intervention and control groups during the intervention period. Reporting performance more specifically on bail compliance is problematic. While there were references to the challenges the young people faced in maintaining their bail conditions prior to the BSS within the interview data, we did not have Garda administrative data to validate findings in the same way as validating offending patterns.

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*36 Road Traffic Offence.*
During interviews, frontline professionals, caregivers and young people all acknowledged that four of five of the young people breached their bail conditions during the initial stages of intervention and this is consistent with the documentary analysis of the Extern case summaries. Breaches of bail conditions referred to associating with restricted peers, being present in restricted areas and breaking court-imposed curfew (see Table 2 above). Indeed, one young person was remanded to Oberstown due to persistent breaches during his first referral to the BSS. However, a clear pattern of greater bail compliance emerges as the families sustained their engagement with the BSS. Four of the young people were recorded as compliant with their bail conditions and this was sustained for a minimum of five weeks and maximum of 10 weeks before planned exit from the BSS.

Conversely, one young person was compliant with his bail conditions for the first six weeks, after which his behaviour rapidly deteriorated. This young person reconnected with his problematic peer group and resumed drug use. He committed a serious crime, which resulted in his arrest and remand to Oberstown.

OTHER BEHAVIOURAL CHANGES
Respondents reported reduced levels of drug use and aggressive behaviour as the intervention processed for three of the young people. However, frontline professionals described that for one of these young people these advances ‘collapsed’ after his planned exit from the BSS. On completion of the BSS, two of the young people were engaged in a community work placement. Another young person described how he engaged in a community work placement until an incident resulted in a threat to his life. At the time of interview, he was afraid to leave the house because of this incident; however, his BSS therapist recently reported (August 2019) that this young person was successfully engaging in an apprenticeship.

SANCTIONS AT SENTENCING HEARING
All five young people chosen as case studies were convicted for their referral offence. Three young people attracted a non-custodial option at their sentencing hearing (see Table 2 above).

Analysis of Extern’s documents for all young people enrolled on the BSS during the evaluation period identified that of the 13 young people who completed the BSS with a planned exit, 11 (86 per cent) attracted a non-custodial option at their sentencing hearing (see Figure 3 below).

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27 The offence for which the young person was remanded on bail to the BSS.
How did the Bail Supervision Scheme work?
Programme throughput

In this section, we present data from an analysis of Extern’s documents. During the evaluation period (May 2017 to June 2018), 31 young people (but 30 referrals, as two siblings were counted as one referral28) were referred to the BSS (16 from Oberstown and 14 from Court 55). Of the 31 young people referred, the BSS team enrolled 20. Of the 20 enrolled, 13 completed the BSS with a planned exit (see Figure 2 below).29

In the following section, based on an analysis of Extern documents,30 we expand on the various stages of the referral pathways for referrals from both Oberstown and Court 55 (see Figure 3 below).

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28 Neither sibling was enrolled on the BSS (no parental consent received).
29 The referral related to the young people referred after 1 May 2017 and before 31 June 2018.
30 To ensure accuracy, clarity on the Extern documents was obtained from the BSS manager when necessary.
REFERRALS FROM OBERSTOWN

1. Of the 16 young people referred from Oberstown, four did not meet the BSS inclusion criteria (two were within three months of their 18th birthday and two were in residential care).

2. Of the 12 young people who met the inclusion criteria, three were not accepted on the scheme (parental consent was not received for one, another was engaged on another home support programme and the third young person's case was moved to a higher court and therefore outside the remit of the pilot scheme).

3. Of the nine young people accepted for the BSS, two were refused bail.

4. Of the seven who enrolled on the BSS, three completed the BSS with a planned exit. Two of whom attracted a non-custodial option at sentencing hearing.

5. Of the four young people who exited early from the BSS, one was remanded to Oberstown (one of the case studies), two received detention orders and the outcome for the fourth was unknown.

REFERRALS FROM COURT 55

1. All 14 young people referred from Court 55 were deemed eligible for the scheme.

2. Of the 14 young people 13 met the inclusion criteria; one was not accepted on the BSS as parental consent was not received

3. All the 13 young people accepted were granted bail and enrolled on the BSS

4. Of the 13 young people enrolled, ten completed the BSS with a planned exit; of these nine attracted a non-custodial option (including three of the case studies), while one (one of the case studies) received a detention order at their sentencing hearing.

5. Of the three young people who had an early exit from the BSS, one was at large at the time of evaluation, a second young person was detained and the third young person was transferred to secure care.

It was evident that referrals directly from Court 55 were more likely to be enrolled on the scheme (13 of the 14 referred) compared to referrals from Oberstown (nine of the 16 referred).

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31 For inclusion and exclusion criteria see Appendix 3.
32 BSS manager reported that bail was refused due to seriousness of crime and high probability of sentence.
33 Where a young person is discharged from the MST programme before the recommended timeframe and the discharge criteria have not been met (see Appendix 4 for further details).
34 For offences prior to enrolment in BSS (BSS Manager).
35 Parent withdrew consent to engage with MST as she felt secure care was a more suitable option for her child (BSS Manager).
In summary, 19 per cent (three of 16) of the referrals from Oberstown and 71 per cent (10 of 14) of the referrals from Court 55 had a planned exit from the BSS (completed a full course of MST intervention). In addition, 10 of the 13 referrals from Court 55 who were enrolled on the BSS completed the BSS with a planned exit, compared to three of seven referrals from Oberstown.

An analysis of the PULSE crime data suggests that there was no significant difference in terms of level of offending by the young people referred and enrolled from Oberstown (offended on average on 8.5 days) and Court 55 (offended on average on 8.8 days).

A secondary comparative examination of the profiles of the young people from the two referral sources may reveal significant and relevant factors that explain the differences in attrition rates.
Figure 3: Summary referral pathway from referral to discharge from the Scheme

**REFERRAL PROCESSES**

Given the importance of referrals to the success of the BSS, we believe it is important to give additional attention to this area. We outline findings from the analysis of the interview data to provide further understanding of the referral processes.
Oberstown staff described how young people on remand who met the inclusion criteria* for referral to the BSS were identified as they arrived in Oberstown. Once verbal assent** was obtained from the young person, a suitable caregiver was identified and contacted to obtain their verbal consent to proceed. The referral form was then completed and sent to the BSS team. The BSS manager completed a court report*** before the young person’s next court appearance (typically one week for a first remand). The young person remained in Oberstown during this process. Conversely, with young people referred from Court 55, families were able to receive information about the BSS and to provide verbal assent (young person) and consent (caregiver) within the court setting as the young person’s case was being processed. In practice, the judge indicated the referral; the defence solicitor completed the referral form and submitted the referral to the BSS team. The BSS manager then prepared a court report for the next court date. The young person remained in the community during this process.

As outlined earlier, to ensure the optimum operation of the scheme, the oversight group made changes to the referral procedures to facilitate referral from Court 55. During interview, Oberstown staff raised several issues surrounding the referral protocol in relation to (1) altered referral criteria, (2) additional work burden and (3) false hope.

**ALTERED REFERRAL CRITERIA**

Staff described how ‘the guidelines were fairly specific [initially], there were just three items of criteria that needed to be met, but I have found that the goalposts have been adjusted according to individual cases …’* those boundaries have become blurred now’.

Oberstown staff also described how some of their referrals could be ‘a waste of time’ when young people were not enrolled. This opinion resonates with the finding that about half (nine of 16) of the young people referred from Oberstown were not enrolled on the BSS. Analysis of Extern’s documents identifies that four of the referrals were inappropriate; two of the young people did not meet the age criteria and two had been in residential care.

**ADDITIONAL WORK BURDEN**

Oberstown staff identified concerns around the real-time element of the referral process, for example ‘if the child is admitted today the referral has to be done tomorrow’. They described how this placed additional time burdens on the Oberstown administration staff.

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*Detained from Court 55, living within 20 miles of Smithfield and have a suitable caregiver who will agree to partake in the scheme.

**Young people under 18 cannot give consent but can give assent.

***The BSS Standard Operation Procedure outlines the process from receipt of a referral form to preparation of a court report.

*To ensure clarity, some text from the original quote is replaced by ‘…’; the context of the quote is unaltered.
FALSE HOPE
There was a requirement to obtain the young person’s assent prior to contacting their parent/caregiver. Oberstown staff described this as giving false hope to young people adjusting to life in Oberstown if the young person was subsequently not enrolled on the scheme. An example was given of a caregiver refusing to engage with the scheme after assent had been obtained from the young person.

At the time of interviews, the BSS team was engaging with Oberstown staff to put procedures in place to minimise the referral of ineligible young people and to reduce the administration burden for the Oberstown staff. This solution included phone calls from Oberstown administration to the BSS manager to check the suitability of the young people for referral.

Referrals from Court 55 were not without challenges; analysis suggests that referrals were dependent on the engagement of a small group of solicitor’s firms. Continuous awareness building on the part of the BSS team and positive advocacy by the court staff with legal representatives new to Court 55 were necessary to ensure continual referrals.

Given the importance of referrals to the operation of BSS, barriers to appropriate referrals should be monitored going forward.

Why did the Bail Supervision Scheme work? Processes
In this section, we present findings from a thematic analysis of the interview data. Analysis identified ‘buy-in’ as a major theme. Processes at three levels of operation – governance, Court 55 and the BSS team – that promoted ‘buy-in’ and facilitated interagency collaboration are presented.

GOVERNANCE
Governance of the scheme by the oversight group was flexible, effective and efficient. The oversight group, as intended (Redmond, 2017), provided scaffolding for the BSS, facilitating buy-in of statutory bodies with the non-statutory provider, Extern. As previously discussed, the oversight group engaged in ongoing problem-solving processes to ensure the optimum operation of the scheme. The open communication policy between the chair of the oversight group and the BSS manager facilitated timely and flexible problem-solving.

COURT 55
Strong advocates, in particular the Judge and the Court Sergeant in Court 55, contributed to buy-in to the scheme by members of An Garda Síochána and defence solicitors. The BSS team described the Court Sergeant as ‘essential in the whole thing … one of the first points
of call’. The Court Sergeant promoted the scheme among Gardaí, identified case contacts for referred young people within An Garda Síochána, provided information and highlighted any safety concerns on referrals to the BSS team. The Court Sergeant also identified suitable referrals and advocated for the scheme with legal representatives who were new to Court 55.

**BSS TEAM**
The BSS team was proactive in obtaining referrals and engaging the support of new legal representatives. The BSS team attended court hearings with the young people enrolled on the scheme. Stakeholders in the criminal justice system described this presence as helpful in building awareness and promoting the scheme to various stakeholders including legal representatives and families who may benefit from the BSS.

**INTERAGENCY COLLABORATION**
‘Buy-in’ facilitated interagency collaboration and this contributed to successful outcomes. For example, one solicitor described how all agencies were ‘on the same page’, which provided a ‘joined-up approach’ where ‘all of those things just all lined up together’, resulting in positive outcomes for the young people.

Frontline professionals described how informal, open and regular communication between agencies benefited practical and reciprocal interagency collaboration. For example, a Garda Case Manager described how there was a ‘two-way street and that when they ‘have any inkling … [young person] is up to no good … give [BSS team] the heads up’. Frontline professionals also described informal communication as important for the efficient transfer of essential yet sensitive information. The BSS team were proactive; they actively followed up contacts, identified barriers to engagement by agencies and brokered relationships between agencies and families.

The BSS team initially exploited the established MST brand and reputation (as an evidence-based model) to encourage ‘buy-in’ and interagency collaboration. However, they replaced product-related branding with more proximal good news stories as the scheme progressed and developed its own performance record.

**Implementing Multisystemic therapy nested within the Bail Supervision Scheme**

In this section, we present findings about the implementation of MST. This includes fidelity, application, teamwork, engagement of families in the scheme, interventions undertaken with the five case studies and benefits for the families beyond the young person. We also outline
challenges to implementing an MST model within the confines of requirements of the BSS. We have based all findings in this section on the analysis of the interview data (including focus group data, see Appendix 1) and the MST comprehensive fidelity report.

**FIDELITY**
MST conducts ongoing fidelity measurements. We relied on these routine measures for the evaluation period to assess both therapist and supervisor fidelity to the implementation of the MST model. Two distinct measures captured both therapist and supervisor fidelity. These reported strong adherence to the MST model. Therapists’ adherence was an average of .86 (adherence is achieved for scores greater than .61) and supervisor adherence was .92 (.>80 is considered high average).

*How was fidelity measured?*
All caregivers completed a self-report measure, which captured the caregiver’s perception of their therapist’s compliance with MST principles. These included the therapist’s communication skills and ability to understand their situation. It also captured the degree to which their therapist took a strength-based and problem-solving collaborative approach to the young person’s behaviour challenges including reducing the young person’s access to problematic peers and promoting educational/vocational placement attendance. It also captured the degree to which the therapist engaged in relationship building within the family and brokering relations beyond the family. All therapists completed a self-report measure, which captured the therapist’s perceptions of their supervisor’s (BSS Manager) performance in relation to (a) structure and process, (b) adherence to principles, (c) analytical process, and (d) clinician development.

**APPLYING MST PRINCIPLES**
The BSS team described that while it was ‘hard to make the shift’ from an individual client-based model to the MST holistic family model, once the therapists had adjusted to the MST model, they found this approach effective. For example, one therapist described how ‘100 per cent I wouldn’t go back to the other way of working’. The BSS team described MST as an analytical model; for example: ‘It’s a basic process … what’s causing this problem, what are we going to tackle first, let’s do something about it, did it work, back to the start and following it around’. Analysis suggests that this process afforded flexibility in problem-solving

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*The maximum adherence score is 1.
*Ref*erred to as the ‘do loop’.
and adaptation to individual families’ needs. The model was also described as goal-focused; for example: ‘there’s no random acts … everything had a purpose’ (BSS team).

TEAMWORK
Strong teamwork between the BSS team members facilitated access to collective knowledge and skills. Weekly team supervision meetings ensured all team members were familiar with the progress of each case and any challenges that had arisen. This, together with input from the external MST consultant, ensured a sharing of practice wisdom and adherence to the model. The BSS team also described the benefits of ‘continuous booster’ training sessions, chosen by the team to target specific problem areas: for example, contingency management to tackle drug use and techniques to manage violent and aggressive behaviour.

ENGAGEMENT OF FAMILIES
The engagement of families with the BSS and their buy-in to the MST model were vital to successful outcomes. For example, a BSS team member described how ‘if you don’t have that [engagement] nothing else is going to work’. The families involved in the scheme tended to have histories of involvement with multiple agencies. For example, a member of An Garda Síochána described how the referred families tended to be ‘super-saturated families with every service under the planet’. However, the prior engagement for these families was characterised by poor relationships with both statutory and non-statutory bodies. Due to their circumstances, the families were very marginalised. To overcome potential barriers, the BSS team were flexible and worked around the caregivers’ lives. For example, a caregiver described how ‘it was great they came to my home’. The BSS team described how they built strong relationships with the caregivers with a non-judgemental, strengths-focused approach, which empowered the caregiver by positioning them as experts in dealing with their situations. As such, a solicitor described how the BSS ‘wasn’t about wagging a finger at parents, but it was about actually real on-the-ground support … the first time ever that people have actually said how can we help?’. The process was collaborative; caregivers were central to all decision-making and development of the intervention. For example, a caregiver described a collaborative decision-making process: ‘it worked for a while … but then I had to go back and say to [BSS therapist] “we have to look at this a different way as regards to reward scheme”’ so we did and then we worked another scheme out’. The BSS team also described how they placed priority on the ‘practical things that parents can take control of first’. The BSS team provided support at multiple levels – practical, informational.

42 The BSS team described how flexibility around the implementation of the model improved when the MST consultancy moved from an American to a UK-based consultant.
43 ‘Reward scheme’ refers to the original plan identified through discussions between the BSS therapist and the caregiver.
and emotional – that built caregivers’ skills and confidence necessary to ensure sustainability of changes. For example, one caregiver described how BSS gave her ‘a lot more confidence in dealing with services’.

Descriptions from the young people and their caregivers indicate their experience of engagement with the scheme. For example, a young person described how the BSS ‘helps with my ma … [the therapist] was giving my ma tips on how to deal with problems … she picked up on it like she did’. While one caregiver described how she ‘wouldn’t change any of it like, I got, like I got perfection didn’t I, like getting [BSS therapist] as well as all the benefits’, another simply stated that the BSS was ‘the best thing that ever happened to us.’

Indicating the potential consequences of poor engagement, one caregiver repeatedly described how their family did not need the intervention that was on offer. For example: ‘No I didn’t need to ring Extern, we don’t need Extern, we didn’t need Extern’. While initially compliant with bail conditions, this specific young person’s behaviour rapidly declined; he reoffended and was arrested and detained to Oberstown.

**INTERVENTION**

In general, at the onset of the BSS, priority was given to securing educational placements for the young people. The BSS team supported caregivers to overcome any barriers to attending such placements, for example by establishing a morning routine. However, for one young person the initial intervention focused on stabilising his home environment by supporting his caregiver in her recovery from addiction and improving the young person’s living conditions. The BSS team, together with the young person and his caregiver, explored reasons behind the young person’s offending behaviour and a plan was developed to intervene. For example, when a young person identified boredom as a motive, they developed a plan to increase the young person’s pro-social activities. These were in line with the young person’s interests, for example attending a gym or the local youth club.

The BSS team members supported caregivers in understanding the unintended consequences of their current parenting practices and suggesting suitable alternatives. Examples of inappropriate practices included the exclusion of the young person from the home (so that he became temporarily homeless) when he misbehaved, providing the young person with the means to purchase illegal drugs to facilitate his sleep or the practice of giving in to the young person’s demands and aggressive behaviour to temporarily appease him. Caregivers were provided with skills to reduce the young person’s drug use and to manage his aggressive behaviour in the home. Caregivers were also encouraged to provide appropriate incentives for positive behaviour.

The BSS team together with the caregiver identified procedures to support the young person’s adherence to their bail conditions, including ways to increase surveillance. The
BSS team also worked with one young person to help him manage his own exposure to family violence in the home. Indeed, the BSS team provided safety plans for two of the young people to enable them to manage adverse situations in their homes. The BSS team intervened to reconnect two of the young people with their biological fathers; one young person went to live with his reconnected father after the BSS.

While BSS therapists highlighted obvious benefits of how a positive relationship between the young person and supervising officers (including Garda case manager and probation officers) would be viewed by the court, to the families, there was evidence of the development of genuine relationships. Indeed, all probation officers described how the five young people had increased attendance at probation meetings. This extended beyond the five case studies. The probation officers described how the engagement of young people enrolled on the BSS was in general better than that of the young people who were not enrolled.

To facilitate sustainability, the BSS team continually monitored progress with all interventions, explored barriers to progress and developed procedures to ensure that the caregivers could overcome these. For example, a member of the BSS team described how they monitored ‘the barriers that you’re working on to make sure that they [can] do it themselves’.

**ADDITIONAL BENEFITS**

Analysis of the data also suggests that engagement in the scheme had generalised benefits beyond the young person. For example, one caregiver described how engaging in the BSS ‘has made me a lot better as a person, stronger’ while another caregiver described how ‘it’s not only helped me and helped [young person] and [it’s] helped [other members of the family]’. One young person described his mother as ‘a new woman’ and suggested that this had benefits for his younger brother. A probation officer described how the skills gained by the caregiver during the BSS also benefitted younger members of that family. For example, ‘for the next boy that’s coming because he’s 12 … the stuff that they were learning to try and manage [young person] … going to be more helpful for the younger brother … be able to implement those things at an earlier stage’.

**Challenges in applying the MST model to fit BSS requirements**

The BSS was designed to embed MST, an evidence-based model, within normal pre-trial court processes. Analysis identified some challenges to fit the MST model within the BSS. These include the requirement of the BSS to report breaches to bail conditions, the perception of an inadequate duration of the BSS and the MST inclusion criteria for referrals.
REPORTING BREACHES
The BSS team were required to report all breaches by the young people of their bail conditions to An Garda Síochána. On the ground, this hampered trust and engagement with families. The BSS team described how they took the approach of being ‘honest and up-front with families’. They also worked to counteract perceptions of negativity by highlighting the positives gained by the families through their engagement with the BSS and other services: for example, their access to additional resources and, importantly, receiving positive court reports from the BSS, probation and the Gardaí which may influence the young person’s outcome post-trial. The BSS team worked to broker relationships between the families and An Garda Síochána, highlighting the benefits to the families of working with the young person’s Garda case manager. Indeed, analysis suggests that An Garda Síochána case managers played an important role in the case studies where there were positive outcomes.

THE BSS TIMEFRAME
The BSS intervention period is prescribed by MST guidelines, which recommend intervention durations of 120 to 150 days. The average BSS duration for the 22 young people enrolled on and discharged from the scheme during the evaluation period was actually 146 days, and this rose to an average of 165 days for the 15 young people who completed the intervention with a planned exit.

Despite this, all caregivers expressed concerns about what they considered to be the short length of the programme. For example, one caregiver described the length of intervention as ‘its only downfall’. Analysis suggests that another caregiver’s motivation for taking part in this research study may have been to voice her perspective that the scheme was too short and that there should be a follow-on programme. This caregiver repeatedly returned to this point during interview; for example, ‘they need to spend a little bit more time … when the six months is up, they’re just gone’ and ‘I really really think they do need that aftercare, they can’t just leave the kids like that’.

There was also a perception among frontline professionals, given the chaotic nature of the marginalised families recruited for the BSS, that the interventions were too short. For example, a probation officer queried ‘15 years of dysfunction and five months to put it right’. A solicitor stated that ‘sometimes unfortunately with the time limits, they [BSS] stop at a crucial stage’. Other frontline professionals voiced concerns around sustainability. For example, a probation officer described her reaction on hearing the scheme was ending:

Bail Supervision Scheme, Standard Operating Procedure (dated 10 December 2018).
MST intervention provides caregivers with skills to improve family functioning.
'don't withdraw, they're just at the pinnacle, they're just there, they just need to be sustained now'. Continuing this theme of a perception of premature programme termination, a social worker described how for one young person there was ‘a huge gap so when it finished … he slid down … once [BSS therapist] stopped going in …. there was no dinner … there was no washing … there was no organisation’.

As reported above, BSS team members described how they prioritised intervention tasks that they considered sustainable. In another example, one BSS therapist stated that ‘the focus should never be just me trying to have that relationship with the young person because it’s not sustainable’. A therapist said that they found completing a specific case ‘very very difficult’; another described how ‘I think it’s [duration] perfect … the intensity that we work with [families] … the chaos … burned out … I’ve come to saturation with the families after five months and the families 100 per cent have come to saturation with me.’ Consistent with this, the manager of the BSS team stated, ‘there’s no evidence to say in MST that if you keep it open for another six months you’re going to get a better outcome’.

To further examine the relationship between treatment length and improved outcomes, we examined the available quantitative data. Our analysis of the post-intervention PULSE crime data from An Garda Síochána indicates that while this is possibly counterintuitive, there is no relationship between extending MST and reduced reoffending. Analysis of the data (n=18) that examined the relationship between days of intervention and offending (PULSE crime data) shows no relationship (r = .09, p = .73).

The evidence presented therefore clearly indicates that extending the intervention did not appear to benefit the young person in terms of reducing their reoffending behaviour.

**THE BSS INCLUSION/EXCLUSION CRITERIA**

The primary eligibility criterion for the BSS was that the young person must be at risk of bail denial. The BSS Programme designers based additional eligibility criteria for the scheme on established MST criteria.

Clause 1 of the inclusion criteria states: ‘Young person aged 12–17* years (*must be at least three months prior to 18th birthday).’ This excluded young people approaching their 18th birthday but who were remanded to Oberstown. Examination of Extern records (referral

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46 Sustaining behavioural change is a specific goal for MST and includes measures to facilitate sustainability such as providing the caregivers with skills and tools, and increasing families’ support networks are in place.
47 We excluded the young people who were in custody for greater than 140 days.
48 13 of the 15 young people who completed intervention had an intervention duration in excess of the recommended minimum 120 days. While a 14th young person was on his second referral, taking his first intervention into account he had received a total intervention in excess of the recommended duration.
49 For a full list of inclusion and exclusion criteria see Appendix 3.
pathway) also identified a young person enrolled on the BSS who was discharged early\(^{39}\) from the scheme because he was remanded to detention for a period. This young person could not be re-referred to the BSS because following the period of remand as he was outside the age restrictions.\(^{39}\)

Clause 4 of the inclusion criteria states: ‘Young person must have an identified primary caregiver who they can live with.’ This in practice excluded young people in residential care,\(^{39}\) and a lack of access for these young people was raised by multiple stakeholders during interview, including the Judge, the oversight group, An Garda Síochána, the BSS team and defence solicitors. For example, a member of An Garda Síochána stated that the BSS ‘can’t deal with kids in [residential] care which would be a huge one’. A defence solicitor questioned whether the BSS ‘could be tweaked somewhat to meet their [young person in residential care] very specific needs’ and stressed that this was ‘not as the replacement for that [current] system but to complement it’.

Clause 3 of the exclusion criteria renders ineligible a ‘young person whose psychiatric problems are the primary reason leading to referral, or who have severe and serious psychiatric problems’.\(^{38}\) While there was no evidence to suggest that mental health challenges were the primary reason for referral to the BSS, analysis of the interview data suggests that at least one young person with complex mental health problems was referred to the scheme from Oberstown. He had an early exit from the scheme to facilitate residential treatment for his mental health needs. Following stabilisation, the young person was re-referred to the BSS and had a successful outcome. This case further highlights the complex needs of the young people referred to the BSS.

Reputation

A fundamental assumption for the successful development of the BSS was that developing confidence of stakeholders in the scheme would contribute to increased referrals (Redmond, 2017). As mentioned above, good news stories – success stories of existing and previous participants in the scheme – trumped the initial prestige of MST being one of an elite range of evidence-based programmes, in the promotion of the BSS. As the BSS became

\[^{39}\] In line with MST Services guidelines.
\[^{38}\] Analysis also suggested that the age restriction impacted on families completing intervention, for example ‘he was coming up to the age limit . . . isn’t it best that he does the sentence now in Oberstown rather than [taking the risk of] going to adult prison’ (The BSS team).
\[^{38}\] This did not include young people in foster care, specifically if a foster carer agreed to engage with BSS, or young people with social work involvement and young people on secure care waiting lists and being transitioned home from secure care (2 cases during evaluation period) (The BSS manager).
\[^{38}\] There is no evidence to suggest that MST is effective in treating serious psychiatric problems and that specialised services may be required in these cases (the BSS manager).
established, direct experience of its operation of the BSS and/or accounts of real-life outcomes appeared to be very important in terms of sustainable positive branding.

While the premise of MST is to work predominantly with the young person’s primary caregiver, analysis identified that the BSS team also developed transformative relationships with the young people. For example, a Garda case manager stated that ‘the therapist was one of the few people who’d reached him [young person]’.

Other findings from analysis of the interview data suggest a growing confidence in the BSS. A member of An Garda Síochána described a change from initial concerns over ‘another agency, more bureaucracy’ and ‘more do-gooders’ to Gardaí on the ground ‘sing[ing] their praises’, with recognition that the BSS team were ‘fabulous in respecting the Guards and the Guards’ duties’. Frontline professionals described the BSS as ‘an extra eye’; for example, one solicitor said that rather than more bureaucracy, the BSS was ‘like CCTV, it’s an independent witness like … [this] alleviate[s] the concerns of the Guards and the judge’. Frontline professionals also described the dedicated work by the BSS team; for example, a Tusla social worker stated that ‘it was the whole putting plan in place and the extra mile with the bail supervision that worked’. A probation officer stated that ‘honestly I don’t know how much more that therapist could have done without moving in with the family … they did really amazing work and are very in touch’.

A solicitor described a representative stakeholders’ perception of the BSS as ‘a really wonderful experience actually to be involved in as a practitioner because you could see the potential’, while a young person described the benefits of the BSS more personally and no less significantly as ‘it’s worked out grand for me’.
Conclusion

This report presents the findings of an evaluation, which combines multiple methods and data sources. Findings indicate positive outcomes for the young people enrolled on the scheme as follows:

1. The evaluation found a 72 per cent reduction of average offending rates in the six months post-BSS (when compared to offending rates six months pre-BSS) for the young people enrolled on the BSS. This represents a net reduction of reoffending for the BSS group almost twice that of the control group.

2. During the intervention period, the BSS cohort had an average reduction in criminal detections twice that of the control group (39 per cent and 19 per cent respectively). When discharged from the scheme, the four selected subjects of case studies who had a planned exit from BSS were compliant with their bail conditions.

3. Of the 13 young people enrolled during the evaluation period and who completed the intervention, 11 attracted a non-custodial disposal at their sentencing hearing, thereby avoiding detention.

Analysis of interview data with over 40 stakeholders provides substantive assurance that the BSS contributed to these documented positive outcomes. The importance of engagement or ‘buy-in’ from all levels of stakeholders to achieving the positive outcomes was apparent.

- At a management level, findings suggest that the oversight group, composed of members of each stakeholder agency, promoted investment in the scheme by the members of their respective agencies. Informal communication with the chair of the oversight group and the BSS manager contributed to timely problem-solving strategies.

- At an interagency level, positive advocates within the court system, and a proactive BSS team, contributed to the ‘buy-in’ necessary for efficient collaboration. The informal reciprocal communication between the BSS and agencies/services contributed to the successful implementation of BSS and referrals to the scheme.

- On the ground, engagement of the caregivers in the MST model was promoted by the strengths-based collaborative approach of the BSS team.

- Findings suggest strong adherence by the BSS team to the MST model.

- The dissemination of emerging positive outcomes or good news stories along with a growing appreciation of the work of the BSS team contributed to a growing confidence in the scheme. This confidence supported the operation of the BSS and continual referrals to the scheme.

In brief, the body of evidence presented suggests that the BSS contributed to:
a) Changes in the young person’s behaviour including reduced reoffending and adherence to bail conditions.

b) Gaining the confidence of the judicial system (courts, An Garda Síochána).
Glossary of Terms

Justice related terms

Garda Case Manager: A member of An Garda Síochána who case manage young people targeted as at high risk of offending.

Garda Síochána Analysis Services (GSAS): Located in Garda Headquarters in the Phoenix Park, the GSAS is responsible for providing analytical support to the Garda organisation.

Pre-trial: This term is meant in the broadest sense to refer to the court processes that occur in the time period between the initial court hearing to the final disposal of a case.

Probation bond: Once found guilty of a crime a judge may choose to place a young person on a probation bond. This sanction means that the young person remains in the community while under the supervision of the Probation Service.

PULSE: Police Using Leading Systems Effectively, An Garda Síochána’s IT system used to record crime related incidents and intelligence reports.

Remand: During the period between the initial hearing and final discharge of a case a young person may be either remanded on bail or detained on remand. Young people enrolled on the BSS are remanded on bail to the BSS.

Sentencing hearing: The hearing that occurs post-conviction when the court imposes a sanction on the young person.

MST related terms

BSS manager: The Extern service manager, trained as a MST supervisor, who is responsible for supervising the BSS team and the implementation of BSS.

BSS team: The Extern workers responsible for implementing the BSS. All members of the BSS team are also MST therapists. Where appropriate they are referred to as therapists.

Caregiver: The relevant adult who has agreed to take on the caregiver role and work directly with the BSS team for the duration of the scheme (this term may include for example; the young person’s parent, an extended family member, foster carer).
**Early exit**: Where a young person is discharged from the MST programme before the recommended timeframe and the discharge criteria have not been met (see Appendix 4 for further details).

**Extern**: A social justice charity that works with young people to promote change. DCYA commissioned Extern to implement the BSS in September 2016.

**MST Services**: The international organisation, which developed the evidence based MST model and oversees its implementation. [http://www.mstservices.com/](http://www.mstservices.com/)

**MST Therapist**: The term used by MST Services to describe the frontline staff that work directly with the families.

**Planned exit**: Where the discharge of a case occurs by mutual agreement of both the MST team and caregiver; and when the MST defined discharge criteria were met (see Appendix 4 for further details).

**Referral offence**: The offence for which the young person was remanded on bail to the BSS.

**Methodology terms**

**Contribution analysis**: A realist methodology proposed by Mayne (2008) which follows a six-step process based on a theory of change to provide plausible evidence that an intervention contributed to the documented outcomes.

**Fidelity**: A measure of adherence to the criteria/protocols of a programme.

**Quasi-experimental design**: A method that uses a pre-existing group for comparison against a treatment group to estimate the causal impact of an intervention on a target population. It is an alternative to a randomised control trial (experimental) where random assignment of individuals is not feasible.

**Theory of Change**: An ex-ante statement proposing a causal chain whereby bail supervision will contribute to impact. The evaluation tested this theory of change.

**Triangulation**: The incorporation of data from multiple sources and comparison of findings from multiple methods to ensure consistency of findings and therefore strengthen the evidence obtained.
Appendices

Appendix 1: Methodology

We used a contribution analysis (Mayne, 2008) which incorporated a quasi-experimental design to evaluate the BSS. Contribution analysis consists of six sequential steps. We briefly outline each step together with the methods used to address specific research questions in Appendix 2 (See pages 46 to 49). We received ethical approval from AHSS Research Ethics Committee before commencement of the research.

Overview of data sources and methodologies

In line with contribution analysis, our evaluation of the BSS incorporated diverse methodologies and diverse sources of data as presented in Table 3 below.

Table 3: List of Data Sources, the method used to analyse and the evaluation type

<table>
<thead>
<tr>
<th>Data Sources</th>
<th>Methodology</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>PULSE Extern Admin Data Oberstown Admin Data</td>
<td>Quasi Experimental</td>
<td>Outcomes-Re-offending</td>
</tr>
<tr>
<td>PULSE Extern Case Files Interview Data</td>
<td>Case Profile analysis Documentary analysis</td>
<td>Outcome: Behavioural changes</td>
</tr>
<tr>
<td>Extern Admin Data</td>
<td>Analysis of Referral patterns</td>
<td>Programme throughput</td>
</tr>
<tr>
<td>PULSE Extern Admin Data</td>
<td>Correlation Analysis</td>
<td>Relation between length of intervention and reoffending</td>
</tr>
<tr>
<td>MST Services Data</td>
<td>Synthesis of MST Report</td>
<td>Process: Fidelity</td>
</tr>
<tr>
<td>Interview Data</td>
<td>Thematic analysis</td>
<td>Process: Implementation</td>
</tr>
<tr>
<td>Interview Data</td>
<td>Thematic analysis</td>
<td>Reputation: Confidence in the BSS</td>
</tr>
</tbody>
</table>

**Faculty of Arts Humanities and Social Science, University of Limerick.**
PULSE crime data: Quasi-experimental

The Garda Síochána Analysis Services (GSAS) conducted a quasi-experimental analysis to compare Garda PULSE crime data for the young people on the BSS (intervention group) with a matched group of young people outside the pilot area who were detained on remand to Oberstown during the evaluation timeframe (control group).

**Sampling**

- **Intervention group**: Extern provided GSAS with the relevant information for the 22 young people enrolled on the BSS for the evaluation period (intervention group).
- **Control group**: Irish Youth Justice Service provided GSAS with the relevant information for the 98 young people who were detained on remand during the evaluation period, from courts outside the pilot area (control group).

The design faced several challenges. Over the evaluation period the intervention group had varied start dates and durations on the BSS. However, the control group also had varied start dates and duration for their period of remand on detention. To enable the comparison of equivalent intervention and control groups, a Monte Carlo (Smith, 2013) simulation was used to calculate appropriate start dates, and equivalent (to the BSS duration) intervals to determine an equivalent post-intervention start date for the control group. This enabled the comparison of offending rates for the two groups over three time points: six months (180 days) pre-BSS, interval (intervention duration) and six months post-BSS.

First, GSAS calculated the distribution of start dates, the BSS durations and non-detention days for the intervention group. Second, GSAS randomly applied the equivalent start dates and interval durations to a random sample of the 98 individuals in the control group. In line with Monte Carlo stimulation, GSAS applied the random distribution of start dates and interval durations across the control cohort: this process was repeated 60,000 times to ensure the best fit between the intervention and control groups.

Figure 4 below shows an example of where there was a good fit between the intervention (BSS) and control (non-BSS) groups for start dates, interval (time lapse between the six months pre- and six months post-BSS intervention) and non-detention days. In the example below, there was a good match between the two groups (correlation of 0.93 for start date, 0.99 for BSS/interval duration and 0.97 for non-detention days). Of the 60,000 stimulations,
1,000 random samples had similar patterns to the intervention group so were considered a good fit and used for further analysis.

**Figure 4: Plot of the start dates and BSS/interval durations (by number of young people) and average non-detention days for the BSS (intervention) and non-BSS (control) groups**

**OFFENDING RATE**

The number of offences recorded in the PULSE crime data was adjusted (standardised) to account for two varying factors: (a) number of days a young person was detected for an offence and (b) number of days detained in Oberstown.

a) Young people may be involved in spates of offending with more than one offence occurring on a particular day; however, the research team proposed that consistent involvement in crime over time (persistence) was more representative of problem offending behaviour. Offending days scores were calculated to reflect the number of days the young person committed a crime (as opposed to number of crimes committed). For example, in the six-month period, a young person had seven offences recorded on the PULSE system. Three of those were committed on a single day therefore the young person is said to have five offence days.

b) Young people who are detained have reduced opportunity to offend. Offending rate scores were calculated to reflect the number of days detained as follows:

\[
\text{[Number of offence days/number of days not in detention]} \times 180 \text{ days}
\]

Continuing the example, during the 180 days (six months), the young person spent 80 days in detention. The young person’s offending rate is \([5/(180 – 80)] \times 180 = 9\) offending days for the six-month period.

Of the 22 young people enrolled on the BSS (intervention group), four had fewer than 35 non-detention days during the six months post-BSS. As this significantly influenced their opportunity to offend, they were excluded from final analysis. Final intervention sample = 18

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\(^{47}\) IYJS supplied information on the period of detention (remand and committal) necessary for calculating offending rates.
young people. They had a mean age of 15.78 years (min 13, max 17 years) on enrolment, an average of 172 non-detention days in the six months pre-BSS (min 112, max 180 days), an average bail supervision intervention of 152 days (min 75, max 291 days) and an average of 162 non-detention days in the six months post-BSS (min 62, max 180 days).

**CHANGE IN OFFENDING RATE**

- Intervention group: Total rate of offending (n=18) pre-BSS (six months) compared to their total rate of offending post-BSS (six months).
- Control group: Average total rate of offending (random samples of 98 young people × 1000) pre-remand start date (six months) compared to their average total rate of offending post equivalent BSS duration (six months).

**Analysis of Referral pathways**

We examined administration data recorded by the BSS team (Extern) to estimate the number of young people who were referred to the BSS from both Court 55 and Oberstown from May 2017 to June 2018. We examined the numbers and context of young people accepted, enrolled and discharged types (planned or early exit) and attrition at each stage of the pathway.

We would like to clarify that this referral list differs from the enrolment list (used for the quasi-experimental design and the documentary analysis of the case summaries) (see Appendix 5).

**Synthesis of MST Fidelity Report**

MST management provided a fidelity report, which included both the programme implementation data report and the supervisor adherence report.

The programme implementation data report included the therapist adherence measure. A total of 28 questions captured caregivers’ perceptions of the therapists’ adherence to MST principles. All caregivers completed the measure (two weeks after enrolment, then monthly) (completed measures = 74). Scores were averaged to give an average adherence score for each therapist. A score of .61 was considered adherence to the MST model.

The supervisor adherence measure consisted of 36 questions, which captured therapists’ perceptions of their supervisor’s performance. Therapists completed the measure every two months (completed measures =11). Scores were averaged to give an average adherence score for all four subsections.
Documentary analysis

The BSS team provided redacted case summaries for the 22 young people enrolled on the BSS during the evaluation period. Research Evidence into Policy Programmes and Practice (REPPP) researcher John Reddy independently reviewed and summarised the case files for each of the five young people selected as a focus for the research interviews. We triangulated the summaries with the findings from the case study analysis and PULSE crime data to provide the synthesised case summaries presented in the findings.

All case summary documents were also analysed for evidence of compliance with bail conditions. These findings were then triangulated with both PULSE crime data and the findings from the case studies analysis to examine young people’s adherence to bail conditions.

*We acknowledge the work of research assistant Mr Tony O’Leary on the analysis of the case summaries.*
**Thematic and Case study Analysis**

**DATA COLLECTION**

To facilitate a focused analysis and the triangulation of findings, the research team centred the process evaluation on an analysis of five young people’s journey through BSS. The BSS team invited all 22 primary caregivers and young people who had been enrolled on the BSS during the evaluation period to take part in the evaluation. Six caregivers and five young people volunteered to be interviewed. Two of the young people did not attend interview (see Table 4 below). The BSS manager described this selection of families as representative of the more challenging young people enrolled and the Judge confirmed that the young people presented in court with very problematic behaviour.

*Figure 5: Interview structure centred on five young people, their caregivers, MST therapist, frontline staff, administration, management and the Judge from Court 55.*
We took a bottom-up approach by interviewing the young person (where available) and those closest to them first (see Figure 5 above). This ensured that their views informed the interviews with the frontline professionals, which subsequently informed interviews with members of management. The research team felt that this would facilitate the collection of comprehensive data, which would provide a targeted 360° view of the BSS process (see Figure 5 above).

In total, we interviewed 35 people, while six members of the oversight group took part in a focus group (n=41) (see Table 4 below). Initial interviews were with the young people’s caregivers followed by their BSS therapists. Then, to seek diverse perspectives, we interviewed additional frontline staff who worked directly with each young person, including the young person’s Garda case manager and probation officer. We also interviewed a purposeful selection of other frontline stakeholders who had worked directly with the young person. These included two defence solicitors, one Tusla social worker, three Oberstown case managers, two community-training centre (CTC) caseworkers, and a community drugs counsellor (see Table 4 below). Some of these professionals worked with more than one of the five young people (to insure anonymity, we have not identified these). Next, to give a wider overview of the processes involved, we interviewed administration staff from Oberstown, the Court Sergeant and the BSS manager. We then conducted a focus group with the BSS oversight group. Finally, we interviewed the Judge who had presided over Court 55 during the evaluation period. To ensure confidentiality, the young people are referred to as YP1 to YP5.

The lead researcher conducted the majority of interviews, with the exception of the focus group and the final interview with the Judge, which were conducted by both the principal investigator and the lead researcher. Participation was voluntary and all respondents provided informed consent (or informed assent where under 18) prior to interview. We conducted the interviews from November 2018 to March 2019. We interviewed four of the caregivers in Extern’s offices and two in their own homes. We interviewed one young person in a joint interview with his caregiver, one in Extern offices after his caregiver’s interview, and the third young person in Oberstown. We conducted all other interviews either in the respondent’s own office/station/court or in Extern’s office. We present interviewee details in Table 4. We interviewed 35 people in 32 interviews (three interviews with two interviewees). These were audio recorded and lasted an average of 61 minutes (minimum 19 minutes and

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Frontline professionals who the BSS team identified as having played a significant role in the young person’s experience of the BSS and who volunteered to be interviewed. Of the five legal representatives contacted, two responded to requests to be interviewed.

All respondents were fully informed about the purpose of the study, and their right to withdraw at any stage before they signed consents/assent forms. They were also informed of their right to review their transcript.
maximum 237 minutes; total of 33 hours of audio). We also conducted a focus group with members of the oversight group (n=6) of one-hour duration.

**Table 4: Interviews conducted with the young people, their caregivers, frontline staff, administration and management**

<table>
<thead>
<tr>
<th>Case</th>
<th>Young Person</th>
<th>Caregiver</th>
<th>MST Therapist</th>
<th>Probation Officer</th>
<th>An Garda Siochána</th>
<th>Additional Professionals</th>
<th>Defence Solicitors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kevin</td>
<td>YP1</td>
<td>CG1</td>
<td>MST1</td>
<td>PO1</td>
<td>AGS1</td>
<td>WP1</td>
<td>-</td>
</tr>
<tr>
<td>Max</td>
<td>-</td>
<td>CG2</td>
<td>MST2</td>
<td>PO2</td>
<td>AGS2</td>
<td>WP2</td>
<td>LR2</td>
</tr>
<tr>
<td>Gareth</td>
<td>-</td>
<td>CG3</td>
<td>MST3</td>
<td>PO3</td>
<td>AGS3</td>
<td>SW3</td>
<td>LR3</td>
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<td>Eddie</td>
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<td>CG4</td>
<td>MST4</td>
<td>PO4</td>
<td>AGS4</td>
<td>DrugC4, Obkeyworker4</td>
<td>-</td>
</tr>
<tr>
<td>Zach</td>
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<td>CG5</td>
<td>MST5</td>
<td>PO5</td>
<td>AGS5</td>
<td>WP5</td>
<td>-</td>
</tr>
<tr>
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<td>-</td>
<td>CG6</td>
<td>MST6</td>
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<td>BSS Manager</td>
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<td>Oberstown keyworkers</td>
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<td>Oberstown Admin</td>
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<tr>
<td>Court Sergeant</td>
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<td></td>
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<td>AGS6</td>
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<tr>
<td>Focus group oversight group</td>
<td>MST 8,9</td>
<td>PO8</td>
<td>AGS7</td>
<td>TUSLA8</td>
<td>IYIS8</td>
<td></td>
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<tr>
<td>Judge</td>
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<td>Judge</td>
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</tbody>
</table>

**INTERVIEW DATA ANALYSIS STRATEGY**

We transcribed audio-recorded interviews and the focus group and imported the transcripts into NVivo 12 Pro software. We adopted the analysis approach developed by the REPPP research team for the Greentown Project (Naughton, Redmond and O’Meara Daly, in press). The analysis consisted of two parts: case profile analysis and thematic analysis.

**CASE PROFILE ANALYSIS**

Case profile analysis provided a thorough analysis of the five young people. In NVivo, we systematically, line by line, coded transcripts to developing categories, which were subdivided by case. Here we followed the same order as the interview (starting with the transcripts from the inner layer and proceeding outwards) and commenced coding prior to

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*NVivo 12 Pro is computer assisted/aided qualitative data analysis software.*
completion of data collection. We compiled detailed reports based on the diverse perspectives for each young person grounded in the data (illustrated with extracts from the data). We paid particular attention to changes in the young people’s behaviour and factors (contexts) that influenced these changes.

**THEMATIC ANALYSIS**

During analysis we identified, interpreted and synthesised patterns within the data to form themes (Braun and Clarke, 2006). Precedence was given to the quality of data (its relevance to the research questions) over the quantity (how many respondents said something) (Braun and Clarke, 2006) and was grounded in specific incidence as opposed to opinion (Redmond, 2016). Here we paid particular attention to the BSS processes, reputation building and factors that influenced observed changes.

For both case profile and thematic analysis, the process was iterative, repeatedly returning to the original text to ensure context, and reflective to mitigate the impact of researchers’ biases and views on the interpretation of the data. In addition, to ensure validity, meetings between the lead researcher and principal investigator took place throughout the analysis process where we discussed the coding frame, analysis, interpretations and theme development in detail.\(^6^2\) The lead researcher sought clarification from the BSS team where required; for example, one professional described a young person as highly intelligent, and another as having intellectual difficulties. Clarification was sought from the BSS therapist, who confirmed that the young person had a mild developmental delay.

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\(^{62}\) Although frequent team meetings were held, the lead researcher conducted coding, analysis and reported writing.
Appendix 2: Overview of contribution analysis

STEP 1: IDENTIFY THE QUESTIONS TO BE ADDRESSED
The aim of the evaluation was to identify the contribution of the BSS to identify:

1. Did the BSS work? More specifically, did it contribute to changes in the young person’s behaviour including reduced reoffending and increased adherence to bail conditions?
2. How did the BSS work? More specifically, how many young people were referred to, enrolled and completed the BSS during the evaluation period and what were the factors that facilitated or acted as a barrier for referrals?
3. Why did the BSS work? More specifically, how did the BSS processes facilitate or act as a barrier to obtaining the observed outcomes?

STEP 2: DEVELOP A THEORY OF CHANGE BASED ON THE RESEARCH QUESTIONS IDENTIFIED IN STEP 1
The research team developed a theory of change prior to the evaluation; this is illustrated in Figure 6 (Redmond, 2017).

Figure 6: Proposed theory of change for the Bail Supervision Scheme

In brief, this if–then logic model proposed that if the BSS was effective, there would be evidence of (a) increased bail compliance and (b) pro-social behaviours by the young people enrolled in the scheme. Observed positive behavioural changes would then result in (c) the justice system gaining confidence in the scheme, therefore increasing its referrals to the
scheme. If there were continual referrals to the scheme, then there would be a reduced number of young people remanded to detention. If the cost evaluation shows the scheme to be cost-effective, then there would a reduction in costs to the state.

This report focuses on the first two steps on the theory of change (a to c). The remaining steps or long-term impact should be monitored over time.

**STEP 3: GATHER EVIDENCE TO EXAMINE THE THEORY OF CHANGE**

In this section, we outline the methodologies used to address the first three questions identified in the theory of change during the evaluation:

a. Was there evidence of increased bail compliance?
b. Did the BSS contribute to behavioural change?
   - Method: Case profile analysis and documentary analysis
c. Did the justice system gain confidence in the scheme?
   - Method: Thematic analysis

**STEP 4: ASSEMBLE AND ASSESS THE CONTRIBUTION STORY, AND CHALLENGES TO IT**

At Step 4 we investigated (a) if MST was implemented as planned; (b) the processes, including implementation, which facilitated or acted as barriers to the operation of the scheme. We examine if (c) prior assumptions were met and (d) if BSS was more effective than existing arrangements.

a. Did the BSS team implement MST as planned?
   - Method: Fidelity evaluation (synthesis of MST fidelity report)
b. What mechanisms contributed to or acted as a barrier to the operation of the scheme?
   - Method: Thematic analysis
c. Were key assumptions met on the presence of an environment that facilitated the operation of BSS?
   - Method: Thematic analysis
d. Was the BSS more effective than existing arrangements in relation to offending behaviour?
   - Method: In partnership with the Garda Analysis Service, we designed and conducted a quasi-experimental design, which analysed and compared Garda PULSE crime data for the young people on the BSS (intervention group) to a matched group of young people who were detained on remand
over a similar timeframe (control group) over three time points (six months pre-BSS, during the BSS and six months post-BSS).

**STEP 5: SEEK ADDITIONAL EVIDENCE TO TRIANGULATE AND STRENGTHEN FINDINGS**
We interrogated the interview data to gather various stakeholders’ perspectives on the implementation of the BSS and the mechanisms that contributed to observed outcomes with particular interest in:

1. Implementation of the BSS
2. Mechanisms that contributed to observed outcomes
3. Problem-solving strategies
4. Interagency co-operation
5. The performance of programme support structure (internal & external) against initial presumptions
6. Confidence in BSS
   - Method: Thematic analysis of interview data

**STEP 6: REVISE AND STRENGTHEN THE CONTRIBUTION STORY**
Our final step produces a report, which includes policy recommendations.
Appendix 3: The BSS Exclusion/Inclusion Criteria

**INCLUSIONARY CRITERIA**

1. Young person aged 12–17* years (*must be at least three months prior to 18th birthday).
2. Young person on remand* from Oberstown (*changed July 2017 to include referrals of young person from Court 55 who are at high risk of remand and clear bail objections).
3. Young person living within a 20-mile radius of Dublin.
4. Young person must have an identified primary caregiver who they can live with. Informed consent received from primary caregiver to engage in the programme.
5. Absence of all exclusionary criteria.

**EXCLUSIONARY CRITERIA**

1. Young person living independently, or for whom a primary caregiver cannot be identified despite extensive efforts to locate all extended family, adult friends and other potential surrogate caregivers.
2. Young person who is actively suicidal, homicidal, or psychotic.
3. Young person whose psychiatric problems are the primary reason leading to referral, or who has severe and serious psychiatric problems.
4. Juvenile sex offenders (sex offending in the absence of other delinquent or antisocial behaviour).
5. Young person with moderate to severe difficulties with social communication, social interaction, and repetitive behaviours, which may be captured by a diagnosis of autism.

* Taken from the Bail Supervision Scheme Standard Operating Scheme.
Appendix 4

Appendix 4 is taken directly from the ‘MST Goals and Guidelines: Program Goals, Case-Specific Intervention Goals, Case Discharge Criteria, and Outcomes’ document.

LENGTH OF INTERVENTION
Typical duration of intervention is three to five months. From the first meeting the therapist is planning for discharge by establishing overarching goals with clear criteria for success and by facilitating interventions that are carried out, as much as possible, by family members and other key participants.

The therapist needs to gauge decisions about discharge based on achievement of overarching goals. The therapist needs to end intervention when:

- there is evidence at any point in the intervention that overarching goals have been sustained over a period of three to four weeks, or
- overarching goals have not been met and intervention has reached a point of diminishing returns.

DISCHARGE CRITERIA
The determination to discharge a young person from MST is based on evidence of intervention effectiveness as evaluated from multiple perspectives (e.g. youth, parent, school, probation officer) indicating that:

- a majority of the overarching goals for the case have been met and sustained;
- the young person has few significant behavioural problems;
- the family is able to effectively manage any recurring problems and functions reasonably well for at least three to four weeks;
- the young person is making reasonable educational/vocational efforts;
- the young person is involved with prosocial peers and is not involved with, or is minimally involved with, problem peers; and the therapist and supervisor feel the caregivers have the knowledge, skills, resources, and support needed to handle subsequent problems.
- Discharge from MST may also occur when few of the overarching goals have been met but, despite consistent and repeated efforts by the therapist and supervisor to overcome the barriers to further success, the intervention has reached a point of diminishing returns for the additional time invested.
Appendix 5

The data in relation to the young people referred and enrolled on the BSS consists of two overlapping lists

- List 1: Contains all referrals from May 2017 to June 2018 – 30 young people
- List 2: Contains all young people who were enrolled between May 2017 and May 2018 – 22 young people

There were two notable differences between the composition of the lists:

1. Two of the young people enrolled during the evaluation period were referred prior to May 2017, so are included on List 2 but not on List 1.
2. Two of the young people referred from Court 55 in June 2018 (on List 1) were not included on List 2 as they had not been enrolled on the programme for a sufficient time.

All analyses using the PULSE crime data were based on List 1; all analysis of the referral pathway was based on List 2.
References


Naughton, C., Redmond, S., and O'Meara-Daly E. in press. Lifting the Lid on Redtown: A replication case study, which investigates the contribution of engagement in a local criminal network to more serious and prolonged crime trajectories for young people. Available by request to REPPP@ul.ie.

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