

General Professional Services Questionnaire Instructions

- The General Professional Services Questionnaire shall be used for all professional services except outside legal services and architecture, engineering, or survey projects.
- **The General Professional Services Questionnaire should be completely filled out. Complete and attach ALL sections. Insert “N/A” or “None” if a section does not apply or if there is no information to provide.**
- Questionnaire must be signed by an authorized representative of the Firm. Failure to sign the questionnaire shall result in disqualification of proposer pursuant to J.P. Code of Ordinances Sec. 2-928.
- All subcontractors must be listed in the appropriate section of the Questionnaire. Each subcontractor must provide a complete copy of the General Professional Services Questionnaire, applicable licenses, and any other information required by the advertisement. Failure to provide the subcontractors' complete questionnaire(s), applicable licenses, and any other information required by the advertisement shall result in disqualification of proposer pursuant to J.P. Code of Ordinances Sec. 2-928.
- If additional pages are needed, attach them to the questionnaire and include all applicable information that is required by the questionnaire.

General Professional Services Questionnaire

A. Project Name and Advertisement Resolution Number:

Evidence-Based Treatment Services to At-Risk Youth and/or their Families Resolution No. 140115

B. Firm Name & Address:

OPS Family Care, LLC 2550 Belle Chasse Hwy Suite 220 Gretna, LA 70053

C. Name, title, & contact information of Firm Representative, as defined in Section 2-926 of the Jefferson Parish Code of Ordinances, with at least five (5) years of experience in the applicable field required for this Project:

Cassandra Denise Smith, LCSW-BACS, Founder and Executive Director
csmith@opsfamilycare.com
504367-6888

D. Address of principal office where Project work will be performed:

Telehealth and 2550 Belle Chasse Hwy Suite 220 Gretna, LA 70053

E. Is this submittal by a JOINT-VENTURE? Please check:

YES ☐ NO ☒

If marked "No" skip to Section H. If marked "Yes" complete Sections F-G.

F. If submittal is by JOINT-VENTURE, list the firms participating and outline specific areas of responsibility (including administrative, technical, and financial) for each firm. Please attach additional pages if necessary.

1.

2.

General Professional Services Questionnaire

G. Has this JOINT-VENTURE previously worked together? Please check: YES ☐ NO ☐

H. List all subcontractors anticipated for this Project. Please note that all subcontractors must submit a fully completed copy of this questionnaire, applicable licenses, and any other information required by the advertisement. See Jefferson Parish Code of Ordinances, Sec. 2-928(a)(3). Please attach additional pages if necessary.

Name & Address:	Specialty:	Worked with Firm Before (Yes or No):
1.		
2.		
3.		
4.		
5.		

General Professional Services Questionnaire

I. Please specify the total number of support personnel that may assist in the completion of this Project: 1 _____
J. List any professionals that may assist in the completion of this Project. If necessary, please attach additional documentation that demonstrates the employment history and experience of the Firm's professionals that may assist in the completion of this Project (i.e. resume). Please attach additional pages if necessary.
PROFESSIONAL NO. 1
Name & Title:
Dr. Denise Gilstrap
Name of Firm with which associated:
OPS Family Care, LLC
Description of job responsibilities:
Clinical Director
Years' experience with this Firm:
2 years
Education: Degree(s)/Year/Specialization:
Licensed Professional Counselor, PhD in Counseling
Other experience and qualifications relevant to the proposed Project:
see resume

General Professional Services Questionnaire

PROFESSIONAL NO. 2
Name & Title:
Dr. LaSonja Eleby, LPC Clinical Program Manager
Name of Firm with which associated:
OPS Family Care, LLC
Description of job responsibilities:
see resume
Years' experience with this Firm:
6 months
Education: Degree(s)/Year/Specialization:
Licensed Professional Counselor, PhD in Counseling
Other experience and qualifications relevant to the proposed Project:
see resume

General Professional Services Questionnaire

PROFESSIONAL NO. 3
Name & Title:
Name of Firm with which associated:
Description of job responsibilities:
Years' experience with this Firm:
Education: Degree(s)/Year/Specialization:
Other experience and qualifications relevant to the proposed Project:

General Professional Services Questionnaire

PROFESSIONAL NO. 4
Name & Title:
Name of Firm with which associated:
Description of job responsibilities:
Years' experience with this Firm:
Education: Degree(s)/Year/Specialization:
Other experience and qualifications relevant to the proposed Project:

General Professional Services Questionnaire

PROFESSIONAL NO. 5
Name & Title:
Name of Firm with which associated:
Description of job responsibilities:
Years' experience with this Firm:
Education: Degree(s)/Year/Specialization:
Other experience and qualifications relevant to the proposed Project:

General Professional Services Questionnaire

K. List all prior projects that best illustrate the Firm's qualifications relevant to this Project. Please include any and all work performed for Jefferson Parish. Please attach additional pages if necessary.

PROJECT NO. 1

Project Name, Location and Owner's contact information:	Description of Services Provided:
Evidenced Based Treatment Services to At-Risk Youth and/or their Families	Therapeutic treatment services
Length of Services Provided:	Cost of Services Provided:
15 years	n/a

PROJECT NO. 2

Project Name, Location and Owner's contact information:	Description of Services Provided:
Length of Services Provided:	Cost of Services Provided:

General Professional Services Questionnaire

PROJECT NO. 3	
Project Name, Location and Owner's contact information:	Description of Services Provided:
Length of Services Provided:	Cost of Services Provided:

PROJECT NO. 4	
Project Name, Location and Owner's contact information:	Description of Services Provided:
Length of Services Provided:	Cost of Services Provided:

General Professional Services Questionnaire

PROJECT NO. 5	
Project Name, Location and Owner's contact information:	Description of Services Provided:
Length of Services Provided:	Cost of Services Provided:

PROJECT NO. 6	
Project Name, Location and Owner's contact information:	Description of Services Provided:
Length of Services Provided:	Cost of Services Provided:

General Professional Services Questionnaire

PROJECT NO. 7	
Project Name, Location and Owner's contact information:	Description of Services Provided:
Dr. Lnann/aSonja Eleby, LPC Clinical	Program Manager
Length of Services Provided:	Cost of Services Provided:

PROJECT NO. 8	
Project Name, Location and Owner's contact information:	Description of Services Provided:
Length of Services Provided:	Cost of Services Provided:

General Professional Services Questionnaire

PROJECT NO. 9	
Project Name, Location and Owner's contact information:	Description of Services Provided:
Length of Services Provided:	Cost of Services Provided:

PROJECT NO. 10	
Project Name, Location and Owner's contact information:	Description of Services Provided:
Length of Services Provided:	Cost of Services Provided:

General Professional Services Questionnaire

L. List all prior and/or on-going litigation between Firm and Jefferson Parish. Please attach additional pages if necessary.

Parties:		Status/Result of Case:
Plaintiff:	Defendant:	
1. none		
2.		
3.		
4.		

M. Use this space to provide any additional information or description of resources supporting Firm's qualifications for the proposed project.

Please see response to RFP summarizing OPS Family Care's qualifications for the proposed project.

N. To the best of my knowledge, the foregoing is an accurate statement of facts.

Signature:  Print Name: Cassandra Denise Smith

Title: Executive Director Date: September 16, 2022

Statement of Qualifications

Agency Profile

OPS Family Care, LLC is a private Social Service and Behavioral Health Agency comprised of Licensed Social Workers, Counselors, and professionally trained Direct Service Personnel in the State of Louisiana. Providing services for the Eastbank and Westbank of Jefferson Parish, each member of the OPS Family Care (OPSFC) team believes in the ability of people to change and respects each person's worth and dignity as human beings. We provide services in person, as well as via our HIPAA compliant telehealth platform. This platform can be accessed by our clients through their smartphones even if they are unable to access the Internet. Our commitment to cultural competency is embedded in our agency policy and practice. We believe as we empower families, we empower the community. As the agency mission states, our team is seeking to provide services that are "restoring wholeness to families one outreach at a time." We believe quality, Evidenced Based care is necessary for achieving our mission.

The therapeutic staff includes Masters and Doctorate Level Clinicians with over thirty years of combined experience in providing treatment in the specialty area of Children and Families. Each clinician has current Licensure or Certification, with their respective Professional Boards in the State of Louisiana and has maintained impeccable professional histories and reputations. OPSFC professional clinicians training and experience includes, but is not limited, to: Play Therapy, Cognitive Behavioral Therapy (CBT), Positive Behavior Support, Treatment of Sexual Abuse Victims, Trauma Focused Cognitive Behavioral Therapy (TF-CBT), Conflict Resolution, Victim Offender

Mediation, Parent Education and Eye Movement Desensitization and Reprocessing Therapy (EMDR). (See Attached Resumes)

OPSFC has a long history of providing Trauma Informed Care. From the assessment phase and throughout all interventions, the agency has made every effort to provide services based on the most effective practices in treating traumatic exposure. In addition to trauma informed care, our agency has focus on ensuring the needs of the whole client are met through effective and consistent care coordination.

Summary of Target Population and Services to be provided

The United States has traditionally viewed Juvenile Justice in a unilateral way. Richard Mendel, author of “Less Hype, More Help: Reducing Juvenile Crime, What Works---and What Doesn’t,” feels that America’s idea of “adult time for adult crime” has led to juveniles being exposed to dangerous risk in prison and has not helped to reduce the recidivism rate.¹ Changes in the treatment of juvenile offenders can only occur through changes in legislation as well as a focus on increasing funding for effective evidenced based services statewide. Jefferson Parish has done well with funding Evidenced Based Practices and now can shift it’s focus to ensuring fidelity of treatment services and successful completion of treatment services by juveniles. Louisiana has recently raised the age to 18 for prosecution as an Adult.

In 2019, there were more than 31 million youth under the jurisdiction of Juvenile Court in the United States.² 91% were between the ages of 10 and 16². With approximately 80% reporting, for every 100,000 juveniles in Louisiana in 2017, 192 were

¹ Skancke, Jennifer ed. *Alternatives to Prison*. Detroit, MI, Thomas-Gale, 2005

² Hockenberry, Sarah, and Puzzanchera, Charles. 2021. Juvenile Court Statistics 2019. Pittsburgh, PA: National Center for Juvenile Justice.

arrested for assault, 1,173 theft, 347 for drugs, and 101 for weapons.³ The Louisiana Legislative Auditor reports that Louisiana pays up to \$424 a day (\$154,760 per year) to incarcerate children. The National Office of Juvenile Justice and Delinquency Prevention (OJJDP) stated that in 2017, Louisiana had one of the highest violent crime arrest rates in the United States.⁴ 73% of Children in Louisiana's prisons suffer with a Mental Illness. Although direct causation has not been clearly shown in research between Mental illness and juvenile delinquency, research has shown correlation. It is imperative that Community Mental Health providers and the Juvenile Justice System work in partnership to ensure Juvenile Mental Health needs are adequately addressed.

Effectively providing services to youth involved in the justice system in Jefferson Parish requires evaluation and scrutiny of the factors that lead to juvenile offenses. Some Risk Factors that have been documented to contribute to delinquent behavior include: Internal attitudes (lack of guilt or lack of empathy), exposure to trauma and abuse, poor Parent-Child communication, lack of Parental supervision, maltreatment and neglect, and a high turnover of Caregivers. Some Protective Factors include improved Family functioning, improved Parenting skills of caregivers, improved Self Esteem, and development of healthy coping skills.⁵ The aforementioned information and factors are the basis for the need for an array of therapeutic and preventative services for juveniles.

Research shows various interventions show promise in their effectiveness on reducing recidivism. In April of 2000, the Office of Juvenile Justice and Delinquency Prevention produced a bulletin, which stated that Individual Counseling, Interpersonal

³ Juvenile Arrests 2018: Office of Juvenile Justice and Delinquency Prevention

⁴ OJJDP Statistical Briefing Book. Online. Available: <https://www.ojjdp.gov/ojstatbb/crime/qa05103.asp?qaDate=2017>. Released on October 22, 2018.

⁵ Locher, Rolf, Farrington .David P., Petedhuk, David. *Child Delinquency: Early Intervention and Prevention*. 2003 Office of Juvenile Justice and Delinquency Prevention. Child Delinquency Bulletin

Skills training, and Behavioral programs all showed the strongest and most consistent evidence of reducing recidivism amongst non-institutionalized serious offenders.⁶

Trauma informed protocols and treatment modalities have to be a focal point of Juvenile Justice Treatment services. A number of prospective longitudinal studies have now found that history of trauma and violence exposure increases risk for delinquent behavior in both adolescence and adulthood. OPS Family Care, LLC will offer expertise in providing the above-mentioned interventions in a collaborative effort to meet the unique needs of this population.

Agency Goals in working with the Juvenile Justice System:

- 1) Offering comprehensive mental health services to non-institutionalized juvenile offenders,
- 2) Targeting the African American population for treatment with an emphasis on implementation of culturally sensitive practices, advocacy, and Care Coordination
- 3) Offering Evidenced Based Services through highly experienced and credentialed therapists to address parenting education, substance abuse, trauma, abuse, and mental health diagnoses contributing to delinquent behavior.

Evidenced Based Interventions and Services to be provided:

- Cognitive Behavioral Therapy-CBT (Individual, Family, and Group Therapy)
- Trauma Focused Cognitive Behavioral Therapy-TFCBT (Individual and Family Components)
- Motivational Enhancement/Cognitive Behavioral Therapy for Adolescent Cannabis Users-MET/CBT (Individual and Group Therapy)

⁶Lipsey, Mark W., Wilson, David B., Cothorn, Lynn. *Effective Intervention for Serious Juvenile Offenders*. 2000 Juvenile Justice Bulletin Office of Juvenile Justice and Delinquency Prevention.

- Active Parenting of Teens (Group Therapy)
- Restorative Justice Practices: Victim-Offender Mediation
- Youth PTSD Treatment-YPT (Individual therapy)
- Community Based Cognitive Behavioral Treatment-CB-CBT (Individual Counseling)
- Eye Movement Desensitization and Reprocessing Therapy (EMDR)
- Motivational Interviewing (MI)

Rationale for the use of Evidenced Based Practices:

The Department of Child and Adolescent Psychiatry at Columbia University reported that research has shown specific modalities are effective in the treatment of childhood mental health issues. Cognitive Behavioral Therapy (CBT) has shown consistent evidence of positive effects in the treatment of substance dependence, trauma, abuse, and symptoms of Posttraumatic Stress Disorder.⁷ Family Therapy, Teaching Coping Skills, Problem Solving Skills, and Parent focused treatments have shown consistent evidence of positive effects on the treatment of Conduct Disorders and Attention Deficit Hyperactivity Disorder.⁷ CBT interventions have been successfully used to forestall the onset, ameliorate the severity, and divert long-term consequences of problem behaviors among young people. Problem behaviors that have been particularly amenable to change using CBT have been 1) violence and criminality, 2) substance use and abuse, 3) teen pregnancy and risky sexual behaviors, and 4) school failure. Cognitive behavioral treatments for Juvenile offenders are designed to correct dysfunctional

⁷ *Columbia University Guidelines for Child and Adolescent Mental Health Referral*, 2nd Edition (2003). Columbia University, Department of Child and Adolescent Psychiatry, New York, NY.

thinking, misinterpretation of social cues, and faulty thought processes. All of which lead juvenile offenders to delinquency, crime, and/or violence.

“Restorative justice principles offer more inclusive processes and reorient the goals of justice.”⁸ The guiding principles of restorative justice are:

1. Crime is an offense against human relationships.
2. Victims and the community are central to justice processes.
3. The first priority of justice processes is to assist victims.
4. The second priority is to restore the community, to the degree possible.
5. The offender has personal responsibility to victims and to the community for crimes committed.
6. Stakeholders share responsibilities for restorative justice through partnerships for action.
7. The offender will develop improved competency and understanding as a result of the restorative justice experience.

Restorative Justice Practices have shown that they reduce recidivism.

Practitioners have seen a significant reduction of fear in victims, making it an integral part of Victims’ Services. In a study conducted in 1994, 95 percent of mediation sessions resulted in a successful restitution agreement reached. In addition, the study showed that offenders who met their victims were far more likely to successfully complete their restitution.

Restorative Justice allows the Criminal Justice system to focus on the connectedness of the community and deemphasizes the focus on a criminal act in isolation. The potential for the positive effect of these practices goes well beyond the meeting of the victim and offender. It allows for a community to have a voice in its culture, its norms, and to develop what behaviors they deem to be acceptable.

⁸ <https://law.wisc.edu/fjr/rjp/justice.html>

The following are descriptions of each intervention as well as expected program outcomes:

❖ *Youth PTSD Treatment-YPT*

Youth PTSD Treatment (YPT) is a theory-driven, 12-session manualized cognitive-behavioral therapy protocol for individual treatment for 7-18 year-old children and adolescents that involves their caregivers (when possible) in every session. YPT has been used in a randomized controlled trial and shown to be effective.

❖ *Cognitive Behavioral Therapy- Individual and Family Therapy*

The distinctive features of Cognitive Behavioral Therapy are that it is the most evidenced based form of psychotherapy; it is active, problem focused, and goal oriented. Unlike many other forms of therapy, CBT emphasizes the present and what's needed to deal with issues a client is currently facing. Since many of the positive effects are concrete based in behavioral change, outcomes are easily measured. CBT can successfully be applied across settings. Individual, Family, and Group therapy provided will focus on cognitive restructuring, gaining insight in how thoughts and feelings are related to behavior, and behavioral interventions like thought stopping, role-playing, and some elements of Rational Living Therapy. Desired outcomes include a reduction in high risk behaviors, increase use of problem solving, and a decrease in delinquent behaviors.

❖ *Trauma Focused -Cognitive Behavioral Therapy/TF-CBT*

This is a psychotherapeutic intervention designed help children and youth deal with traumatic life events (i.e., death, community violence, disasters, sexual abuse etc.). It is

designed for youth ages 3 to 18 and their parents and is appropriate for an outpatient setting. The program is designed to be completed in a 16 to 22 therapy sessions. Key components to interventions include:

- Parent Child Interactions
- Parent Training
- Skill Development
- Therapy
- Parent Support

Desired outcomes for this modality include: reductions in behaviors related to risk factors like oppositional behaviors and anxiety, improvements in social competence, enhanced parental support.⁹ OPSFC has also begun to implement a TFCBT group which research has shown to be an effective adaptation of the Individual TFCBT model.

❖ *Motivational Enhancement Therapy and Cognitive Behavioral Therapy for Adolescent Cannabis Users- MET/CBT5+7*

This is a five-session treatment in Cognitive Behavior Therapy with an additional seven sessions which address coping skills involved in Motivational Enhancement Therapy. This program is designed for the treatment of adolescents ages 12 to 18 years of age. It is appropriate as an outpatient treatment or in early intervention to address substance use. Critical components of this program include teaching and practicing overt

⁹ Model Programs—Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.

behaviors and utilizing motivational principles to help clients to change their behaviors. Desired outcomes include reductions in marijuana use and related problems.¹⁰

❖ *Active Parenting of Teens*

This program is an evidenced based parenting curriculum for pre teens and teenagers. Topics addressed include: Styles of Parenting, Active communication, Responsibility and Discipline, Power Struggles, and Drugs, Sexuality, and Violence. The program can be offered in a two to six session series and is suited to accommodate a variety of settings. It has been tested and found effective in various settings (i.e. school, church, community agencies, and outpatient treatment facilities.) OPS Family Care, LLC staff currently integrates the Active Parenting Program into Family therapy and will expand that into parenting groups this contract period.

❖ *Community Based Cognitive Behavioral Treatment-CB-CBT*

CB-CBT is a treatment model that structures CBT interventions over a 12-to-24-month period in a Community Based Setting. Sessions occur 2 times per week and are formatted to ensure consistency across settings. CBT interventions are adapted to be implemented effectively in the natural environment of home, school, and community. The treatment modality has the following Key components:

- 2 sessions per week
- 6 months
- Structured Session format
- Model specific documentation
- Action Plans

¹⁰ MET/CBT Treatment Manual, US. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration

- Fidelity in implementation
- Staff Training
- Ongoing Supervision

❖ *Restorative Justice Practice: Victim Offender Mediation*¹¹

Restorative Justice Practices have three fundamental concepts:

- Crime is Fundamentally a Violation of People and Interpersonal Relationships
- Violations Create Obligations and Liabilities
- Restorative Justice Seeks to Heal and Put Right the Wrongs

Victim-Offender Mediation is one of the many varied interventions utilized in Restorative Justice Practices. This process allows the victim the opportunity to have a safe and structured experience to meet the offender and participate in a mediated discussion of the crime. This meeting is facilitated by a trained mediator and involves developing a restitution plan for the offender. Goals and desired outcomes for the “mediation” or “conference” as it is sometimes called include: support the healing process of victims, by providing a safe and controlled setting for them to meet and speak with the offender on a strictly voluntary basis, allow the offender to learn about the impact of the crime on the victim and to take direct responsibility for their behavior, provide an opportunity for the victim and offender to develop a mutually acceptable plan that addresses the harm caused by the crime.

❖ *Eye Movement Desensitization and Reprocessing Therapy*¹²

¹¹ <https://law.wisc.edu/fjr/rjp/justice.html>

¹² - Glenn B. Soberman, Ricky Greenwald & David L. Rule (2002) A Controlled Study of Eye Movement Desensitization and Reprocessing (EMDR) for Boys with Conduct Problem, *Journal of Aggression, Maltreatment & Trauma*, 6:1, 217-236, DOI: 10.1300/J146v06n01_11

Results show that EMDR worked for the boys with conduct problems in reducing reactivity to treated traumatic memories; and treating traumatic memories with EMDR led to reduced conduct problem symptoms. Eye Movement Desensitization and Reprocessing (EMDR) is a psychotherapy treatment that was originally designed to alleviate the distress associated with traumatic memories. EMDR therapy involves attention to three time periods: the past, present, and future. Focus is given to past disturbing memories and related events. Also, it is given to current situations that cause distress, and to developing the skills and attitudes needed for positive future actions. With EMDR therapy, these items are addressed using an eight-phase treatment approach. Eye movements (or other bilateral stimulation) are used during one part of the session. After the clinician has determined which memory to target first, he asks the client to hold different aspects of that event or thought in mind and to use his eyes to track the therapist's hand as it moves back and forth across the client's field of vision. As this happens, for reasons believed by a Harvard researcher to be connected with the biological mechanisms involved in Rapid Eye Movement (REM) sleep, internal associations arise and the clients begin to process the memory and disturbing feelings.¹³

Experience and Training in Evidenced Based Practices

OPS Family Care has a team of trained and highly experienced clinicians who will use several specific Evidenced Based Programs and modalities in delivering treatment services. Formal Training in the programs is documented in the attached appendices. (Clinician resumes attached). Those specifically formally trained in a modality will act as lead clinicians in ensuring the fidelity of the programs. In addition,

¹³ <https://www.emdr.com/what-is-emdr/>

new and continued formal training will be provided for all new clinical therapists in designated Evidenced Based Programs.

OPS Family Care, LLC currently has several therapists trained in TF-CBT and has a Nationally Certified Clinician in TFCBT on staff. She is one of only five in the entire Parish. In addition, formally trained staff have facilitated a 7 hour inter agency training in the modality. This training will serve as a foundation for additional training. OPS Family Care, LLC has over 14 years of experience in offering this form of therapy to the juveniles and families engaged with Jefferson Parish Juvenile Services. During this time, OPSFC Staff has developed unique and innovative ways to implement the modality specifically for the Juvenile Justice population in Jefferson Parish. This advantage will allow the agency to immediately offer the services through the new contract in an efficient and successful manner.

Cognitive Behavioral therapy and its techniques have been the primary modality of choice in providing therapeutic counseling for clients serviced by our agency. OPS Family Care, LLC has made hiring staff with extensive experience in providing clinical therapeutic care to children, adolescents its utmost priority. All therapists have formal training in Cognitive Behavioral therapy and will continue with such training. In addition, the Clinical Director has over sixty hours of training in Cognitive Behavioral Therapy. This includes advanced study in Teaching and Supervising CBT at the highly acclaimed and respected Beck Institute for Cognitive Therapy in Philadelphia, PA. Ms. Cassandra Smith, the Clinical Director/Supervisor, has also presented several formal Cognitive Behavioral Therapy Trainings which were sponsored by the National Association of Social Workers across the State of Louisiana. She is the only clinician in

the State of Louisiana with advanced training from the Internationally renowned Beck Institute.

All current and new staff will be required to participate in an inter agency training designed to prepare them to effectively provide this intervention.

The agency Clinical Director and Supervisor on staff has received training in Juvenile mediation and is a Qualified Mediator (see resume). In addition, she has also conducted several mediations which include Child in Need of Care Cases and Restorative Justice Mediations through a Jefferson Parish School System Middle School.

Measuring Program Outcomes and Data Collection

Program outcomes will be measured by using the Achenbach Child Behavior Checklist or the Youth Self Report dependent upon the juvenile's age. In addition, client satisfaction surveys will be utilized to gauge client's overall satisfaction with agency services. Both of the above-mentioned Achenbach clinical measures measure aggressive behavior, conduct problems, school behavior, and oppositional behaviors.¹⁴ These instruments will be administered quarterly and scored in order to show each juvenile's progress in treatment and the key targeted outcome measures relevant to juvenile court. Weekly Progress Reports (see attachments) will continue to act as a tool to document and communicate progress with Juvenile Services and the client's probation officer. The current Electronic Health Records system utilized by the agency allows the tracking session attendance and documentation of progress made toward therapeutic treatment goals. OPSFC has developed an electronic version of the aforementioned Progress Report that will help to increase staff efficiency in completing the necessary

¹⁴ Achenbach, T. (2001). Manual for ASEBA School-Age Forms & Profiles.

documentation. In addition, agency staff actively communicates with Department of Juvenile Services Staff via email and telephone, as needed. Agency policy and culture encourages active communication with all systems involved with client care.

Ensuring and Maintaining Program Fidelity

Program fidelity in the various programs will be ensured, by providing clinicians with appropriate training directly from program developers and program training curriculums. Standardized and validated Assessment and screening instruments will be utilized to identify the appropriate Evidenced Based Modality. The UCLA PTSD Reaction Index for DSM 5 will be utilized for Trauma Modalities. In addition, Achenbach Youth Self Reports and Child Behavior Checklists are utilized to identify specific symptoms and their severity. Trauma Informed regular supervision will be provided to individual staff regarding clinical issues (see attached supervision log). Supervision will be provided by a Board Approved Clinical Supervisor and an experienced Licensed Clinician. OPSFC Staff will continue to participate in Consultation sessions from qualified Providers and an array of organizations that provide training in Evidenced Based treatment modalities. This will ensure that evidenced based practices are implemented with consistency and fidelity. This supervision will provide the opportunity to solicit technical assistance and input from trainers and program developers. OPSFC staff will continue to participate in outside clinical consultation groups for the TF-CBT treatment modality, as well. This newly developed opportunity will allow staff to continually improve their skills in treating traumatic experiences via this modality. Program materials and supplements will be obtained directly from the aforementioned organizations. This will also ensure that programs and interventions are

implemented with the same consistency and design originally intended for each model. OPSFC also conducts regular staff case consultation. This allows for the opportunity to discuss the clinical progress of a case and allows staff to address administrative issues which affect service delivery and quality assurance. All of these measures should ensure continuity in the fidelity of each program, as well as, the production of expected program outcomes.

Budget

Direct Service Costs: (Fee for Service)

<u>Service Categories:</u>	<u>Fee (per person/hr.)</u>
Individual/Family Therapy	\$65/per person/hr.
Group Therapy	\$35/per person/hr.
Parenting Education	\$35/per person/hr.
Victim Offender Mediation	\$70/per case/hr.

(This Victim Offender Mediation fee includes follow-up and monitoring of restitution agreement).

Indirect Service Costs

Continued Staff Training

Workshop Participation (For continued training of new clinicians in evidenced based programs)

\$1000/clinician
x 4 Clinicians
Total \$4000

Program Fidelity Supervision

\$640/month (4 clinicians x \$40/week x 4weeks)
x 12 months
Total \$7680

MaterialsParent Education Materials

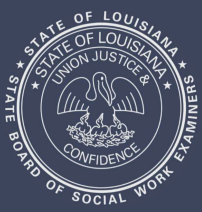
\$11.95 workbooks
x 50 quantity (approx.)

Total (Approximately) \$597.50

Tentative Program Budget Indirect Service Costs
Total \$12278

Budget Justification

Fees for therapeutic services are based on industry norms for each. These services will be paid on a “fee for service” basis. Clinician training includes training of new clinicians for program models, as well as continued training for those that will act as lead clinicians. In addition, supervision costs are based on current Jefferson Parish Juvenile Services contracted rates. Material prices were determined by the price of manuals across each program.



LABSWE Public Registry

CASSANDRA SM

LCSW-BACS

Licensee:	SMITH CASSANDRA
License Type:	LCSW-BACS
License Number:	6503
Expiration date:	2023-08-31
Effective Date of License:	2005-03-28
Disciplinary Action?:	no
Disciplinary Status:	N/A
Status:	N/A

Cassandra D. Smith, LCSW-BACS, C-SSWS

P.O. Box 1831 Gretna, LA 70054

Work Phone 504-367-6888 Cell Phone 504-231-8919

Email csmith@opsfamilycare.com

EDUCATION

Master of Social Work, Tulane University, December 2000

Bachelor of Social Work, Clark Atlanta University, May 1999

EMPLOYMENT

OPS Family Care, LLC, Executive Director -July 2006- Current

- Oversight of day to day Administrative Operations
- Develop and Implement effective Marketing Plans and Community Outreach
- Operate and Manage program Budget and Fiscal Operations
- Developed Policy and Monitored effective Policy implementation in preparation for National Accreditation
- Program Development, Planning, and Implementation
- Community Engagement via Presentations and Marketing Activities

OPS Family Care, LLC, Clinical Program Director-July 2006-Current

- Supervision of LMSW level clinicians, MSW Interns, and Direct Service Staff
- Monitored Clinical Utilization of Authorized Managed Care Service Units
- Provide Evidenced Based Therapy to Children, Adolescents, Adults, and Families
- Provide Case Management and connection with Community Resources via Referral
- Completed Managed Care Assessments for Service Authorization
- Coordinate and Facilitate Continuing Education Opportunities and Clinical Training
- Mediated CINC cases and Restorative Justice Conferences in Jefferson Parish
- Mediated Restorative Discipline Conferences in Jefferson Parish Schools
- Quality Improvement Monitoring and Implementation
- Staff Training and Orientation

CDS Healthcare Consulting, Founder and Lead Consultant-January 2018-Present

- Recruit Clinicians for remote telehealth services
- Remote Hiring, Onboarding and Orientation of telehealth remote clinicians
- Remote Clinical Supervision
- Management of Remote Telehealth Consultants

Southern University of New Orleans, Adjunct Professor-Fall Semester 2015

SW Elective-Working with Children

Jefferson Parish School System, Early Intervention Social Worker- Dec. 2002-May 2011

- Provided individual as well as group therapy to at risk students
- Facilitated classroom presentations for students

- Conducted staff professional development
- Created Behavior Modification Plans for individual students
- Consulted with faculty regarding classroom and behavior management
- Conducted parent workshops and provided brief interventions with parents and families
- Facilitated “Save the Children” groups designed to deal with trauma in the aftermath of Hurricane Katrina
- Served as Academic Behavioral Intervention Team (ABIT/SBLC) Chair and member
- Implemented Positive Behavior Interventions
- Provided Crisis Intervention and Assessments
- Collaborated on an Interdisciplinary Medical Team for student treatment planning
- Implemented Evidenced Based Practices in the school setting
- Created, Piloted, and Implemented the *Soar Afterschool Enrichment* program

Family Services of Greater New Orleans, Clinical Therapist- Aug. 2006-May 2007

- Facilitated Substance Abuse Diversionary Groups
- Provided Clinical Individual Therapy to Adults
- Provided Clinical Individual Therapy to Children
- Completed psychosocial assessment and diagnosis
- Completed accurate case documentation as well as correspondence with other local agencies
- Conducted court ordered Custody Evaluations

Children’s Bureau of Greater New Orleans, Clinical Social Worker- Feb. 2001-Dec. 2002

- Provided intense client centered therapy to children and families
- Conducted group therapy for adults, adolescents, and children
- Conducted appropriate assessment tools (measuring exposure to trauma, ADHD, emotional functioning and Clinical Depression)
- Completed accurate and timely documentation (i.e. case summaries, case notes, and administrative paperwork)
- Trained in Child Custody Evaluation
- Conducted Crisis interventions at Orleans Parish schools as needed

PROFESSIONAL/COMMUNITY ORGANIZATIONS & ACTIVITIES

- Presenter-2011, 2012, 2018 LA State Conference of National Association of Social Workers
- Presenter 2015 NASW-LA CEU Yellow Book -Cognitive Behavioral Therapy
- Delta Sigma Theta Sorority, Inc.

- Founder/Past President, The Village Foundation

SPECIALIZED TRAINING AND CREDENTIALS

- Qualified Divorce/Juvenile Mediator- Loyola School of Law (Basic and Advanced
- May/June 2006)/ CINC Mediation Training (October 2006 & Jan 2007)
- Certified School Social Work Specialist (C-SSWS)-National Association of Social Workers
- Licensed Clinical Social Worker- Louisiana State Board of Social Work Examiners effective-2005
- Board Approved Clinical Supervisor-Louisiana State Board of Social Work Examiners effective-2009
- Trauma Focused Cognitive Behavioral Therapy
- Cognitive Behavioral Therapy- 60 hrs. Beck Institute in Philadelphia, PA
- Certified ACE evaluator- State of Louisiana MHR programs/Locus and Calocus trained

COMMUNITY SERVICE

Dr. Betty Shabazz Academy and GEMS Enrichment Program for At-Risk Girls

LASONJA M. ELEBY
5610 Norland Avenue
New Orleans Louisiana 70131
504-205-0148

EDUCATION

University of Holy Cross
PhD in Counseling Education and Supervision 2021
Dissertation: "The Experiences of African American Mothers Who Are Raising Minor Daughters"

University of Holy Cross
Master of Arts in Counseling 2018
Clinical Mental Health

University of New Orleans
Bachelor of Science 2010
Psychology

ACADEMIC ACHIEVEMENT

Chi Sigma Iota 2017
Alpha Zeta Chapter
University of Holy Cross
New Orleans, LA

TEACHING EXPERIENCE

Research Method and Program Evaluation 2020
Teaching Assistant
University Of Holy Cross
New Orleans, LA

Ethnic and Gender Inequalities 2020
Teaching Assistant
University of Holy Cross
New Orleans, LA

Counseling Military Personnel and their Families 2020
Teaching Assistant
University of Holy Cross
New Orleans, LA

RESEARCH EXPERIENCE

PTSD Symptoms in College Students 2016
University of Holy Cross
Lillian M. Range, PhD
New Orleans, LA

***The Experiences of African American Mothers
Who are Survivors of Childhood Sexual Trauma
and Raising Minor Daughters*** 2021
University of Holy Cross
Patricia Thomas, PhD
New Orleans, LA

PROFESSIONAL EXPERIENCES

Children's Hospital Behavioral Health Clinical Therapist New Orleans, LA	December 2019-July 2022
Divine Intervention Mental Health Professional New Orleans, LA	January 2019-
Behavioral Health Group Counselor Gretna, LA	December 2018-July 2020
River Oaks Hospital Psychiatric Counselor Harahan, LA	April 2017- September 2019
River Oaks Hospital Counseling Intern Harahan, LA	August 2017-May 2018
Wish Health Services Mental Health Specialist New Orleans, LA	July 2017-February 2018
New Orleans Center for Hope and Change Mental Health Specialist/Office Manager New Orleans, LA	May 2014- July 2017
PROFESSIONAL AFFILIATIONS	
American Counseling Association	January 2016-Present
Louisiana Counseling Association	May 2017-Present
Louisiana Mental Health Counseling Association	May 2017-Present
CONFERENCES AND TRAININGS	
Mardi Gras Congress New Orleans, LA	January 2016
Impulse Control Disorders New Orleans, LA Dr. T. Fonseca	October 2016
Mardi Gras Congress New Orleans, LA	February 2017
American Counseling Association LCA Leadership Development and Mentoring Institute Baton Rouge, LA	October 2017
Making Groups Work New Orleans, LA	February 2019

**Louisiana Counseling
Association**

Baton Rouge, LA

August 2018

Trauma Focus Cognitive Behavioral Therapy

Baton Rouge, LA

August 2019

Youth at Risk: The Suicidal Child and Adolescents

New Orleans, LA

November 2019

Advanced Trauma Focused Cognitive Behavioral Therapy

Baton Rouge, LA

January 2020

Eye Movement Desensitization Reprocessing Training

New Orleans, LA

August 2021

Human Trafficking

New Orleans, LA

October 2021

Advanced Eye Movement Desensitization Reprocessing Training

New Orleans, LA

December 2021

PRESENTATIONS

Law and Ethics Conference

New Orleans, LA

PTSD in College Students

Dr. Lillian M. Range

February 2017

Louisiana Counseling Association

Baton Rouge, La

October 2017

CERTIFICATE



PARTICIPATION

LaSonja Eleby

This is to certify that the above named person participated in the continuing education course:

TRAUMA FOCUSED COGNITIVE BEHAVIORAL THERAPY

This program was approved for 25.0 CE clock hours in Diagnosis by the Louisiana Counseling Association as authorized by the Louisiana Professional Counselor Licensing Board of Examiners.

This program has been approved for 25.0 continuing education contact hours by the National Association of Social Workers, Louisiana Chapter as authorized by the Louisiana State Board of Social Work Examiners, and may be applied toward the continuing education requirements for licensure renewal.



PRESENTED BY: Kelly Wilson, LCSW

ON THIS DAY: August 15-16, 2019. Baton Rouge, LA

Sponsored by the Center for Evidence to Practice, a partnership between LSUHSC School of Public Health and the Department of Health – Office of Behavioral Health.



CERTIFICATE



PARTICIPATION

LaSonja Eleby

This is to certify that the above named person participated in the continuing education course:

ADVANCED TRAUMA FOCUSED COGNITIVE BEHAVIORAL THERAPY



This program was approved for 14.0 CE clock hours in Diagnosis by the Louisiana Counseling Association as authorized by the Louisiana Professional Counselor Licensing Board of Examiners.

This program has been approved for 14.0 continuing education contact hours by the National Association of Social Workers, Louisiana Chapter as authorized by the Louisiana State Board of Social Work Examiners, and may be applied toward the continuing education requirements for licensure renewal.

PRESENTED BY: *Kelly Wilson, LCSW*

ON THIS DAY: *January 27-28, 2020. Baton Rouge, LA*

CERTIFICATE OF ATTENDANCE

This is awarded to

**LaSonja
Eleby**

To signify the participation in the Basic Eye Movement Desensitization
Reprocessing Training

This 24-hour clinical course was offered
August 2-4, 2021 and presented by Dr. Carol Miles
*Sponsored by the Center for Evidence to Practice, a
collaborative project with the Office of Behavioral Health
and LSUHSC-NO School of Public health*



Certificate of Continuing Education
Eye Movement Desensitization and Reprocessing
Pt. 2

LaSonja Eleby , LPC

Completed online December 1-3, 2021

Presented by: Carol Miles, Ph.D.

Approved for **22.5 hours** of clinical continuing education credit

by The National Association of Social Workers - Louisiana Chapter
as authorized by the Louisiana State Board of Social Work Examiners
and by *The Louisiana Counseling Association*
as approved by the Louisiana Licensed Professional Board of Examiners

Sponsored by the LSUHSC Center for Evidence to Practice
and the Louisiana Office of Behavioral Health



TF-CBT Certification

**This Certification is Hereby Awarded
to:**

Cassandra Smith

**For successfully completing the National
Trauma-Focused Cognitive-Behavioral
Therapy Therapist Certification Program**

**Presented by Allegheny Health Network
and the Rowan University CARES Institute**

AP Mannarino, PhD

Anthony P. Mannarino, PhD
Director Center for Traumatic Stress in Children and Adolescents

This certification is effective until
the date listed below:

Monday July 27, 2026

Denise Gilstrap, PhD, LPC, NCC

Diverse background in counseling and education

New Orleans, LA

denisegilstrap4_8zs@indeedemail.com

214-554-3883

I have a background in K-12 education, clinical mental health, college teaching, and child and family therapy. I am seeking a part-time opportunity in counseling or ABA. I am currently completing my ABA coursework and seeking supervision. I am a Licensed Professional Counselor in Louisiana (No.7046), Licensed Professional Counselor-Supervisor in Mississippi (No.2121), National Certified Counselor, and Registered Play Therapist.

Authorized to work in the US for any employer

Work Experience

Clinical Supervising Director/Assistant Professor

Loyola University New Orleans - New Orleans, LA

August 2020 to Present

Teach graduate courses in counseling; prepare weekly lectures; supervising counseling interns; complete clinic outreach and programming.

Assistant Professor

Southern University and A&M College - Baton Rouge, LA

January 2019 to August 2020

I currently teach in the graduate Clinical Mental Health Counseling program. The courses I teach are Assessment, Internship, Human Growth and Development, and Play Therapy.

Family Therapist

The Center for Children and Families - Monroe, LA

May 2017 to May 2018

Provide therapeutic services to children and families through the Family Preservation treatment program; create treatment plans with the goal of preventing home displacement or creating safe and nurturing environment for children in foster care; support family in developing affective relations; collaborate with collaterals on clients' therapeutic progress; address safety concerns through safety planning; support clients in improving school and vocational performance; assist families with recognizing and developing a support network.

Assistant Professor

University of Louisiana at Monroe - Monroe, LA

August 2016 to May 2018

- Marriage and Family Therapy & Counseling Studies
- Position summary: Taught 3-3 course load; provided clinical supervision to students in practicum and internship; design online course modules; served as co-adviser for Lambda Alpha chapter of Chi Sigma Iota; served member of Faculty Development Committee and Summer Workshop Committee.

School Therapist

Communicare - Oxford, MS

October 2013 to August 2016

Provided year-round therapeutic services for K-5 students; completed intake assessments, diagnosis, treatment planning, and ongoing individual and group therapy for new and existing clients; made referrals as necessary; provided psychoeducation to school staff and families regarding mental health services and interventions; consulted with teachers, administrators, and parents regarding student progress and special family issues; responded to crisis calls/intervention as required; facilitated parent support groups for Family Education Program in Lafayette and Yalobusha Counties.

ELA Instructor/Academic Interventionist

Abramson Elementary School - New Orleans, LA

July 2012 to July 2013

Joined Abramson Elementary School as part of a school turnaround team and member school's Leadership Team; assisted with aligning instruction with college and career readiness standards; provided reading instruction and intervention; analyzed weekly assessment data and initiated reteach plans based on low-mastery objectives; assisted students with ongoing goal-setting; participated in weekly cluster meetings and parent conferences; co-coordinated college and career events for 7th and 8th grade; delivered college and career-based guidance lessons and career assessments; supported students in developing 5-year plans; provided psychoeducation to middle school teachers on effective behavioral interventions.

7th/ 8th Lead Reading Teacher

Harriet Tubman Charter School - New Orleans, LA

July 2011 to July 2012

Founding teaching team member of the first start-up charter with Crescent City Schools; delivered career assessments and assisted students with high school selection process; facilitated small groups focused on social skills, intensive reading instruction, and positive behavior support; assisted with IEP planning and development; created and organized unit planning guides and lesson plans; provided data-driven instruction to a student population performing on average three years below grade level; planned instruction based on reading workshop model; taught reading mini-lessons in guided reading groups; administered Fountas and Pinnell reading assessment to determine growth.

English Language Arts Teacher

Gaston Middle School - Dallas, TX

August 2006 to May 2011

Taught 7th grade English and language arts; assigned role as grade-level chair and team lead teacher; served as new teacher mentor for TFA teachers and alternative certification teachers; observed and evaluated teacher mentees on instruction delivery and lesson planning; coordinated college visits as AVID Site Team Member; assisted with school and district History Day activities; sponsored National Junior Honor Society; coached girls basketball and volleyball teams.

Education

Doctor of Philosophy in Counselor Education & Supervision

The University of Mississippi - Oxford, MS

August 2016

Master of Science in Counseling

Texas A &M University - Commerce, TX

December 2009

Master of Arts in Teaching

Texas Woman's University - Denton, TX

August 2006

Bachelor's in English

Texas Woman's University - Denton, TX

August 2001 to December 2004

Skills

- Therapy (9 years)
- Teaching (10+ years)
- Microsoft Office (10+ years)
- Public Speaking (5 years)
- documentation
- case management
- mental health
- counseling
- problem solving
- Management
- Group Therapy
- Mental Health Counseling
- Intake Experience
- Individual / Group Counseling
- Child & Family Counseling
- Clinical Counseling
- Research
- Behavioral Therapy

Awards

Outstanding Doctoral Student

May 2016

University of Mississippi- School of Education

Phi Kappa Phi Honor Society

October 2014

University of Mississippi

Chi Sigma Iota Counseling Honor Society

April 2009

Texas A&M University-Commerce

Certifications and Licenses

Licensed Professional Counselor (Louisiana)

Licensed Professional Counselor-Supervisor (Mississippi)

National Certified Counselor (NCC)

Registered Play Therapist

Teaching Certificate (Louisiana)

Reading, Early Interventionist, Special Education Mild/Moderate

Teaching Certificate (Texas)

ELA 4-8, Special Education EC-12, School Counseling

Publications

Winburn, A., Gilstrap, D., Perryman, M. (2017). Treating the tiers: Play therapy responds to intervention in the schools. International Journal of Play Therapy, 26(1), pp.1-11.

2017

Gilstrap, D., Dunagan, M., Parker, L. (October, 2016). Scales, Children. In SAGE Encyclopedia of Marriage and Family Counseling. Thousand Oaks, CA: SAGE Publications.

Gilstrap, D., Parker, L., Dunagan, M. (October, 2016). Multiple Family Therapy. In SAGE Encyclopedia of Marriage and Family Counseling. Thousand Oaks, CA: SAGE Publications.

• **Winburn, A., Gilstrap, D., Strickland, J. (2014). Playing well with others: Utilizing a strengths-based approach. Play Therapy Magazine, 10(1), pp.18-22.**

Additional Information

SUMMARY OF SKILLS

- Background in school counseling, school therapy, play therapy, family education programming, and secondary education.
- Experienced in teaching core counseling curriculum and providing supervision of graduate students.
- Training and experience in online instruction and course design.
- Presented at local, regional, and national counseling conferences.



Certificate of Continuing Education Credit


Denise Gilstrap, 2121, Mississippi

Bill White - EMDR Basic Training

Dates of Training: 04/05/2019, 04/06/2019, 04/07/2019

**Location : Baton Rouge LA
20CE Credits**


Ron Black, L.C.S.W


Toni M. Didona, Ph.D.

Ce-Classes.com is approved by:

- * The American Psychological Association (APA) Ce-Classes.com is approved by the American Psychological Association to sponsor continuing education for psychologists. Ce-Classes.com maintains responsibility for this program and its content.
- * This course is NOT available for NBCC credit.
Social workers participating in this course will receive 20 Clinical continuing education clock hours.
- * This training does not offer ASWB ACE credit to social workers.

- * The Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling Provider #852 BAP-Expires 3/31/2023
- * The California Board of Behavioral Sciences. The California Board of Behavioral Sciences, BBS, recognizes relevant course work/training that has been approved by nationally recognized certifying bodies, such as APA, to satisfy renewal requirements.
- * California Consortium of Addiction Programs and Professionals (CCAPP) Provider Number OS-12-147-0221 Expires 2-2021
- * The Texas Board of Social Work Examiners, Continuing Education Provider - 5674 expires 4/30/2021.
- * The Texas Board of Professional Counselors, Continuing Education Provider
- * Massachusetts Authorization Number: 1776
- * Ohio Counselor, Social Worker and Marriage and Family Therapist Board - Provider # RCST031201 Expires 5/31/2021
- * New York Social Work Board - Ce-Classes.com is recognized by the New York State Education Department's State Board for Social Work as an approved provider of continuing education for licensed social workers #SW-0120.

www.ce-classes.com

1398 SW 160th Ave Suite #202 Sunrise, FL 33326



Certificate of Completion

EMDR Part 2

Fri, Dec 4 – Sun, Dec 6 2020 : Live Online Webinar Event - Interactive

Keith Gibson, Ph.D.
Program Administrator
CE Learning Systems LLC

This is to certify that:

Denise Gilstrap

LA Counselor
LPC #7046
has completed

Bill White, LCSW
Event Director
Center for Psychological
Trauma

Total Contact Hours/CEs/CPEUs: **20.00**

- **APA 20.00 credit hours** CE Learning Systems, LLC is approved by the American Psychological Association to sponsor continuing education for psychologists. CE Learning Systems maintains responsibility for this program and its content.



Denise Gilstrap LPC #7046 Event Badge Code RTRpVJJnRypB

Sessions Attended

- S01 (12/04/2020 8:30 AM - 5:30 PM CST): EMDR Part 2 - Day One, 7.00 CE Hours
Bill White, LCSW; Juliet Catrett; Michael Keller, MSW, LSCSW
- S02 (12/05/2020 8:30 AM - 5:30 PM CST): EMDR Part 2 - Day Two, 7.00 CE Hours
Bill White, LCSW; Juliet Catrett; Michael Keller, MSW, LSCSW
- S03 (12/06/2020 8:30 AM - 4:30 PM CST): EMDR Part 2 - Day Three, 6.00 CE Hours
Bill White, LCSW; Juliet Catrett; Michael Keller, MSW, LSCSW

OPS Family Care, LLC

DJS Progress Report

Client Name:

Session Date:

Probation/FINS Officer
Name:

Session Type

- ☐ Individual
- ☐ Group
- ☐ Family

Session Length:

Attendance and Contact Data

- ☐ Attended
- ☐ Cancelled
- ☐ Rescheduled
- ☐ Missed (No Call/NoShow)

Telephone Contact Date:

- ☐ Spoke to Client
- ☐ Left Message

Resolution/Content of
Contact:

Therapeutic Progress Update

- ☐ Significant Progress Made
- ☐ Minimal Progress Made
- ☐ No Progress Made

Prognosis and Summary

- ☐ Good
- ☐ Fair
- ☐ Poor

Session Summary and
Prognosis Explanation:

Therapist Name:

Therapist Phone Number:

Therapist Email Address:

Date Completed: