



CENTRALBIDDING
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**SOQ 24-011 Therapeutic Treatment Services for the Jefferson Parish
Department of Juvenile Services**
Jefferson Parish Government

Project documents obtained from www.CentralBidding.com
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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:

B. Firm Name & Address:

CORE Louisiana Counseling & Recovery Center, LLC

Mailing/Billing Address: 4534 Owens Blvd. New Orleans, LA 70122

Chalmette Office: 306 W. Judge Perez Dr. 2nd Floor, Chalmette LA 70043

Terrytown Office: 1799 Stumpf Blvd. Building 2, Suite 5, Terrytown, LA 70056

New Orleans Office: 4833 Conti St., Suite 209, New Orleans, LA 70119

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:

Nicole Goldin Muro, MMT, LAC
Chief Executive Officer

ngoldin@mycorecenter.com
504-656-4325 (HEAL)

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

Chalmette Office: 306 W. Judge Perez Dr. 2nd Floor, Chalmette LA 70043

Terrytown Office: 1799 Stumpf Blvd. Building 2, Suite 5, Terrytown, LA 70056

New Orleans Office: 4833 Conti St., Suite 209, New Orleans, LA 70119

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

YES _____ NO X

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.
N/A

2.
N/A

General Professional Services Questionnaire

G. Has this JOINT-VENTURE previously worked together? Please check: YES _____ NO _____ N/A		
H. List all subcontractors anticipated for this Project. Please note that <u>all subcontractors must submit a fully completed copy of this questionnaire</u>, 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. N/A		
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: <div style="border-bottom: 1px solid black; width: 100px; margin-top: 5px;">14</div>
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:
Licensed Clinical Supervisors: 1) Madelynn Fellon, LPC-S, LMFT 2) Megan Loos, LPC-S 3) Andrea Wright, LCSW-BACS
Name of Firm with which associated:
CORE Louisiana Counseling & Recovery Center, LLC
Description of job responsibilities:
Counselors providing counseling for individuals and families.
Years' experience with this Firm:
1) 3+ years 2) 4+ years 3) 3+ years
Education: Degree(s)/Year/Specialization:
1) Master's Degree in Counseling 2) Master's Degree in Counseling 3) Master's Degree in Social Work
Other experience and qualifications relevant to the proposed Project:
<ul style="list-style-type: none">- Experience working with mandated clients (individuals and families)- Experience working with youth- Strong clinical reporting, assessment, and communication skills- Motivational Interviewing- Cognitive-Behavioral Therapy

General Professional Services Questionnaire

PROFESSIONAL NO. 2
Name & Title:
Fully-Licensed Counselors: 1) Vanesa Diaz, LCSW 2) Laura Garcia, LCSW 3) Nicole Goldin, LAC
Name of Firm with which associated:
CORE Louisiana Counseling & Recovery Center, LLC
Description of job responsibilities:
Therapists providing counseling for individuals and families.
Years' experience with this Firm:
1) 1+ years 2) 1 year 3) 4+ years
Education: Degree(s)/Year/Specialization:
1) Master's Degree in Social Work 2) Master's Degree in Social Work 3) Master of Music Therapy, Licensed Addiction Counselor
Other experience and qualifications relevant to the proposed Project:
<ul style="list-style-type: none">- Bilingual therapists- Experience working with mandated clients (individuals and families)- Experience working with youth- Strong clinical reporting, assessment, and communication skills- Motivational Interviewing- Cognitive-Behavioral Therapy

General Professional Services Questionnaire

PROFESSIONAL NO. 3
Name & Title:
Provisional Licensed Counselors: 1) Krystyn Bourg, PLPC 4) Michelle Canepa, PLPC 2) Tracy Ferezan, PLPC 5) Brooke Bemiss, PLPC 3) Sydney Gordon, PLPC
Name of Firm with which associated:
CORE Louisiana Counseling & Recovery Center, LLC
Description of job responsibilities:
Therapists providing counseling for individuals and families.
Years' experience with this Firm:
1) 2 years 4) 1 year 2) 2 years 5) 1 year 3) 1 year
Education: Degree(s)/Year/Specialization:
1) Master's Degree in Counseling 4) Master's Degree in Counseling 2) Master's Degree in Counseling 5) Master's Degree in Counseling 3) Master's Degree in Counseling
Other experience and qualifications relevant to the proposed Project:
<ul style="list-style-type: none">- Experience working with mandated clients (individuals and families)- Experience working with youth- Strong clinical reporting, assessment, and communication skills- Motivational Interviewing- Cognitive-Behavioral Therapy

General Professional Services Questionnaire

PROFESSIONAL NO. 4
Name & Title:
Counseling Interns: 1) Kristen Cochrane 2) Vanessa Thibaut 3) Michael Olusanya
Name of Firm with which associated:
CORE Louisiana Counseling & Recovery Center, LLC
Description of job responsibilities:
Therapists providing counseling for individuals and families.
Years' experience with this Firm:
1) <1 year 2) <1 year 3) <1 year
Education: Degree(s)/Year/Specialization:
1) Pursuing a Master's Degree in Counseling 2) Pursuing a Master's Degree in Counseling 3) Pursuing a Master's Degree in Counseling
Other experience and qualifications relevant to the proposed Project:
<ul style="list-style-type: none">- Master's level training in providing counseling services- Training in Motivational Interviewing and Cognitive-Behavioral Therapy- Oversight from internship supervisor and school supervisor

General Professional Services Questionnaire

PROFESSIONAL NO. 5
Name & Title:
N/A
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:
Evidence-Based Treatment Services to At-Risk Youth and/or their Families	CORE currently provides mental health counseling for referrals from Jefferson Parish Department of Juvenile Services.
Length of Services Provided:	Cost of Services Provided:
1+ year	Contracted rate

PROJECT NO. 2

Project Name, Location and Owner's contact information:	Description of Services Provided:
Jefferson Parish Diversion Referrals	CORE Offers a variety of services to individuals referred by the Jefferson Parish Diversion program, including, yet not limited to, individual counseling, anger management, DWI education, substance abuse education, assessments, etc.
Length of Services Provided:	Cost of Services Provided:
Since 2021	Various \$25-150 per service

General Professional Services Questionnaire

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

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

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

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

PROJECT NO. 10	
Project Name, Location and Owner's contact information:	Description of Services Provided:
N/A	
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. N/A		
2.		
3.		
4.		

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

We are looking forward to continuing our working relationship with Jefferson Parish's Department of Juvenile Services. It has been a pleasure to have a collaborative relationship with DJS for the previous iteration of this contract and are hopeful that it will remain ongoing.

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

Signature:  **Print Name:** Nicole Goldin Muro

Title: Chief Executive Officer **Date:** 05/28/2024