



**Office of State Courts Administrator  
P.O. Box 104480  
2112 Industrial Drive  
Jefferson City, Missouri 65110- 4480**

**AMENDMENT 001**

**RFP NO. OSCA 14-042**

**TITLE: Specialized Treatment Provider  
for Treatment Court**

**ISSUE DATE: March 5, 2014**

**CONTACT: Russell Rottmann**

**PHONE NO.: (573)522-6766**

**E-MAIL: osca.contracts@courts.mo.gov**

**RETURN PROPOSALS NO LATER THAN: MARCH 17, 2014**

**MAILING INSTRUCTIONS:** Print or type **RFP Number** and **Return Due Date** on the lower left hand corner of the envelope or package.

**RETURN PROPOSAL TO:**

**(U.S. Mail)**

**Office of State Courts Administrator  
Attn: Contract Unit or  
PO Box 104480  
Jefferson City Mo 65110 - 4480**

**(Courier Service)**

**Office of State Courts Administrator  
Attn: Contract Unit  
2112 Industrial Dr  
Jefferson City Mo 65109**

**CONTRACT PERIOD: DATE OF AWARD THROUGH JUNE 30, 2015**

**DELIVER SUPPLIES/SERVICES FOB DESTINATION TO THE FOLLOWING ADDRESS:**

**VARIOUS LOCATIONS THROUGHOUT THE STATE OF MISSOURI**

The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions Request for Proposal. The vendor further agrees that the language of this RFP shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order or when this RFP is countersigned by an authorized official of the Office of State Courts Administrator, a binding contract shall exist between the vendor and the Office of State Courts Administrator.

**SIGNATURE REQUIRED**

AUTHORIZED SIGNATURE 		DATE 03/14/2014
PRINTED NAME Michael Rogers		TITLE President
COMPANY NAME Higher Ground Recovery Center		
MAILING ADDRESS 2032 E Kearney, Suite 214		
CITY, STATE, ZIP Springfield, MO 65803		
E-MAIL ADDRESS mrogers@higherground417.org		FEDERAL EMPLOYER ID NO. 46-1275370
PHONE NO. 417-869-0700	FAX NO. 417-869-0705	

**NOTICE OF AWARD (OSCA USE ONLY)**

ACCEPTED BY OFFICE OF STATE COURTS ADMINISTRATOR AS FOLLOWS: AS SUBMITTED		
CONTRACT NO. OSCA 14-042-18	CONTRACT PERIOD July 1, 2014 through June 30, 2015	
CONTRACTS COORDINATOR 	DATE 4-22-2014	DEPUTY STATE COURTS ADMINISTRATOR 



HIGHER GROUND RECOVERY CENTER

RFP NO. OSCA 14-042

COPY

*HIGHER*  
*GROUND*  
RECOVERY CENTER

Transmittal Letter  
March 14, 2014

**TO:** Office of State Courts Administrator  
Attn: Contract Unit  
2112 Industrial Dr.  
Jefferson City, MO 65109

**RE:** RFP NO. OSCA 14-042

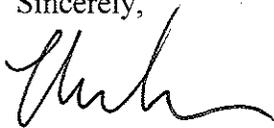
Dear Contract Unit Team:

As President of Higher Ground Recovery Center, I am pleased to submit the enclosed proposal to the Office of State Courts Administrator in response to RFP NO. OSCA 14-042.

Higher Ground Recovery Center is certified by the Missouri Department of Mental Health Division of Alcohol and Drug Abuse as a Level Two Intensive Outpatient Substance Abuse Program and is the contracted access site for Access to Recovery (ATR) recovery supports in the southwest region of Missouri. I am hoping that Higher Ground Recovery Center will continue in its relationship with OSCA related to services provided to the Greene County Drug Court.

I hope that this proposal will meet your approval.

Sincerely,



Michael J. Rogers, LPC, CRAADC  
President



RFP NO. OSCA 14-042

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P.O. Box 104480  
2112 Industrial Drive  
Jefferson City, Missouri 65110- 4480**

**RFP NO. OSCA 14-042**  
**TITLE: Specialized Treatment Provider**  
**for Treatment Court**  
**ISSUE DATE: February 24, 2014**

**CONTACT: Russell Rottmann**  
**PHONE NO.: (573)522-6766**  
**E-MAIL: osca.contracts@courts.mo.gov**

**RETURN PROPOSALS NO LATER THAN: MARCH 17, 2014**

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**Jefferson City Mo 65110 - 4480**

**(Courier Service)**  
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**Attn: Contract Unit**  
**2112 Industrial Dr**  
**Jefferson City Mo 65109**

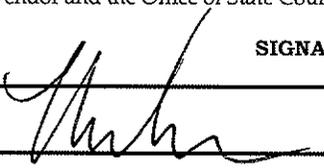
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COMPANY NAME Higher Ground Recovery Center		
MAILING ADDRESS 2032 E Kearney, Suite 214		
CITY, STATE, ZIP Springfield, MO 65803		
E-MAIL ADDRESS mrogers@higherground417.org		FEDERAL EMPLOYER ID NO. 46-1275370
PHONE NO. 417-869-0700	FAX NO. 417-869-0705	

**NOTICE OF AWARD (OSCA USE ONLY)**

ACCEPTED BY OFFICE OF STATE COURTS ADMINISTRATOR AS FOLLOWS:		
CONTRACT NO.		CONTRACT PERIOD
CONTRACTS COORDINATOR	DATE	DEPUTY STATE COURTS ADMINISTRATOR



**Office of State Courts Administrator  
P.O. Box 104480  
2112 Industrial Drive  
Jefferson City, Missouri 65110- 4480**

**AMENDMENT 001**

**RFP NO. OSCA 14-042**

**TITLE: Specialized Treatment Provider  
for Treatment Court**

**ISSUE DATE: March 5, 2014**

**CONTACT: Russell Rottmann**

**PHONE NO.: (573)522-6766**

**E-MAIL: osca.contracts@courts.mo.gov**

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**PRICING PAGE**

The vendor must provide firm, fixed prices for the services identified below. Should a contract award be made based upon the vendor's proposal, the prices stated herein shall be legally binding for the entire contract period.

Service Description	Vendor Firm, Fixed Unit Price	Unit of Service
Assessment	<u>\$250.00</u>	Per assessment
Assessment option (Multi-axial)	<u>\$354.41</u>	Per assessment
Assessment update	<u>\$150.00</u>	Per assessment
Case Management/Community Support	<u>\$13.33</u>	Per ¼ hour
Communicable Disease Assessment/Education/Testing		Per ¼ hour
Day Treatment		Per day
Detoxification (Social Setting)		Per day
Detoxification (Modified Medical)		Per day
Early Intervention (Intake)		Per ¼ hour
Early Intervention (Group Education)		Per ¼ hour
Early Intervention (Motivational Interviewing-Individual)		Per ¼ hour
Extended Day Treatment		Per day
Family Conference		Per ¼ hour
Family Therapy		Per ¼ hour
Group Counseling (Associate SA Counselor)	<u>\$3.50</u>	Per ¼ hour
Group Counseling (QSAP)	<u>\$5.75</u>	Per ¼ hour
Group Counseling ( Collateral relationship)		Per ¼ hour
Group Education	<u>\$2.58</u>	Per ¼ hour
Group Education (Trauma Related)	<u>\$2.58</u>	Per ¼ hour
Individual Counseling	<u>\$13.33</u>	Per ¼ hour
Individual Counseling (Collateral Relationship)		Per ¼ hour
Individual Counseling (Co-Occurring Disorder)	<u>\$13.33</u>	Per ¼ hour
Individual Counseling (Trauma Related)	<u>\$13.33</u>	Per ¼ hour
Medication Services		Per ¼ hour
Medication: [Medication Assisted Treatment (MAT)]		Per prescription

OSCA 14-042 Treatment Court Specialized Service Providers

Missouri Recovery Support Specialist (MRSS)		Per ¼ hour
Missouri Recovery Support Specialist Peer (MRSS-P)		Per ¼ hour
Relapse Prevention Counseling	\$13.33	Per ¼ hour
Residential Support		Per day
Treatment Court Day	\$13.33	Per ¼ hour
Virtual Counseling (Group)		Per ¼ hour
Virtual Counseling (Individual)		Per ¼ hour
Drug/Alcohol Testing: Sample Collection Only (Lab conf. only)		Per test
Sample Collection with 1-panel on-site provided by vendor		Per test
Sample Collection with 2-panel on-site provided by vendor		Per test
Sample Collection with 3-panel on-site provided by vendor		Per test
Sample Collection with 4-panel on-site provided by vendor		Per test
Sample Collection with 5-panel on-site provided by vendor		Per test
Sample Collection with 6-panel on-site provided by vendor		Per test
Sample Collection with 7-panel on-site provided by vendor		Per test
Sample Collection with 8-panel on-site provided by vendor		Per test
Sample Collection with 9-panel on-site provided by vendor		Per test
Drug Testing: Sample Collection and On-Site Test (Kit provided by Treatment Court)		Per test
Drug Testing: Breathalyzer (Equipment provided by vendor)		Per test
Drug Testing: Breathalyzer (Equipment provided by Treatment Court)		Per test

**Evidence Based Program and Practice curriculum being utilized:**

The Matrix Model

Motivational Interviewing

Helping Men Recover and Beyond Trauma

Note: Although “Helping Men Recover and Beyond Trauma” is not yet listed as an evidence based program, its sister program, “Helping Women Recover and Beyond Trauma” is. Higher Ground staff Reid Horn has completed the Helping Men Recovery training paid for by the Greene County Drug Court. However, he is still waiting for a certificate. We are currently using the facilitators manual and participant workbooks.

Living Free curriculum “Stepping into Freedom” and Completely Free” (non-evidence-based but widely used among the faith-based community).

**Which Cognitive Behavioral intervention staff is qualified to deliver:**

Moral Reconciliation Therapy

Note: The Higher Ground staff previously trained and qualified to conduct MRT is no longer with Higher Ground. We have scheduled Reid Horn for the four day MRT training with Correction Counseling Inc. in Albuquerque this April 7<sup>th</sup> – 10<sup>th</sup>.

**Please indicate if Medication Assisted Treatment (MAT) is provided. If you do not provide MAT, how and with whom MAT services are arranged and how all services are coordinated.**

Higher Ground is not contracted by the Missouri Department of Mental Health to provide MAT at this time. For Drug Court clients identified as candidates for MAT, Higher Ground Recovery Center and the Greene County Drug Court collaborate with Alternative Opportunities and Heartland Behavioral Health who are current MAT providers.

Below is a list of the Judicial Circuits and Counties in the State of Missouri. Check either the applicable counties or the entire Judicial Circuit(s) that your agency shall provide services. Check the appropriate level of service and the applicable gender that shall be provided: DWI, Adult, Veterans, Family and Juvenile.

JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
1	Clark							
1	Schuyler							
1	Scotland							
2	Adair							
2	Knox							
2	Lewis							
3	Grundy							
3	Harrison							
3	Mercer							
3	Putnam							
4	Atchison							
4	Gentry							
4	Holt							
4	Nodaway							
4	Worth							
5	Andrew							
5	Buchanan							
6	Platte							
7	Clay							
8	Carroll							
8	Ray							
9	Chariton							
9	Linn							
9	Sullivan							
10	Marion							
10	Monroe							
10	Ralls							
11	St. Charles							
12	Audrain							
12	Montgomery							

OSCA 14-042 Treatment Court Specialized Service Providers

JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
12	Warren							
13	Boone							
13	Callaway							
14	Howard							
14	Randolph							
15	Lafayette							
15	Saline							
16	Jackson							
17	Cass							
17	Johnson							
18	Cooper							
18	Pettis							
19	Cole							
20	Franklin							
20	Gasconade							
20	Osage							
21	St. Louis							
22	St. Louis City							
23	Jefferson							
24	Madison							
24	St. Francois							
24	Ste. Genevieve							
24	Washington							
25	Maries							
25	Phelps							
25	Pulaski							
25	Texas							
26	Camden							
26	Laclede							
26	Miller							

OSCA 14-042 Treatment Court Specialized Service Providers

JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE
26	Moniteau							
26	Morgan							
27	Bates							
27	Henry							
27	St. Clair							
28	Barton							
28	Cedar							
28	Dade							
28	Vernon							
29	Jasper							
30	Benton							
30	Dallas							
30	Hickory							
30	Polk							
30	Webster							
31	Greene		X				X	X
32	Bollinger							
32	Cape Girardeau							
32	Perry							
33	Mississippi							
33	Scott							
34	New Madrid							
34	Pemiscot							
35	Dunklin							
35	Stoddard							
36	Butler							
36	Ripley							
37	Carter							
37	Howell							
37	Oregon							
37	Shannon							
JUDICIAL CIRCUIT	COUNTY	DWI	ADULT	FAMILY	VETERANS	JUVENILE	MALE	FEMALE

OSCA 14-042 Treatment Court Specialized Service Providers

38	Taney							
38	Christian							
39	Barry							
39	Lawrence							
39	Stone							
40	McDonald							
40	Newton							
41	Macon							
41	Shelby							
42	Crawford							
42	Dent							
42	Iron							
42	Reynolds							
42	Wayne							
43	Caldwell							
43	Clinton							
43	Daviess							
43	DeKalb							
43	Livingston							
44	Douglas							
44	Ozark							
44	Wright							
45	Lincoln							
45	Pike							

EXHIBIT A

**PRIOR EXPERIENCE**

The offeror should copy and complete this form for each reference being submitted as demonstration of the offeror and subcontractor's prior experience. In addition, the offeror is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Offeror Name or Subcontractor Name: <u>Higher Ground Recovery Center</u>	
<b>Reference Information (Prior Services Performed For:)</b>	
Name of Reference Company:	Missouri Board of Probation & Parole, District 10
Address of Reference Company: ✓ Street Address ✓ City, State, Zip	2530 South Campbell, Suite H Springfield, MO 65807
Reference Contact Person Information: ✓ Name ✓ Phone # ✓ E-mail Address	Kim McKlinter, District Administrator 417-888-4203, Ext 247 kim.mcklinter@doe.mo.gov
Dates of Prior Services:	2009 - Current
Dollar Value of Prior Services:	N/A
Description of Prior Services Performed:	Certified Level 2 and 3 outpatient program services including screening, assessment, drug and alcohol testing, individual counseling, group counseling, group education, and recovery supports.

*As the contact person for the reference provided above, my signature below verifies that the information presented on this form is accurate. I am available for contact by OSCA for additional discussions regarding my company's association with the offeror referenced above:*

  
\_\_\_\_\_  
Signature of Reference Contact Person

3-20-14  
\_\_\_\_\_  
Date of Signature

OSCA 14-042 Treatment Court Specialized Service Providers

**EXHIBIT A**

**PRIOR EXPERIENCE**

The offeror should copy and complete this form for each reference being submitted as demonstration of the offeror and subcontractor's prior experience. In addition, the offeror is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

<b>Offeror Name or Subcontractor Name:</b> <u>Higher Ground Recovery Center</u>	
<b>Reference Information (Prior Services Performed For:)</b>	
Name of Reference Company:	Missouri Board of Probation & Parole, District 10R
Address of Reference Company: ✓ Street Address ✓ City, State, Zip	1735 W Catalpa, Suite H Springfield, MO 65807
Reference Contact Person Information: ✓ Name ✓ Phone # ✓ E-mail Address	William Abbett, District Administrator 417-895-5700 Ext 230 bill.abbett@doc.mo.gov
Dates of Prior Services:	2009 - Current
Dollar Value of Prior Services:	N/A
Description of Prior Services Performed:	Certified Level 2 and 3 outpatient program services including screening, assessment, drug and alcohol testing, individual counseling, group counseling, group education, and recovery supports.

*As the contact person for the reference provided above, my signature below verifies that the information presented on this form is accurate. I am available for contact by OSCA for additional discussions regarding my company's association with the offeror referenced above:*

  
Signature of Reference Contact Person

3/13/14  
Date of Signature

**EXHIBIT A**

**PRIOR EXPERIENCE**

The offeror should copy and complete this form for each reference being submitted as demonstration of the offeror and subcontractor's prior experience. In addition, the offeror is advised that if the contact person listed for the reference is unable to be reached during the evaluation, the listed experience may not be considered.

Offeror Name or Subcontractor Name: <u>Higher Ground Recovery Center</u>	
<b>Reference Information (Prior Services Performed For:)</b>	
Name of Reference Company:	Missouri Department of Social Services, 31st Circuit
Address of Reference Company: ✓ Street Address ✓ City, State, Zip	149 Central Sq. Springfield, MO 65806
Reference Contact Person Information: ✓ Name ✓ Phone # ✓ E-mail Address	Heather Ford, 31st Circuit Manager 417-895-6000 heather.d.ford@dss.mo.gov
Dates of Prior Services:	2009 - Current
Dollar Value of Prior Services:	N/A
Description of Prior Services Performed:	Certified Level 2 and 3 outpatient program services including screening, assessment, drug and alcohol testing, individual counseling, group counseling, group education, and recovery supports.

*As the contact person for the reference provided above, my signature below verifies that the information presented on this form is accurate. I am available for contact by OSCA for additional discussions regarding my company's association with the offeror referenced above:*

Heather Ford  
Signature of Reference Contact Person

3-13-14  
Date of Signature

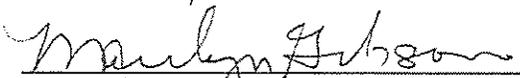
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<b>Offeror Name or Subcontractor Name:</b> <u>Higher Ground Recovery Center</u>	
<b>Reference Information (Prior Services Performed For:)</b>	
Name of Reference Company:	Greene County Adult Drug Court
Address of Reference Company: ✓ Street Address ✓ City, State, Zip	1010 North Boonville Springfield, MO 65802
Reference Contact Person Information: ✓ Name ✓ Phone # ✓ E-mail Address	Marilyn Gibson, Drug/DWI Court Administrator 417-829-6159 marilyn.gibson@courts.mo.gov
Dates of Prior Services:	November, 2012 - Current
Dollar Value of Prior Services:	\$105,284.96
Description of Prior Services Performed:	Certified Level 2 and 3 outpatient program services including screening, assessment, drug and alcohol testing, individual counseling, group counseling, group education, and recovery supports.

*As the contact person for the reference provided above, my signature below verifies that the information presented on this form is accurate. I am available for contact by OSCA for additional discussions regarding my company's association with the offeror referenced above:*

  
Signature of Reference Contact Person

3-13-14  
Date of Signature

## Attachment to Exhibit A

Since receiving its outpatient certification in February, 2009, Higher Ground Recovery Center has received the majority of its referrals to treatment from the following agencies who are included as references.

- District 10 Probation and Parole:

930 referrals to treatment since 2009

- District 10R Probation and Parole:

353 referrals to treatment since 2009

- Department of Family Services, Greene County Children's Division:

127 referrals to treatment since 2009

- Greene County Drug Court:

29 referrals to treatment since October, 2012

**EXHIBIT B**

**PERSONNEL EXPERTISE SUMMARY**

(Complete this Exhibit for personnel proposed. Resumes or summaries of key information may be provided)

Personnel	Background and Expertise of Personnel and Planned Duties
<p>1. <u>Michael Rogers</u>                      (Name)  <u>Executive Director</u>                      (Title)  <u>Program Director</u>                      (Proposed Role/Function)</p>	<p>Michael Rogers is the founder and Executive Director of the Higher Ground Recovery Center. Since receiving his Master of Arts in Counseling from the Assemblies of God Theological Seminary in 2004 Michael has received the Certified Reciprocal Advanced Alcohol and Drug Counselor (CRAADC) credential as well as the Licensed Professional Counselor (LPC) licensure. During his tenure at Sigma House from 2002 to 2007, Michael provided counseling services for the Greene County Drug Court and for the Missouri Department of Corrections. After completing his master’s program in 2004 he was promoted to clinical director of Sigma House. Michael has provided counseling services at Correction Services, Sigma House, and Kansas City Community Center (now Heartland Behavioral Health). He is a Missouri Recovery Support Specialist (MRSS) and is the director of the Southwest Regional ATR III Recovery Support Access Site at Higher Ground.</p> <p>Michael began developing the Higher Ground outpatient program in 2007. After receiving certification for level three outpatient in January of 2009, Michael increased the programing to meet requirements for level two intensive outpatient.</p>
<p>2. <u>Lisa Rogers</u>                      (Name)  <u>Associate Director</u>                      (Title)  <u>Clinical Counselor</u>                      (Proposed Role/Function)</p>	<p>Lisa Rogers is the Associate Director of the Higher Ground Recovery Center. Lisa received her Bachelors of Science in Psychology at Missouri State University in 2010 and has been employed with Higher Ground since 2005. Lisa was involved with the initial development of the Higher Ground program and began coordinating services and overseeing operations at that time. After the Higher Ground program became state certified for level three outpatient in 2009 Lisa began working on her substance abuse credentials and has since received the Certified Reciprocal Alcohol and Drug Counselor credential (CRADC). She has a wide range of experience in the area of substance abuse, domestic violence, homelessness, working with children, families, and mentally challenged individuals in a variety of community centers in her lifetime.</p>

<p>3. <u>Megan Knight</u>                  (Name)  <u>Counselor</u>                  (Title)  <u>Counselor</u>                  (Proposed Role/Function)</p>	<p>Megan Knight is a Certified Alcohol and Drug Counselor at Higher Ground Recovery Center. She completed her Bachelor's degree in 2010. While working on her bachelor's degree, Megan volunteered at Victory House teaching classes about communication and codependency. Upon completing her bachelor's degree in 2010, Megan immediately began working on her master's. She obtained employment at Burrell Behavioral Health working as a caseworker for severely mentally ill adults and assisting them with gaining the skills necessary to live as independently as possible. Megan began to work at Higher Ground in November 2011 as a counselor. She has experience in individual counseling, group counseling, assessment and supervision.</p>
<p>4. <u>Briana Harless</u>                  (Name)  <u>Counselor</u>                  (Title)  <u>Counselor</u>                  (Proposed Role/Function)</p>	<p>Bri Harless is a Certified Reciprocal Advanced Alcohol and Drug Counselor at Higher Ground Recovery Center. Prior to beginning work on her Bachelor's degree in 2007 she was involved in educating students, through afterschool programs, about the dangers of substance abuse. Bri began working in substance abuse in 2009 at the Victory Trade School. During her time at Victory Trade School she worked with clients in a sober living environment to gain insight into their substance use, homelessness or mental health issues. She earned her Bachelor of Arts in counseling in 2010 and immediately began work on her Master of Arts in Counseling, which she completed in April 2013. In 2011 she began work at Higher Ground as a Counselor in Training, in March 2012 became a Certified Alcohol and Drug Counselor, and in July 2013 was Certified as a Reciprocal Advanced Alcohol and Drug Counselor (CRAADC). She has had experience in individual counseling, group counseling, assessment, and case management.</p>
<p>5. <u>Jim Snare</u>                  (Name)  <u>Counselor in Training</u>                  (Title)  <u>Counselor</u>                  (Proposed Role/Function)</p>	<p>Jim Snare is a Recognized Associate Substance Abuse Counselor II at Higher Ground Recovery Center. Jim started with Higher Ground in November 2012 and continues with ongoing professional development through education with MSAPCB. Jim received his BSW in Social Work with a Minor in Psychology in 2007. Previous to Higher Ground Jim was employed with Missouri Children's Division for 5 years as a CSW II Alternative Care case manager helping parents with addictions get their children returned home to a safe environment. Jim also retired in 1999 with 20 years of service in the Missouri Army National Guard as a SSG 51H Platoon Sergeant.</p>

<p>6. <u>Reid Horn</u>                  (Name)  <u>Counselor in Training</u>                  (Title)  <u>Counselor</u>                  (Proposed Role/Function)</p>	<p>Reid is a Recognized Associate Substance Abuse Counselor II at Higher Ground Recovery Center. Prior to beginning work at Higher Ground in May of 2013, He was working with North Point Church (NPC) Counseling Department and Christian Counseling Services for four years helping individuals and couples with various life problems and growth opportunities as well as giving group training presentations to volunteers and staff of NPC. He graduated from Central Bible College in 2010 with a bachelors in Counseling Psychology and an associates in church leadership. In May of 2014, He will graduate with a Masters in Counseling Psychology from Evangel University where he will begin the process of becoming a Certified Alcohol and Drug Counselor and a Licensed Professional Counselor. He has received training in evidence based practices such as Helping Men Recover by Dan Griffith and Rick Dauer and he is scheduled to attending Moral Reconation Therapy training in April. He has experience in individual counseling, group counseling, and training presentations.</p>
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# Michael J. Rogers

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## EDUCATION

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**Master of Arts, Counseling**, Assemblies of God Theological Seminary, Springfield, MO, 2004

**Certificate of Diploma**, Elim Bible Institute, Lima, NY, 2001

## CERTIFICATIONS

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**Licensed Professional Counselor (LPC)**

**Certified Reciprocal Advanced Alcohol Drug Counselor (CRAADC)**

**Missouri Recovery Support Specialist (MRSS)**

**Licensed Minister (Assemblies of God)**

## RELATED PROFESSIONAL EXPERIENCE

---

### **Founder and President, Higher Ground Recovery Center: January 1, 2013 - present**

- Responsible for forming, incorporating, securing 501c3 status, and facilitating a seamless transfer from under the corporate umbrella of Praise Assembly to an autonomous, non-profit charitable corporation committed to providing evidence-based clinical treatment and recovery support services from a faith-based perspective to people suffering from substance use and their families.
- Responsible for securing and maintaining all program certifications and contracts.
- Other duties include providing leadership (administrative and clinical), training and performance counseling to staff, oversight of day to day managerial and clinical operations of facility, and delivery of direct service to substance abuse/mental health consumers as needed.

### **Director, Higher Ground Program of Praise Assembly July 2007 – December 31, 2012**

- Clinical director of certified level two outpatient substance abuse program, Duties include program development, compliance with outpatient certification standards, quality assurance, policy and procedure, and direct supervision of all staff including RASAC's and master's level interns, etc.
- Director of Southwest Missouri Access to Recovery Access Site. Responsible for oversight of assessment, admission, referral and follow-up on over 800 consumers per year in ATR recovery supports.
- Other duties include coordination of education and process groups as well as direct supervision of interns, transportation, care coordination, child care, pastoral services, staff and volunteer trainings, and maintaining personnel records.

### **Kansas City Community Center: October 2009 – December 2011** *(part time)*

- Clinical supervisor of outpatient satellite office. Duties included consumer assessments, DSM multi-axis diagnoses, and admission of consumers experiencing substance use disorders, and providing direct supervision of counselor in training.

### **Qualified Substance Abuse Professional, Correction Services: Dec 2004-Sept 2007**

- Co-facilitated SATOP Weekend Intervention Programs.

**Associate Director, Sigma House-Springfield: November 2004-January 2007**

- Responsible for all clinical aspects of inpatient, outpatient, and detox substance abuse services.
- Provided supervision and coordinated appropriate training and continued education of all clinical staff.

**Qualified Substance Abuse Professional, Sigma House-Springfield: Aug 2004-Nov 2004**

- Primary counselor and Drug Court treatment team leader (July 2003-November 2004).
- Responsible for clients' evaluation, assessment, orientation, treatment planning, individual and group counseling, client education, referral and consultation.
- Responsible for coordination of Drug Court treatment strategies, quality of care provided by Sigma House/Drug Court staff, communication between Sigma House and associated agencies.

**Counselor in Training, Sigma House-Springfield: March 2003-August 2004**

- Responsible for clients' evaluation, assessment, orientation, treatment planning, individual and group counseling, client education, referral and consultation. Work with DOC, Drug Court, and Federal caseloads. Started as Drug Court Team Supervisor in July, 2003.

**Clinical Technician, Sigma House-Springfield: October 2002- March 2003**

- Assessment, admission, supervision, monitoring, transfer and discharge of all detox clients. Provided safety and ensured well-being of all detox clients, including monitoring vital signs and symptoms of withdrawal, as well as observing and recording client administered medications. Performed on site urine and BAC testing plus collecting urine for analysis for county and federal programs. Certified to apply and remove federal sweat patch.

**Assistant Program Worker, Salvation Army Family Shelter-Springfield: Nov 2001-Nov 2002**

- Performed intake interviews and assessments. Supervised and documented residents' scheduled activities and other interactions. Provided counseling, spiritual guidance, and crisis management.

**Assistant Men's Director, Carriage Town Ministries-Flint, MI: 1995-1997.**

- Performed intakes, assessments, individual and group counseling. Supervised program residents. Assisted director with drug program (taught classes, individual counseling, etc.)

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**Completed the MSACCB three day training on Clinical Supervision: Building Chemical Dependency Counselor Skills Training of Trainers (21 contact hours, March 22 -24, 2006) Certificate #84**

**Board Approved Licensed Professional Counselor (LPC) Supervisor**

**References: Available upon request.**

# Assemblies of God Theological Seminary



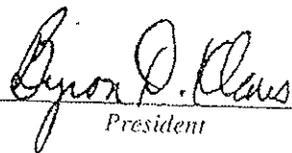
Upon the recommendation of the Faculty of the Assemblies of God  
Theological Seminary, and by the authority of the Board of Directors,  
and in the exercise of powers granted by the State of Missouri,  
We hereby confer on

**MICHAEL J. ROGERS**

the degree of

**MASTER OF ARTS IN COUNSELING**

with all the honors, rights, and privileges to that degree appertaining.  
In testimony whereof the seal of the Seminary and the signatures of the  
duly authorized officers are hereunto affixed at Springfield, Missouri,  
this twenty-third day of April, 2004.

  
\_\_\_\_\_  
President

  
\_\_\_\_\_  
Chairman of the Board of Directors

  
\_\_\_\_\_  
Academic Dean

"Go ye into all the world, and preach the Gospel to every creature."  
(Mark 16:15)



# Certificate of Ordination

This is to Certify that

*Michael J. Rogers*

having given evidence of a divine gift and call to the ministry  
of the Gospel of Christ and a consecration to the said call  
according to the Word of God, was

Ordained by the  
Elim Fellowship of Lima, New York

on the 29th day of September, 2013 to

**Preach the Word,**

administer the Christian ordinances, solemnize matrimony and  
feed the flock of God, and is so recognized by the said body as long as  
conduct and teaching are consistent with the Gospel of Christ.

President Ronald V. Burgio

General Secretary Christopher y Ball

This certificate is valid only when accompanied by a dated Fellowship card



*THIS IS TO CERTIFY THAT*

*MIKE ROGERS*

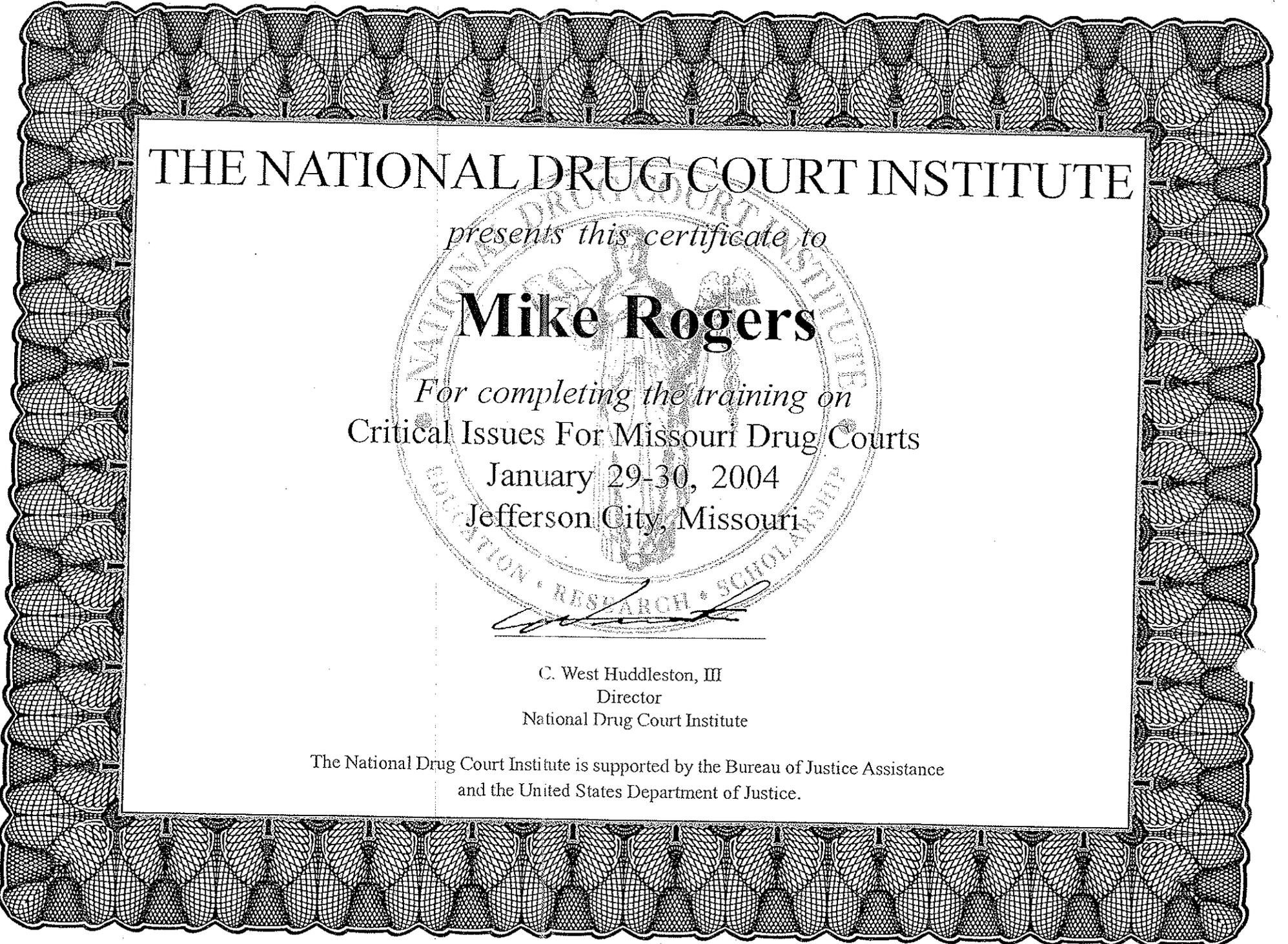
**Received 13.5 Contact Hours approved by MSACCB and 13.2 CLE approved by the MOBAR for attending the Missouri Association of Drug Court Professionals 6<sup>th</sup> Annual Conference, April 14-16, 2004**

*Molly Merrigan*

*Molly Merrigan, President*

*MADCP*

*April 16, 2004*

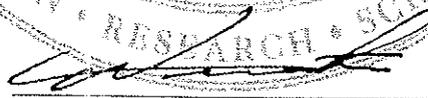


THE NATIONAL DRUG COURT INSTITUTE

*presents this certificate to*

**Mike Rogers**

*For completing the training on*  
Critical Issues For Missouri Drug Courts  
January 29-30, 2004  
Jefferson City, Missouri



C. West Huddleston, III  
Director  
National Drug Court Institute

The National Drug Court Institute is supported by the Bureau of Justice Assistance  
and the United States Department of Justice.

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THE INTERNATIONAL CERTIFICATION & RECIPROCITY CONSORTIUM

**CERTIFIES THAT**

*Michael J. Rogers*

has demonstrated knowledge, skills and professional competencies for an

**Internationally Certified Advanced  
Alcohol & Drug Counselor**

as attested to by

MSAPCB



\_\_\_\_\_  
President, IC&RC

12/8/2008

\_\_\_\_\_  
Date of Issue

202343

\_\_\_\_\_  
Certification Number

10/31/2013

\_\_\_\_\_

This Certificate verifies that

Michael Rogers

successfully completed the

**Clinical Supervision: Building Chemical  
Dependency Counselor Skills Training of  
Trainers**

on March 22-24, 2006 and is awarded 21  
contact hours through the MSACCB.



Cert. # 84

Scott Breedlove  
MSACCB Administrator

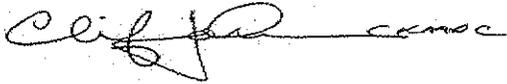
No. 6783

Missouri Substance Abuse Professional Credentialing Board

Hereby Certifies that

***Michael J. Rogers***

has met the standards and qualifications  
of a Missouri Recovery Support Specialist  
as determined by the Board.



President

Expiration Date 4/30/2014

Above is a 5x7 mini certificate is to be displayed with your large certificate. This mini certificate indicates your renewal/expiration date. This certificate will be replaced after each renewal.

No. 6783

Missouri Substance Abuse Professional Credentialing Board

Hereby certifies that

***Michael J. Rogers***

has met all the standards and qualifications  
required of a Missouri Recovery Support Specialist  
as determined by the Credentialing Board and is  
hereby conferred the title of  
**MISSOURI RECOVERY SUPPORT SPECIALIST**  
Awarded on 5/18/2012

Cliff Johnson  
President  
Alicia Ozenberger  
Secretary

State of Missouri

Division of Professional Registration  
Licensed Professional Counselor



VALID THROUGH JUNE 30, 2013  
ORIGINAL CERTIFICATE/LICENSE NO. 2004035839  
MICHAEL ROGERS

State of Missouri

Department of Insurance, Financial Institutions and Professional Registration  
Division of Professional Registration  
Committee for Professional Counselors  
Licensed Professional Counselor



VALID THROUGH JUNE 30, 2013  
ORIGINAL CERTIFICATE/LICENSE NO. 2004035839

MICHAEL ROGERS

*Eric Fush*

EXECUTIVE DIRECTOR

*John A. ...*

DIVISION DIRECTOR

# LISA ANNE ROGERS

## EDUCATION

### **Bachelor of Science, Psychology**

Minor: Child and Family Development  
Missouri State University, Springfield, MO  
May 2010

### **Associate's of Arts**

Ozarks Technical Community College, Springfield, MO  
2007

## PROFESSIONAL SKILLS

- Leadership
- Teaching/instructing/training individuals
- Problem identification and resolution
- Organizing
- Attention to detail
- Effective listening
- Ability to multi-task

## RELEVANT EXPERIENCE

Higher Ground Recovery Center; Springfield, MO

2/2005 to present

### **Associate Director**

- Overseeing operations
- Developing structural organization
- Organizing programs, events, and projects
- Preparing written communications
- Develop programs for people and families of substance abuse
- Coordinate and train volunteers and staff
- Access to Recovery (ATR) recovery coordinator and ATR secretary of board.
- Director of children's program

### **Substance Abuse Counselor**

- Teach addiction, group, and children's classes
- Conduct Individual and group counseling
- Complete assessments
- Create treatment plans, progress notes, and discharges
- Communicate with court system

Ark of the Ozarks; Springfield, MO

5/2006 to 8/2006

### **Special Needs Summer Counselor**

- Assisted special needs children in field trip activities
- Interacted appropriately to help with mental development
- Provided development of independent living skills
- Provided a fun and safe environment.

Amazing Grace Daycare/Preschool; Springfield, MO

8/2001 to 8/2004

**Preschool teacher**

- Taught preschool children (ages 2-6) age appropriate lessons
- Planned and organized activities and lesson plans
- Taught chapel every week (for 25-35 children)
- Developed and coordinated Christmas program for three years

**PROFESSIONAL TRAINING**

- CRADC— MO Department of Mental Health Certification
- 30 credit hour certificate of completion for leadership training at Elim Bible Institute
- Three week practicum in New York City assisting homeless shelters, domestic violence shelters, substance abuse rehabs, food kitchens and pantries
- 40 hour intense training through Missouri Department of Mental Health learning how to deliver services to the alcohol and drug addicted population
- Two week intense training at Arc of the Ozarks developing skills in working with special needs populations
- 40 hour intensive training at YWCA Flint, Michigan Domestic Violence Center on domestic violence
- 400 hours of weekly supervision by a Licensed Professional Counselor for substance abuse certification

**RELEVANT VOLUNTEER EXPERIENCE**

Family Violence Center; Springfield, MO

5/2009 to 8/2009

**Family Advocate/Office Assistant**

- Worked in hot line and administration office
- Shadowed caseworkers and observed classes
- Assisted in court advocacy
- Assisted with child functions and in childcare
- Figured monthly stats for MSADSV (Missouri Coalitions Against Domestic and Sexual Violence) and entered data into tracking system

Praise Assembly; Springfield, MO

2/2001 to 8/2003

**Abortion Recovery Workshop Developer and Facilitator**

- Facilitated a nine week abortion recovery workshop
- Trained new facilitators
- Developed the workshop at other organizations
- Coordinated community Outreach

No. 5916

**Missouri Substance Abuse Professional Credentialing Board**

Hereby Certifies that

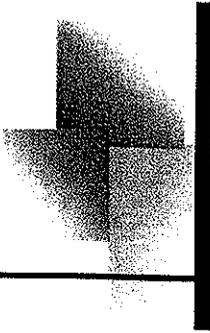
***Lisa A. Rogers***

Continues to meet the standards and qualifications of a  
Certified Reciprocal Alcohol Drug Counselor  
as determined by the Board.

A handwritten signature in cursive, appearing to read "Cliff", is written over a horizontal line. To the right of the signature, the word "COUNSELOR" is faintly visible.

President

Expiration Date: 10/31/2015



This Certificate verifies that

---

Lisa Rogers

completed the

**Clinical Supervision: Building Chemical  
Dependency Counselor Skills Training**

on March 22-23, 2012 and is awarded

21 contact hours through the MSAPCB



Cert. #1072

Scott Breedlove, MS, MRSS, MARS

---

MSAPCB Administrator

**Missouri State University**

*upon the nomination of the faculty and by the authority of the Board of Governors has conferred upon*

**Liza A. Rogers**

*the degree of*

**Bachelor of Science  
Psychology**

Given under the Seal of the University at Springfield, in the State of Missouri, on the seventeenth day of December, in the year Two Thousand and Ten.



*Elyiel H. Bullman*  
Chair, Board of Governors

*James E. Coffey*  
President of the University

# Glenn Bible Institute

Lima, New York

Founded 1924



*This certifies that*

*Lisa A. Rogers*

*has given evidence of Christian growth and knowledge of our Lord  
and Savior Jesus Christ and has successfully completed the program*

*Church Leadership Studies*

*and is therefore entitled to this*

*Certificate of Completion*

*April 27, 2001*

*M. J. J. J. J.*  
*Academic Dean*

*[Signature]*  
*President.*

"Go ye into all the world, and preach the Gospel to every creature."  
(Mark 16:15)



# Certificate of Ordination

This is to Certify that

*Lisa A. Rogers*

having given evidence of a divine gift and call to the ministry  
of the Gospel of Christ and a consecration to the said call  
according to the Word of God, was

Ordained by the  
Elim Fellowship of Lima, New York

on the 29th day of September, 2013 to

Preach the Word,

administer the Christian ordinances, solemnize matrimony and  
feed the flock of God, and is so recognized by the said body as long as  
conduct and teaching are consistent with the Gospel of Christ.



President Ronald V. Burgio

General Secretary Christopher Ball

This certificate is valid only when accompanied by a dated Fellowship card

# Briana Harless

## Objective

*To work with individuals struggling with poverty and addiction. To help these individuals gain skills necessary to become productive citizens.*

## Education and Certifications

- Certified Reciprocal Advanced Alcohol and Drug Counselor
- Certified Wellness Coach
- M.A. Counseling Evangel University (Assemblies of God Theological Seminary)
- B.A. Counseling Central Bible College
- A.A. Global Missions Central Bible College

## Work History

- Higher Ground Recovery Center.....2011-Present
  - Qualified Substance Abuse Professional
- Victory Trade School.....2010- 2012
  - Student Life Instructor
- Springfield Storage .....2009- Present
  - Site Manager
- Bass Pro Sportsman Distributing Center..... 2006-2008
  - Picker/Packer/Stocker
- Clare Assembly of God..... 2005-2006
  - Youth Secretary
- State of Michigan Respite/ Maureen Wargo..... 2005-2006
  - Caregiver for autistic children
- Y.E.S. Coalition .....2004-2006
  - Youth Mentor

## Personal Skills and Experience

- Work with youth as youth leader, counselor and director
- Event and fundraiser coordination as youth secretary
- Experience mentoring, teaching and promoting abstinence from sex, drugs, and alcohol in a public school setting
- Work advertising and monitoring curriculum with Alcoholics for Christ ministry
- Volunteer at Teen Challenge International USA office mainly with promotions.
- General case management experience with students at Victory Trade School
- Volunteer coordination: interviewing, assigning and assisting volunteers
- Experience with Microsoft Office and Macintosh iWork programs
- Teaching experience
- Experience in management and supervision
- Skilled in organization

## References Available Upon Request

No. 6658

**Missouri Substance Abuse Professional Credentialing Board**

Hereby Certifies that

***Briana L. Harless***

has met the standards and qualifications required of a  
Certified Reciprocal Advanced Alcohol Drug Counselor  
as determined by the Credentialing Board.



President

Expiration Date: **October 31, 2014**

# Assemblies of God Theological Seminary



*Upon the recommendation of the Faculty of the Assemblies of God  
Theological Seminary, and by the authority of the Board of Directors,  
and in the exercise of powers granted by the State of Missouri,*

*We hereby confer on*

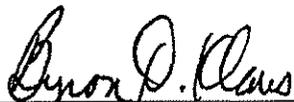
**BRIANA LYNN HARLESS**

*the degree of*

**MASTER OF ARTS IN COUNSELING**

*with all the honors, rights, and privileges to that degree appertaining.  
In testimony whereof the seal of the Seminary and the signatures of the  
duly authorized officers are hereunto affixed at Springfield, Missouri,*

*this twenty-sixth day of April, 2013.*

  
\_\_\_\_\_  
President

  
\_\_\_\_\_  
Chairman of the Board of Directors

  
\_\_\_\_\_  
Academic Dean

# CERTIFICATE OF COMPLETION

This is to certify that

**BRIANA HARLESS**

Has successfully completed the 24-hour:

“Wellness Coaching: Train the Trainer”

Training Dates:

March 11-13, 2014

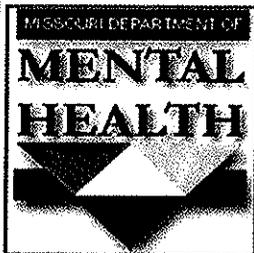
*Jara Crawford*

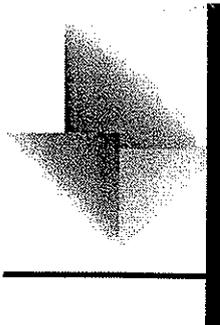
*L. N. MA*

Trainer

Trainer

Missouri Department of Mental Health  
*Training approved by MSAPCB*





This Certificate verifies that

---

**Bri Harless**

completed the

**Clinical Supervision Training**

on July 8, 2013 and is awarded

30 contact hours through the MSAPCB



**Cert. #1161**

Scott Breedlove, MS, MRSS-P, MARS

---

MSAPCB Administrator

# Assemblies of God Theological Seminary



Upon the recommendation of the Faculty of the Assemblies of God  
Theological Seminary, and by the authority of the Board of Directors,  
and in the exercise of powers granted by the State of Missouri,  
We hereby confer on

**BRIANA LYNN HARLESS**

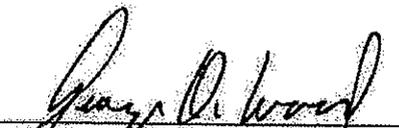
the degree of

**MASTER OF ARTS IN COUNSELING**

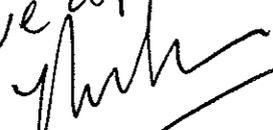
with all the honors, rights, and privileges to that degree appertaining.  
In testimony whereof the seal of the Seminary and the signatures of the  
duly authorized officers are hereunto affixed at Springfield, Missouri,

this twenty-sixth day of April, 2013.

  
Byron D. Claus  
President

  
Gary D. Wood  
Chairman of the Board of Directors

  
Academic Dean

*True copy of original*  


# MEGAN KNIGHT

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## OBJECTIVE:

To utilize my education and experience in the counseling field while growing professionally and providing quality substance abuse treatment to those seeking recovery

## EDUCATION AND CREDENTIALS:

**MA Counseling, December 2013**  
Assemblies of God Theological Seminary, Springfield MO

**BA Counseling, December 2010**  
Central Bible College, Springfield, MO

**Clinical Supervision Training, September 2013**  
MSAPCB, certificate #1174

**CADC, Issued February 2013**  
MSAPCB, license #7064

## WORK EXPERIENCE:

**Substance Abuse Counselor** **Dates:** Nov. 2012 - Present  
**Higher Ground Recovery Center** **Supervisor:** Michael Rogers  
Conduct assessments to determine eligibility for Access to Recovery grant funding and to determine the appropriate level of treatment for each individual, treatment planning and review, provide group and individual counseling, supervise and oversee the training of interns and counselors-in-training

**Caseworker** **Dates:** Jul. 2011 - Nov. 2012  
**Burrell Behavioral Health** **Supervisor:** Susan Mayes  
Work closely with individuals with severe mental illness to assist them with developing coping and problem solving skills which allow them to function more independently in the community, prepare DMH standard treatment plans, complete progress notes and quarterly reviews

**Teacher (Volunteer)** **Dates:** Apr. 2010 - Present  
**Victory Trade School/Victory House** **Supervisor:** Becca Brotherton  
Preparation of a syllabus, selection of a text book, lesson planning, assigning and grading work, writing tests and quizzing, lecturing on pertinent class material, have taught in the areas of codependency and communications

**Life Manager (Intern)** **Dates:** Aug. 2010 - Dec. 2010  
**Victory House** **Supervisor:** Becca Brotherton  
Worked as a member of the support team in a residential facility for women, met weekly with each resident to discuss progress and future planning

Employer Name: CHILDREN'S DIVISION STATE OF MISSOURI

---

Employer Address: 149 Park Central Square  
Springfield, MO 65806

Employer Country: USA

Business Type: Department of Social Services

Supervisor's Name: Lisa Crawford

Supervisor's Title: Social Service Program Manager

Supervisor Phone: 417-895-7855

Contact Supervisor? Yes

Circuit Manager: Heather Ford

Employed from: May 2007 to May 2012

Reason for Leaving: Resigned, to move closer to family

Duties: Alternative Care work in Children's Division within the Department of Social Services the application of direct social work methods with or, on behalf of children and families in instances of abuse, neglect, or exploitation.

Type of Work: BSW CSW II in Alternative Care Unit

Employer Name: PARTNERS IN YOUR COMMUNITY

---

Employer Address: 118 N. Main St.  
Eldorado Springs, MO 64744

Employer Country: USA

Business Type: Independent Living

Supervisor's Name: Julie McCullick

Supervisor's Title: Manager

Supervisor Phone: 417-876-5500

Contact Supervisor? Yes

Job Title: Client Worker

Employed from: November 2005 to June 2006

Reason for Leaving: Dismissed due to medication errors

Duties: Assisted individuals so they may live independently in their home.

Employer Name: DUNBROOKE

---

Employer Address: 1306 Industrial Parkway East  
Eldorado Springs, MO 64744

Employer Country: USA

Business Type: Garment Warehouse

Supervisor's Name: Monte Lauderdale

Supervisor's Title: Warehouse Manager

Supervisor Phone: 417-876-0119

Contact Supervisor? Yes

Job Title: Shipping Inspector

Employed from: August 1998 to December 2000

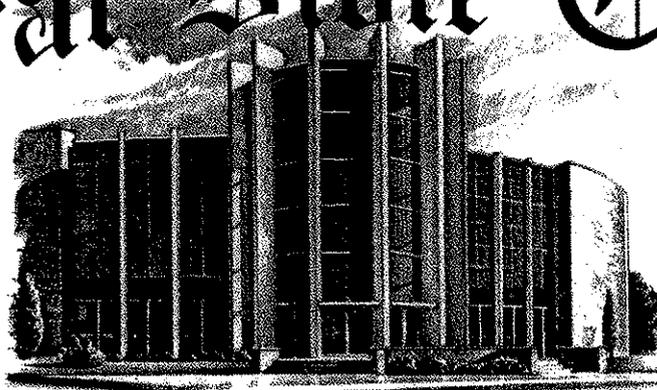
Hours per Week: 40

Last Monthly Salary: 1240.00

Reason for Leaving: Resigned

Duties: Checked shipping orders for accuracy

# Central Bible College



The Board of Directors of Central Bible College by virtue of the authority vested in it by the law of the State of Missouri, and upon recommendation of the Faculty does hereby confer on

Megan Erin Knight

who has satisfactorily completed the studies prescribed therefore the degree of

Bachelor of Arts

Cum Laude

with all the rights, privileges, and honors thereunto appertaining.

Given at Springfield, Missouri, this month of December, 2010.

President

Secretary, Board of Directors



Vice President for Academic Affairs

Registrar and Director of Student Records

No. 7064

Missouri Substance Abuse Professional Credentialing Board

Hereby Certifies that

***Megan E. Knight***

has met the standards and qualifications required of a  
Certified Alcohol Drug Counselor  
as determined by the Credentialing Board.



President

Expiration Date: **October 31, 2014**

Above is a 5x7 mini certificate to be displayed with your large certificate. This mini certificate indicates your renewal/expiration date. This certificate will be replaced after each renewal.

No. 7064

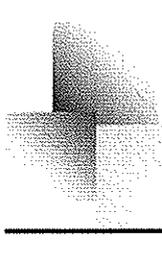
Missouri Substance Abuse Professional Credentialing Board

Hereby certifies that

***Megan E. Knight***

has met all the standards and qualifications  
required of a alcohol and drug counselor as  
determined by the Credentialing Board and is  
hereby conferred the title of  
Certified Alcohol Drug Counselor  
Awarded on February 16, 2013

Chf Johnson  
President  
Alicia Ozenberger  
Secretary



*This certificate verifies*

**Megan Knight**

**Certificate # 1174**

Completed the  
**Clinical Supervision Training**  
On September 27, 2013 and is awarded  
30 contact hours through the MSAPCB



*Harcy Langenslober*

MSAPCB Director

## Resume

### APPLICANT INFORMATION

Name: SNARE. JIMMIE. G.

### VETERANS PREFERENCE INFORMATION:

Service Number:  
Grade:  
Branch of Service: Missouri Army National Guard  
Term of Enlistment: 6 years  
Date of Discharge: 06/03/1999  
Date of Enlistment: 04/03/1979  
Length of Service: 20 Years 2 Months 0 Days  
Highest Rank Held: Staff Sergeant, E-6 Platoon Sergeant  
Type of Discharge: Honorable  
Permanently Disabled: No

### WORK HISTORY INFORMATION:

Employer Name: HIGHER GROUND RECOVERY CENTER  
Employer Address: 2032 E. Kearney Street, Ste. 214  
Springfield, MO 65803  
Employer Country: USA  
Business Type: Intensive Outpatient Alcohol and Drug Abuse Recovery Center  
Supervisor's Name: Michael Rogers  
Supervisor's Title: President/CEO, Higher Ground Recovery Center LPC, CRAADC, MRSS  
Supervisor's Phone: 417-869-0700  
Contact Supervisor? Yes  
Employed From: November 2012 to Present  
Hours per week: 40  
Last Monthly Salary: 1920.00  
Duties: Counsel individuals with alcohol and drug addiction to become drug-free and become responsible, productive members of society.  
Type of Work: Recognized Associate Substance Abuse Counselor II

---

Employer Name: Camp Clark Training Site  
Employer Address: RT K Hwy  
Nevada MO 64711  
Employer Country: USA  
Business Type: Military Training Site  
Supervisor's Name: Terry Hahnfeld  
Supervisor's Title: Staff Sergeant  
Supervisor Phone: 417-667-2357  
Contact Supervisor? Yes  
Job Title: Security Supervisor  
Employed from: May 1986 to June 1997  
Hours per Week: 40  
Last Monthly Salary: 1300.00  
Reason for Leaving: Resigned, Personal Reasons  
Duties: Supervised 24/7, 365 Days a year Post Security  
# of employees: 4

EDUCATION:

High School: Holden High School  
Location: Holden MO 64040  
Graduation Date: 1978  
Diploma: Yes

COLLEGE INFORMATION:

College Name: Missouri State University  
Location: Springfield MO  
Degree Type: Bachelor of Science  
Major: Social Work  
Minor: Psychology  
Degree Date: May 2007  
Credit hours earned 125  
Type of Credit Hours: Semester hours

INTERNSHIP INFORMATION:

Type of Training: Vocational  
Type of Facility: Missouri State University  
Location: Springfield MO  
Area of Training: Missouri State University  
Certificate Type: Bachelor of Social Work  
Date Received: May 2007  
Credit Hours Earned: 125  
Type of Credit Hours: Semester Hours  
Type of Training: Military  
Area of Training: Primary Leadership and Development School  
Non-Commissioned Officer's School  
Military Police School  
Platoon Sergeant Construction Supervisor's School

No. 7240

# Missouri Substance Abuse Professional Credentialing Board

Hereby recognizes that

*Jimmie G. Snare*

has met all the standards and qualifications required of an  
associate substance abuse counselor as determined by the  
Credentialing Board and is hereby conferred the title of

***Recognized Associate Substance Abuse Counselor II***

**Awarded on February 15, 2013**



*Cliff Johnson* *MSACCB*  
\_\_\_\_\_  
President

*Alicia Orenberg* *MSACCB*  
\_\_\_\_\_  
Secretary

# Missouri State University

*upon the nomination of the faculty and by the authority of the Board of Governors has conferred upon*

Jimmie G. Snare

*the degree of*

Bachelor of Social Work

Given under the Seal of the University at Springfield, in the State of Missouri, on the eighteenth day of May, in the year Two Thousand and seven.



*Michael Sparks*  
President, Board of Governors

*W. S. F. Jones*  
President of the University

COURSE	TITLE	CR	GR	PT	LV	CM	C	COURSE	TITLE	CR	GR	PT	LV	CM	C
TR 2002	CROWDER COLLEGE MO							FALL 2006	SENIOR						
	15 UG HOURS ACCEPTED IN TRANSFER							SWK 420	SWK PRAC/GRP & FAM	3	A	12			
TR 2003	CROWDER COLLEGE MO							PSY 331	PSY OF CHILDHOOD	3	B	9			
	29 UG HOURS ACCEPTED IN TRANSFER							GER 310	SOCL FORCES & AGNG	3	N	0			
TR 2004	CROWDER COLLEGE MO							PSY 497	CULTURAL PSY	3	B	9			
	17 UG HOURS ACCEPTED IN TRANSFER							SEM TOTALS:	ATT 9 PAS 9 PTS 30 GPA 3.33						
FALL 2004	JUNIOR							UG MSU CUM:	ATT 60 PAS 61 PTS 171 GPA 2.85						
SWK 212	INTRO TO SOCL WORK	3	C	6				UG COMBINED	PAS 125						
PSY 304	ABNORMAL PSYCH	3	D	3											
SWK 222	HUM BEHAV/SOC ENVI	3	C	6											
SWK 205	INTERVIEWING SKILL	3	C	6											
SWK 300	SRVC LRNG SOC WRK	1	P	0	SL										
	ACADEMIC STATUS: PROBATION (P)														
	SEM TOTALS:	ATT 12 PAS 13 PTS 21 GPA 1.75													
	UG MSU CUM:	ATT 12 PAS 13 PTS 21 GPA 1.75													
	UG COMBINED:	PAS 74													

TR 2005	CROWDER COLLEGE MO	3 UG HOURS ACCEPTED IN TRANSFER	SPRING 2005	JUNIOR	ATT	PAS	PTS	GPA	MSU:	TRN:	CMB:	ATT	PAS	PTS	GPA
SWK 219	HUMAN DIVERSITY	3	A	12	63	73	180	2.86	0	0	0	0	0	0	0.00
PSY 200	PSY STAT METHODS	3	D	3	64	64	206	3.22	0	0	0	0	0	0	0.00
JEP 397	PUBLIC AFFRS ISSUES	3	A	12	127	137	386	3.04	0	0	0	0	0	0	0.00
SWK 330	SUBST ABUSE INTERV	3	B	9											
	ACADEMIC STATUS: REMOVED FROM PROBATION (R)														
	SEM TOTALS:	ATT 12 PAS 12 PTS 36 GPA 3.00													
	JG MSU CUM:	ATT 24 PAS 25 PTS 57 GPA 2.38													
	JG COMBINED:	PAS 86													

UNDERGRADUATE GRADUATE  
 ATT PAS PTS GPA ATT PAS PTS GPA  
 MSU: 63 73 180 2.86 MSU: 0 0 0 0.00  
 TRN: 64 64 206 3.22 TRN: 0 0 0 0.00  
 CMB: 127 137 386 3.04 CMB: 0 0 0 0.00  
 DEGREE: BACHELOR OF SOCIAL WORK  
 DATE: MAY 18, 2007  
 ACCREDITED: COUNCIL ON SOCIAL WORK  
 EDUCATION  
 MINOR: PSYCHOLOGY  
 \*\* END OF RECORD \*\*

FALL 2005	SENIOR	ATT	PAS	PTS	GPA
SWK 305	SWK PRACT W INDIVI	3	B	9	
SWK 308	SOCIAL JUSTICE	3	B	9	
SWK 310	CHILDREN RIGHTS	3	B	9	
SWK 318	METH SOC RES/PRACT	3	C	6	
SWK 309	SOC WELF POL/SERVS	3	B	9	
GEN 042	42 HOUR CORE MET	0		0	
	SEM TOTALS:	ATT 15 PAS 15 PTS 42 GPA 2.80			
	JG MSU CUM:	ATT 39 PAS 40 PTS 99 GPA 2.54			
	JG COMBINED:	PAS 104			

SPRING 2006 SENIOR  
 SWK 322 HUM BEH/SOC ENV II 3 B 9  
 SWK 409 SOC WEL POL/SER II 3 A 12  
 SWK 420 SWK PRAC/GRP & FAM 3 D 3 R  
 SWK 430 SWK/COMMON/ORGANIZ 3 A 12  
 SWK 370 CHILD WELFARE SERV 3 B 9  
 SEM TOTALS: ATT 15 PAS 15 PTS 45 GPA 3.00  
 JG MSU CUM: ATT 54 PAS 55 PTS 144 GPA 2.67  
 JG COMBINED: PAS 119

\*\* CONTINUED \*\*

OFFICIAL SIGNATURE IS WHITE WITH A MAROON BACKGROUND

Missouri State University  
 Official Record

DATE ISSUED: 06/06/2007  
 TRANSCRIPT PREPARED FOR:

RAISED SEAL NOT REQUIRED



Nicole G. Rovig, Acting Registrar

SPO7TRB

The name of the university is printed in white across the face of the transcript. The word COPY appears when photocopied. Copies and transcripts marked "issued to student" should not be accepted as official.

# Timothy Reid Horn



## Top 5 Strengths

Ideation

Achiever

Relator

Connectedness

Responsibility

## Education

Sullivan High School- Sullivan, IN

May 2005

- Graduated

Central Bible College- Springfield, MO

May 2010

- BA in Counseling Psychology
- Associates in Pastoral Ministries

Evangel University- Springfield, MO

Pres.

- Masters in Counseling Psychology

## Experience

Higher Ground Recovery Center

2013-Pres.

- RASAC II, Counselor in Training
  - Provide group and individual counseling, case management, and recovery supports for individuals experiencing problems with substance abuse.

North Point Church Internship, Springfield, MO

2009-2010

- Intern with Brian Frizzell, MA, MS, LPC
  - Consult with various people in person (one on one & group) & via telephone
  - Assist in developing and operating NPCU, classes devoted to spiritual, intellectual, personal growth.
  - Organize individual and group counseling sessions
  - Research

North Point Church Care Team Assistant Coordinator, Springfield, MO

2010- Pres.

- Internship Responsibilities
- Organize & Lead Pastoral Assistance Team
  - \* Pastoral Assistance Team is the go to team for any pastoral needs, prayer, counseling needs, benevolence, etc during the services.
- Co-Teach NPCU classes

Christian Counseling Services, Springfield, MO

2010- Pres.

- Owner & Operator Brian Frizzell, MA, MS, LPC
  - Organize Counseling Groups
  - Co-lead Men's Group
  - Handle Intake Forms of Counselees
  - Prepare, distribute, grade various assessments
  - Research & Develop Tools

## PERSONAL & MINISTRY REFERENCES

Brian Frizzell, MA, MS, LPC

Counselor/ Author  
Christian Counseling Services  
(417) 881-9800

Mike Ennis

Founder/ President  
Impact Resources & Development  
(417) 861-1252

No. 7500

**Missouri Substance Abuse Professional Credentialing Board**

Hereby Certifies that

***Timothy R. Horn***

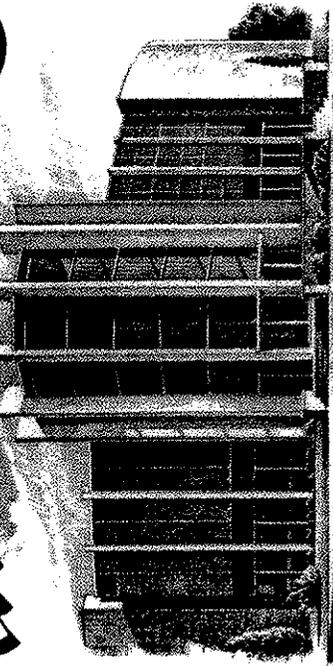
has met the standards and qualifications of a  
Recognized Associate Substance Abuse Counselor II  
as determined by the Board.

A handwritten signature in black ink, appearing to read "Cliff Horn", is written over a horizontal line. To the right of the signature, the letters "CRADC" are written in a smaller, less legible script.

President

Expiration Date 10/31/2014

# Central Bible College



The Board of Directors of Central Bible College by virtue of the authority vested in it by the laws of the State of Missouri, and upon recommendation of the Faculty does hereby confer on

**Timothy Reid Horn**

who has satisfactorily completed the studies prescribed therefore the degree of

**Bachelor of Arts**

with all the rights, privileges, and honors thereunto appertaining.

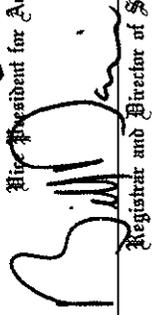
Given at Springfield, Missouri, this month of December, 2010.

  
\_\_\_\_\_  
President

  
\_\_\_\_\_  
Secretary, Board of Directors



  
\_\_\_\_\_  
Vice President for Academic Affairs

  
\_\_\_\_\_  
Registrar and Director of Student Records

**EXHIBIT C**

**AFFIDAVIT OF WORK AUTHORIZATION**

Comes now Michael Rogers as President first being duly sworn on my oath  
(NAME) (OFFICE HELD)  
 affirm Higher Ground Recovery Center is enrolled and will continue to participate in a federal work  
(COMPANY NAME)  
 authorization program in respect to employees that will work in connection with the contracted services  
 related to OSCA 14-042 for the duration of the contract, if awarded, in accordance with  
(RFP NUMBER)  
 RSMo Chapter 285.530 (2). I also affirm that Higher Ground Recovery Center does not and will not knowingly  
(COMPANY NAME)  
 employ a person who is an unauthorized alien in connection with the contracted services related to  
OSCA 14-042 for the duration of the contract, if awarded.  
(RFP NUMBER)

*In Affirmation/thereof/ the facts stated above are true and correct (The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 285.530, RSMo).*

*[Signature]*  
 Signature (person with authority)

Michael Rogers  
 Printed Name

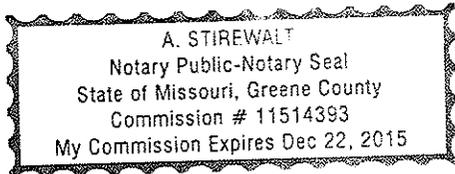
President/Executive Director  
 Title

March 13, 2014  
 Date

Subscribed and sworn to before me this 13<sup>th</sup> of March 2014. I am  
(DAY) (MONTH, YEAR)  
 commissioned as a notary public within the County of Greene State of  
(NAME OF COUNTY)  
Missouri, and my commission expires on 12/22/15.  
(NAME OF STATE) (DATE)

*[Signature]*  
 Signature of Notary

3/13/14  
 Date



Company ID Number: 624478

**THE E-VERIFY PROGRAM FOR EMPLOYMENT VERIFICATION  
MEMORANDUM OF UNDERSTANDING**

**ARTICLE I**

**PURPOSE AND AUTHORITY**

This Memorandum of Understanding (MOU) sets forth the points of agreement between the Department of Homeland Security (DHS) and Higher Ground Recovery Center (Employer) regarding the Employer's participation in the Employment Eligibility Verification Program (E-Verify). This MOU explains certain features of the E-Verify program and enumerates specific responsibilities of DHS, the Social Security Administration (SSA), and the Employer. E-Verify is a program that electronically confirms an employee's eligibility to work in the United States after completion of the Employment Eligibility Verification Form (Form I-9). For covered government contractors, E-Verify is used to verify the employment eligibility of all newly hired employees and all existing employees assigned to Federal contracts or to verify the entire workforce if the contractor so chooses.

Authority for the E-Verify program is found in Title IV, Subtitle A, of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), Pub. L. 104-208, 110 Stat. 3009, as amended (8 U.S.C. § 1324a note). Authority for use of the E-Verify program by Federal contractors and subcontractors covered by the terms of Subpart 22.18, "Employment Eligibility Verification", of the Federal Acquisition Regulation (FAR) (hereinafter referred to in this MOU as a "Federal contractor with the FAR E-Verify clause") to verify the employment eligibility of certain employees working on Federal contracts is also found in Subpart 22.18 and in Executive Order 12989, as amended.

**ARTICLE II**

**FUNCTIONS TO BE PERFORMED**

**A. RESPONSIBILITIES OF SSA**

1. SSA agrees to provide the Employer with available information that allows the Employer to confirm the accuracy of Social Security Numbers provided by all employees verified under this MOU and the employment authorization of U.S. citizens.
2. SSA agrees to provide to the Employer appropriate assistance with operational problems that may arise during the Employer's participation in the E-Verify program. SSA agrees to provide the Employer with names, titles, addresses, and telephone numbers of SSA representatives to be contacted during the E-Verify process.
3. SSA agrees to safeguard the information provided by the Employer through the E-Verify program procedures, and to limit access to such information, as is appropriate by law, to individuals responsible for the verification of Social Security Numbers and for evaluation of the E-Verify program or such other persons or entities who may be authorized by SSA as governed



Company ID Number: 624478

To be accepted as a participant in E-Verify, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify at 888-464-4218.

Employer: Higher Ground Recovery Center	
<b>Michael Rogers</b>	
Name (Please Type or Print)	Title
<i>Electronically Signed</i>	12/13/2012
Signature	Date
<i>[Handwritten Signature]</i>	12/13/2012
Department of Homeland Security - Verification Division	
<b>USCIS Verification Division</b>	
Name (Please Type or Print)	Title
<i>Electronically Signed</i>	12/13/2012
Signature	Date

Information Required for the E-Verify Program

Information relating to your Company:

Company Name	Higher Ground Recovery Center
Company Facility Address	2032 E Kearney
	Suite 214
	Springfield, MO 65803
Company Alternate Address	
County or Parish	GREENE
Employer Identification Number	461275370

**EXHIBIT D**

**MISCELLANEOUS INFORMATION**

**Outside United States**

If any products and/or services bid are being manufactured or performed at sites outside the continental United States, the bidder **MUST** disclose such fact and provide details in the space below or on an attached page.

Are products and/or services being manufactured or performed at sites outside the continental United States?	Yes <u>    </u>	No <u>  X  </u>
Describe and provide details:		

**DESCRIPTION OF PROGRAM/SERVICES  
(Exhibit D)**

Program/Service	Description of Service
Certified Level 2 Intensive Outpatient Rehabilitation	<p>The Higher Ground Recovery Program is individualized, providing up to twelve hours of clinical service a week which may include individual counseling, group education, group counseling, family counseling, and co-dependency counseling. All services are facilitated from a Biblical perspective. Consumers are clearly informed prior to admission that our outpatient substance abuse program is Biblically based and church affiliated. Written consent to engage in faith-based treatment and recovery supports is signed at intake. Consumers are encouraged to develop support through a local church and the 12-step community.</p>
Assessment	<p>For billing purposes the assessment includes an initial screening, assessment, and intake.</p> <p>Screening: Each individual referred for services shall have prompt access to a screening in order to determine eligibility and to plan an initial course of action, including referral to other services and resources, as needed.</p> <p>At the individual's first contact with Higher Ground Recovery Center (whether by telephone or face-to-face contact), any emergency or urgent service needs shall be identified and addressed by staff trained to conduct initial screening.</p> <p>The Screening:</p> <ol style="list-style-type: none"> <li>1. Shall be conducted by trained staff.</li> <li>2. Shall be responsive to the individual's request and needs.</li> <li>3. Shall include notice to the individual regarding service eligibility and an initial course of action. If indicated, the individual shall be linked to other appropriate services and resources in the community.</li> <li>4. Shall include basic information about the individual's presenting situation and symptoms, presence of factors related to harm or safety, and demographic and other identifying data.</li> </ol> <p>Assessment: A comprehensive assessment using the ASI (Addiction Severity Index) shall be completed by a DMH designated Qualified Substance Abuse Professional (QSAP). The QSAP shall assist in ensuring an appropriate level of care, identifying necessary services and developing an individualized treatment plan. The assessment data shall subsequently be used in determining progress and outcomes.</p> <p>Within the first three (3) outpatient services, each consumer shall participate in an assessment that more fully identifies his or her needs and goals which shall be addressed in an individualized plan. The participation of family and other collateral parties (e.g., referral source, employer, school, other community agencies) in assessment and individualized plan development</p>

**DESCRIPTION OF PROGRAM/SERVICES  
(Exhibit D)**

	<p>shall be encouraged as appropriate to the validity of the assessment.</p> <p>Documentation of the screening and assessment must include, but is not limited to, the following:</p> <ol style="list-style-type: none"> <li>1. Demographic and identifying information.</li> <li>2. Statement of needs, goals, and treatment expectations from the individual requesting services. The family's perceptions are also obtained, when appropriate and available.</li> <li>3. Presenting situation/problem and referral source.</li> <li>4. History of previous psychiatric and/or substance abuse treatment including number and type of admissions.</li> <li>5. Health screening (see Medical Evaluation – Non Emergency in Forms section)</li> <li>6. Current medications (see Medication Checklist in Forms sections) and identification of any medication allergies and adverse reactions.</li> <li>7. Recent alcohol and drug use for at least the past thirty (30)-days and, when indicated, a substance use history that includes duration, patterns, and consequences of use.</li> <li>8. Current psychiatric symptoms.</li> <li>9. Family, social, legal, and vocational/educational status and functioning. The collection and assessment of historical data is also required.</li> <li>10. Current use of resources and services from other community agencies.</li> <li>11. Personal and social resources and strengths, including the availability and use of family, social, peer and other natural supports.</li> <li>12. Either a diagnostic impression by a DMH defined <i>qualified diagnostician</i>, in accordance with the current edition of the Diagnostic and Statistical Manual of the American Psychiatric Association, or, if conducted by QSAP, a statement of problem or need.</li> </ol>
<p>Assessment Update</p>	<p>For consumers previously enrolled in a DMH program having an ASI completed in CIMOR within the last six months, an ASI update may be utilized if clinically appropriate to do so. The ASI update is a review of the original ASI with updates to the severity ratings and a new clinicians report. The severity ratings will guide the development of the treatment plan and service options.</p>
<p>Individual Counseling</p>	<p>Individual counseling is a structured, goal-oriented therapeutic process in which an individual interacts on a face-to-face basis with a counselor in accordance with the individual's treatment plan in order to resolve problems related to substance abuse that interfere with the person's functioning.</p> <p>Key service functions of individual counseling may include, but are not limited to:</p>

**DESCRIPTION OF PROGRAM/SERVICES  
(Exhibit D)**

	<ol style="list-style-type: none"> <li>1. Exploration of an identified problem and its impact on functioning;</li> <li>2. Examination of attitudes, feelings, and behaviors that promote recovery and improved functioning;</li> <li>3. Identification and consideration of alternatives and structured problem-solving;</li> <li>4. Decision making; and</li> <li>5. Application of information presented to the individual's life situation in order to promote recovery and improved functioning.</li> </ol> <p>Individual counseling shall only be performed by a QSAP, a RASAC I or II, or an intern/practicum student as described in 9 CSR 10-7.110(5).</p>
<p>Individual Counseling (Co-Occurring Disorder)</p>	<p>Individual co-occurring counseling is a structured, goal-oriented therapeutic process in which the consumer interacts on a face-to-face basis with a counselor in accordance with the consumer's treatment plan in order to assist the consumer in managing substance use and medication challenges, depression, emotional trauma, bipolar disorder, anxiety and mood disorders.</p> <p>Key service functions of individual counseling may include, but are not limited to:</p> <ol style="list-style-type: none"> <li>1. Exploration of an identified problem(s) and there impact on functioning;</li> <li>2. Examination of the correlation between mental health disorders and substance use.</li> <li>3. Staged interventions that begin with engaging the consumer; persuading him or her to become involved in recovery-focused activities; acquiring skills and support to control the illnesses; and then helping the consumer with relapse prevention.</li> <li>4. Motivational interventions to help the consumer become committed to self-management of their illnesses.</li> <li>5. Promoting an understanding of the long-term nature of recovery.</li> <li>6. Utilizes a Motivational Interviewing approach.</li> </ol> <p>Individual co-occurring counseling shall be provided by a licensed mental health professional who is a QSAP with specialized co-occurring training and/or equivalent work experience.</p>
<p>Individual Counseling (Trauma Related)</p>	<p>Individual trauma counseling is a structured, goal-oriented therapeutic process in which the consumer interacts on a face-to-face basis with a counselor in accordance with the consumer's treatment plan in order to assist the consumer in managing substance use an symptoms related to trauma.</p> <p>Key service functions of individual counseling may include, but are not limited to:</p>

**DESCRIPTION OF PROGRAM/SERVICES  
(Exhibit D)**

	<ol style="list-style-type: none"> <li>7. Exploration of the trauma(s) and there impact on functioning;</li> <li>8. Examination of the correlation between trauma and substance use.</li> <li>9. Staged interventions that begin with engaging the consumer; persuading him or her to become involved in recovery-focused activities; acquiring skills and support to help manage symptoms of trauma and substance use; and then helping the consumer with relapse prevention.</li> <li>10. Motivational interventions to help the consumer become committed to self-management of their illnesses.</li> <li>11. Promoting an understanding of the long-term nature of recovery.</li> <li>12. Utilizes a Motivational Interviewing approach.</li> </ol> <p>Individual trauma counseling shall be provided by a licensed mental health professional who is a QSAP with specialized trauma training and/or equivalent work experience.</p>
<p>Relapse Prevention Counseling</p>	<p>Relapse prevention counseling is a structured, goal-oriented therapeutic process in which the consumer interacts on a face-to-face basis with a counselor in accordance with the consumer’s treatment plan in order to assist the consumer in identifying and managing relapse warning signs, urges to use, relapse triggers and cues, and high risk situations.</p> <p>Key service functions of relapse counseling may include, but are not limited to:</p> <ol style="list-style-type: none"> <li>1. Exploration of past relapse patterns and warning signs;</li> <li>2. Examination and identification of the causes of relapse and assisting the consumer in developing an individualized relapse prevention plan;</li> <li>3. Staged interventions that begin with engaging the consumer; persuading him or her to become involved in or increase recovery-focused activities; and, acquiring skills and support to help manage temptations to use.</li> </ol>
<p>Case Management</p>	<p>Case management consists of specific activities with or on behalf of a particular consumer in accordance with an individual treatment plan to maximize the consumer’s adjustment and functioning within the community while achieving sobriety and sustaining recovery, maximizing the involvement of natural support systems, and promoting consumer independence and responsibility.</p> <p>Key service functions of community support include:</p> <ol style="list-style-type: none"> <li>1. Participating in the interdisciplinary team meeting in order to identify strengths and needs related to development of the individual’s treatment plan;</li> <li>2. Attending periodic meetings with designated team members and the consumer, whenever feasible, in order to review and update the</li> </ol>

**DESCRIPTION OF PROGRAM/SERVICES  
(Exhibit D)**

	<p>treatment plan;</p> <ol style="list-style-type: none"> <li>3. Contacting consumers who have unexcused absence from the program in order to re-engage the consumer and promote recovery efforts;</li> <li>4. Arranging and referring for services and resources and, when necessary, advocating to obtain the services and quality of services to which the person is entitled;</li> <li>5. Monitoring service delivery by providers external to the program and ensuring communication and coordination of services;</li> <li>6. Locating and coordinating services and resources to resolve a crisis;</li> <li>7. Providing experiential training in life skills and resource acquisition;</li> <li>8. Providing information and education to an individual in accordance with the person's treatment plan; and</li> <li>9. Planning for discharge.</li> </ol>
<p>Codependency Individual Counseling</p>	<p>Individual codependency counseling is a planned, face-to-face, goal-oriented therapeutic interaction with an individual to address dysfunctional behaviors and life patterns associated with being a member of a family in which an individual has a substance abuse problem and is currently participating in treatment while in Drug Court.</p> <p>Codependency counseling shall be provided only to a person who is a member of a consumer's family.</p> <p>Key service functions may include, but are not limited to:</p> <ol style="list-style-type: none"> <li>1. Exploration of the substance abuse problem and its impact on family functioning;</li> <li>2. Development of coping skills and self-responsibility for changing dysfunctional patterns of relationships;</li> <li>3. Examination of attitudes and feelings and long-term consequences of living with a person with a substance abuse problem;</li> <li>4. Identification and consideration of alternatives and structured problem-solving;</li> <li>5. Productive and functional decision making; and</li> <li>6. Generalization of newly learned information and behavior to other life situations in order to promote improved family or personal functioning.</li> </ol> <p>The usual and customary size of group codependency counseling sessions shall not exceed twelve (12) family members in order to promote participation, disclosure and feedback.</p> <ol style="list-style-type: none"> <li>1. In no event shall the size of a group codependency counseling session that includes only family members exceed an average of twelve (12) persons per calendar month.</li> </ol>

**DESCRIPTION OF PROGRAM/SERVICES  
(Exhibit D)**

	<ol style="list-style-type: none"> <li>2. The program may structure some sessions to include both family members and primary consumers up to a maximum of twenty (20) persons.</li> <li>3. Primary consumers participating in such sessions shall be considered, for funding purposes, to have received either day treatment or group counseling, depending on the consumer's level of care.</li> </ol> <p>Individual and group codependency counseling shall be provided by a person who meets requirements as a Family Therapist; or Qualified Substance Abuse Professional with training in family recovery.</p>
<p>Codependency Group Counseling</p>	<p>Codependency counseling is a planned, face-to-face, goal-oriented therapeutic interaction with a group to address dysfunctional behaviors and life patterns associated with being a member of a family in which an individual has a substance abuse problem and is currently participating in treatment in Drug Court.</p> <ol style="list-style-type: none"> <li>1. Codependency counseling shall be provided only to a group of persons who are members of a current consumer's family</li> <li>2. Key service functions may include, but are not limited to:             <ol style="list-style-type: none"> <li>a. Exploration of the substance abuse problem and its impact on family functioning;</li> <li>b. Development of coping skills and self-responsibility for changing dysfunctional patterns of relationships;</li> <li>c. Examination of attitudes and feelings and long-term consequences of living with a person with a substance abuse problem;</li> <li>d. Identification and consideration of alternatives and structured problem-solving;</li> <li>e. Productive and functional decision making; and</li> <li>f. Generalization of newly learned information and behavior to other life situations in order to promote improved family or personal functioning.</li> </ol> </li> <li>3. The usual and customary size of group codependency counseling sessions shall not exceed twelve (12) family members in order to promote participation, disclosure and feedback. The program may structure some sessions to include both family members and primary consumers up to a maximum of twenty (20) persons.</li> </ol> <p>Group codependency counseling shall be provided by a person who meets requirements as a Family Therapist; Qualified Substance Abuse Professional with training in family recovery.</p>

**DESCRIPTION OF PROGRAM/SERVICES**  
**(Exhibit D)**

Family Counseling	<p>13. Family counseling is a planned, face-to-face, goal-oriented therapeutic interaction with a qualified staff member in accordance with an individual treatment plan. The purpose of Family Counseling is to address and resolve problems in family interaction related to the consumer's substance abuse and recovery. A significant other is defined as a spouse, parent, live-in partner, or child of the consumer.</p> <p>14.</p> <p>15. One (1) or more family members must be present at all family therapy sessions. In any calendar month, for fifty percent (50%) of a consumer's family therapy, the primary consumer</p> <p>16. must be present, in addition to one (1) or more members of the consumer's family.</p> <p>17.</p> <p>18. Family members below the age of twelve (12) may be counted as one (1) of the required family members when the child can be shown to have the requisite social and verbal skills to participate in and benefit from the service.</p> <p>19. Documentation of family therapy shall identify the family member(s) present and their relationship to the consumer.</p> <p>20.</p> <p>21. Key service functions of family therapy may include, but are not limited to:</p> <p>22.</p> <p>23. Utilization of generally accepted principles of family therapy to influence family interaction patterns;</p> <p>24. Examination of family interaction styles and identifying patterns of dysfunctional behavior;</p> <p>25. Development of a need or motivation for change in family members;</p> <p>26. Development and application of skills and strategies for improvement in family functioning; and</p> <p>27. Generalization and stabilization of change to promote healthy family interaction independent of formal helping systems.</p> <p>28.</p> <p>29. Family therapy shall be performed by a person who:</p> <p>30.</p> <p>31. Is licensed in Missouri as a Marital and Family Therapist; or</p> <p>32. Is certified by the American Association of Marriage and Family Therapists; or</p> <p>33. Has a doctoral degree or master's degree in psychology, social work or counseling and has at least one (1) year of supervised experience in family counseling and has specialized training in family counseling; or</p> <p>34. Has a doctoral degree or master's degree in psychology, social work or counseling and receives close supervision from an individual who meets the requirements of paragraph 1., 2., or 3., or</p> <p>35. is a degreed, qualified substance abuse professional who receives</p>
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**DESCRIPTION OF PROGRAM/SERVICES  
(Exhibit D)**

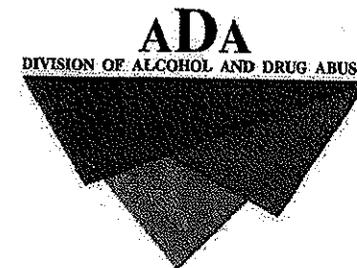
	<p>close supervision from an individual who meets the requirements of paragraph 1., 2., or 3.</p>
<p>Group Counseling</p>	<p>Group counseling is face-to-face, goal-oriented therapeutic interaction among a counselor and two (2) or more clients as specified in individual treatment plans designed to promote client’s functioning and recovery through personal disclosure and interpersonal interaction among group members.</p> <p>Group Counseling consists of face to face interaction in a group of two consumers or more. The purpose of group counseling is to assist the consumer in developing a sense of community, gain insight into personal behaviors and life experiences, provide and receive effective feedback between peers, and to discuss issues as related to the individual’s recovery.</p> <p>Key service functions of group counseling may include, but are not limited to:</p> <ol style="list-style-type: none"> <li>1. Facilitating individual disclosure of issues which permits generalization of the issue to the larger group;</li> <li>2. Promoting positive help-seeking and supportive behaviors;</li> <li>3. Encouraging and modeling productive and positive interpersonal communication; and</li> <li>4. Developing motivation and action by group members through peer pressure, structured confrontation and constructive feedback.</li> </ol> <p>The usual and customary size of group counseling sessions shall not exceed twelve (12) clients in order to promote client participation, disclosure and feedback. In no event shall the size of group counseling sessions exceed an average of twelve (12) clients per calendar month.</p> <p>Group counseling services shall be provided by a qualified substance abuse professional, a counselor in training, or an intern/practicum student as described in 9 CSR 10-7.110(5). See job descriptions in personnel manual for QSAP and CIT eligibility requirements.</p>
<p>Group Education</p>	<p>Group education consists of the presentation of general information and application of the information to participants through group discussion in accordance with individualized treatment plans which are designed to assist the consumer in understanding the disease of addiction, recovery tools, physical recovery including nutrition, exercise, recreation, self-care issues, living skills such as setting goals, budgeting, educational and employment issues, and communication skills, personal living skills such as community resource awareness, problems solving, stress reduction, decision making,</p>

**DESCRIPTION OF PROGRAM/SERVICES  
(Exhibit D)**

	<p>emotion management, and relationship issues.</p> <p>Key service functions of group education may include, but are not limited to:</p> <ol style="list-style-type: none"> <li>1. Classroom style didactic lecture to present information about a topic and its relationship to substance abuse;</li> <li>2. Presentation of audiovisual materials which are educational in nature with required follow-up discussion;</li> <li>3. Promotion of discussion and questions about the topic presented to the individuals in attendance; and</li> <li>4. Generalization of the information and demonstration of its relevance to recovery and enhanced functioning.</li> </ol> <p>Group education services shall be provided by an individual who:</p> <ol style="list-style-type: none"> <li>1. Is suited by education, background or experience to teach the information being presented;</li> <li>2. Demonstrates competency and skill in educational techniques;</li> <li>3. Has knowledge of the topic(s) being taught; and</li> <li>4. Is present with consumers throughout the group education session.</li> </ol>
<p>Group Education (Trauma Related)</p>	<p>Group Trauma Education consists of the presentation of information specific to common traumas and the correlation of trauma to substance use. Topics will be presented through group discussion in accordance with individualized treatment plans which are designed to assist the consumer in understanding the symptoms of trauma, the correlation between trauma and substance use, and managing</p> <p>Key service functions of group education may include, but are not limited to:</p> <ol style="list-style-type: none"> <li>5. Classroom style didactic lecture to present information about trauma and its relationship to substance abuse;</li> <li>6. Presentation of audiovisual materials which are educational in nature with required follow-up discussion;</li> <li>7. Promotion of discussion and questions about the topic presented to the consumers in attendance; and</li> <li>8. Generalization of the information and demonstration of its relevance to recovery and enhanced functioning.</li> </ol> <p>Group education services shall be provided by an individual who:</p> <ol style="list-style-type: none"> <li>5. Is suited by education, background or experience to teach the information being presented;</li> <li>6. Demonstrates competency and skill in educational techniques;</li> <li>7. Has knowledge of the topic(s) being taught; and</li> </ol> <p>Is present with consumers throughout the group education session.</p>

**DESCRIPTION OF PROGRAM/SERVICES  
(Exhibit D)**

Treatment Court Day	Treatment Court Day consists of one or more clinicians (as needed per caseload in agreement with the drug court administrator) participation at pre-court staffings and treatment court hearings in the courthouse to discuss attendance and progress reports with the drug court team, to consult with the team about sanctions and rewards, and to represent the treatment program during court proceedings. Transportation to and from the court is not included as part of this service.
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*Having demonstrated compliance with certification standards  
for organizations providing substance abuse treatment,*

## Higher Ground Recovery Center

*is fully certified by*

The Department of Mental Health  
Division of Alcohol and Drug Abuse

*to provide the following services:*

Outpatient:  
Intensive Outpatient Rehabilitation  
Supported Recovery

1429

Certificate Number

December 17, 2012—January 31, 2015

Date



  
Deputy Director

# *Recovery Support Services Credentialed Status*

*Issued to*

## ***HIGHER GROUND RECOVERY CENTER***

*November 6, 2011—September 29, 2014*



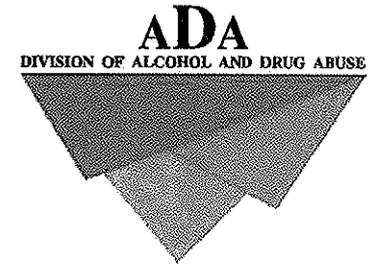
**ACCESS TO  
RECOVERY**

*Missouri Access to Recovery III: Recovery Systems*

A handwritten signature in black ink, appearing to read "Mark Shields", written over a horizontal line.

MARK SHIELDS, ATR PROJECT DIRECTOR  
DIVISION OF ALCOHOL AND DRUG ABUSE

*Credential #102*



*Having demonstrated compliance with certification standards  
for organizations providing substance abuse treatment,*

## Higher Ground Recovery Center

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**Outpatient:  
Intensive Outpatient Rehabilitation  
Supported Recovery**



1429

Certificate Number

December 17, 2012—January 31, 2015

Date

  
Deputy Director

**EXHIBIT E**

Certification Regarding

Debarment, Suspension, Ineligibility and Voluntary Exclusion

Instructions for Certification

1. By signing and submitting this proposal, the prospective recipient of Federal assistance funds is providing the certification as set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective recipient of Federal assistance funds knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the Department of Labor (DOL) may pursue available remedies, including suspension and/or debarment.
3. The prospective recipient of Federal assistance funds shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective recipient of Federal assistance funds learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective recipient of Federal assistance funds agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the DOL.
6. The prospective recipient of Federal assistance funds further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may but is not required to check the List of Parties Excluded from Procurement or Nonprocurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the DOL may pursue available remedies, including suspension and/or debarment.

Certification Regarding

Debarment, Suspension, Ineligibility and Voluntary Exclusion

Lower Tier Covered Transactions

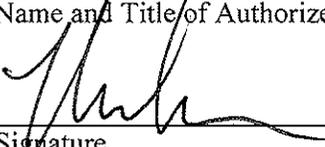
This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 29 CFR Part 98 Section 98.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988, Federal Register (pages 19160-19211).

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS FOR CERTIFICATION)

- (1) The prospective recipient of Federal assistance funds certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective recipient of Federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Michael Rogers, President

\_\_\_\_\_  
Name and Title of Authorized Representative

  
\_\_\_\_\_  
Signature

03/14/2014  
\_\_\_\_\_  
Date