



COUNTY OF LOS ANGELES

Public Health



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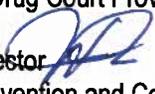
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April 23, 2012

SAPC BULLETIN NO. #12-02

TO: Executive Directors
Family Dependency Drug Court Providers

FROM: John Viernes, Jr., Director 
Substance Abuse Prevention and Control

SUBJECT: PROGRESS REPORT FORMAT FOR FAMILY DEPENDENCY DRUG COURT

The purpose of this bulletin is to provide you with the progress report form to be used by all Family Dependency Drug Court (FDDC) treatment providers when submitting reports to the Edmund D. Edelman Children's Court. The purpose of the form is to set uniform standards and streamline the client information reported to all FDDC courtrooms.

Substance Abuse Prevention and Control (SAPC) established this form based on feedback from the FDDC treatment provider network and the Edmund D. Edelman Children's Court staff. Effective the date of this bulletin, all FDDC treatment providers are required to utilize the uniform progress report format providing information on the client's progress from the last court appearance.

If you have any questions or need additional information, please contact your assigned Contract Program Auditor or the SAPC Helpline at (888) 742-7900, Monday to Friday, from 8:00 a.m. to 5:00 p.m.

JV:vs
P:/Assign11-12/FDDC/Bulletin

Attachment

COUNTY OF LOS ANGELES-DEPARTMENT OF PUBLIC HEALTH
 SUBSTANCE ABUSE PREVENTION AND CONTROL
 FAMILY DEPENDENCY DRUG COURT PROGRAM

CLIENT PROGRESS REPORT

Agency: Choose an item.

Date: Click here to enter a date.

I. Client Information

Name: (Last, First) Click here to enter text.		Case Number: Click here to enter text.
Court Location (Division/Department) Click here to enter text.	Court Date: Click here to enter text.	Current Reporting Period: Click here to enter text.

II. Case Information

Treatment Start Date: Click here to enter text.	Estimated Treatment End Date: Click here to enter text.	Current treatment modality: Click here to enter text.
DCFS Worker: Click here to enter text.		Date Progress Report sent to worker: (prior to court date) Click here to enter a date.

III. Drug Test Results since Last Court Date

Last Drug Test Date: Click here to enter text.	Current Results				
	Negative	Positive	No-Show	Refused	Total
	0	0	0	0	0
Positive test Information (include date, time, drug tested positive) Click here to enter text.					

IV. Meeting/Group information since Last Court Date

Meeting Type	Current Reporting Period		
	Required	Attended	Missed
Parenting Education	0	0	0
Relapse Prevention	0	0	0
Domestic Violence	0	0	0
Anger Management	0	0	0
Life Skills	0	0	0
Drug Education	0	0	0
NA/AA	0	0	0
HIV Awareness	0	0	0
Dual Diagnosis	0	0	0
Individual Sessions	0	0	0
Other:	0	0	0
Other:	0	0	0

V. Provider Comments

Click here to enter text.

Report Completed by: _____

Date: _____