Attachment 14: Counseling Observation Protocol  
  
Linking to Employment Activities Pre-Release (LEAP) Evaluation

Site Visit Protocols

December 11, 2015

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protocol for observation of LEAP Counseling session

In addition to interviewing grantee, jail, and partner administrators, researchers will observe either (1) participation in a LEAP workshop, or (2) a LEAP case management session. The case management session could take place in the jail-AJC or the community-AJC, depending on the preference of the grantee. Only the first hour of the counseling session should be observed if time permits.

**Date: \_\_\_\_\_\_\_\_ Site Visitors: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Case Manager Leading Session:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Initial Plan for Counseling Session (according to case manager—for example, general counseling, job search assistance, interest or skills assessment, placement assistance):**

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**Physical Setting for the Meeting (type of space, supervision if in the jail, privacy from other participants, comfort, etc.):**

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Is the setting appropriate for the nature of the service (sufficient privacy, etc.)? Y/N   
Why/why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Describe what Occurs During the Meeting.**

As you do, keep in mind the following questions (these questions will be in the write-up):

Are any assessments discussed? Which ones? How are results presented/used?

Is there any discussion of an individual development plan (IDP)? Is the discussion about creating or modifying one?

What services are discussed (for example, labor market information, computer skills, resume help, interviewing skills, job search assistance, assistance getting an ID, registration with employment database, job readiness or soft skills training, remediation and GED prep, vocational training)?

Are referrals to other One-Stop partner or community programs made? To which programs? How much assistance is provided with the referral (for example, is the participant simply given a name and address, OR does the counselor set up an appointment for the participant with the referral agency?)

Are supportive services discussed (for example, housing, transportation, child care, mental health, substance abuse treatment, health care, work supports, public assistance)? Which types? Are these direct services offered through LEAP or referrals to other programs/services? Are funding amounts or other types of limits to service availability discussed?

Does the counselor appear prepared for the meeting? Does he or she have relevant documents and case files at hand? Is the counselor familiar with the participant’s background?

Assess the extent of the relationship between the participant and the counselor. How comfortable with each other do they seem? Does the participant appear to trust the counselor?

Does the participant appear satisfied with the meeting? Does the participant seem to need or want additional assistance that is not being provided?

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**Length of the Meeting Observed?** \_\_\_\_\_\_\_\_\_minutes

Did the meeting continue after the observation ended? Y/N

What next steps were suggested to occur after the meeting (if full meeting observed)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did they schedule another day or time to meet again? Y/N

If yes, how long until the next meeting? days