

REQUEST FOR APPLICATIONS

For

Child-Parent Psychotherapy

Learning Collaborative for Louisiana Medicaid Behavioral Health Agencies



ChildParent
Psychotherapy

Issued by

LSUHSC Center for Evidence to Practice



Application Release Date: Monday, June 23, 2025

APPLICATIONS MUST BE RECEIVED BY WEDNESDAY, AUGUST 6, 2025

All applicants will be notified by Wednesday, August 13, 2025

Please direct questions to the Center for Evidence to Practice at
EvidencetoPractice@lsuhsc.edu

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1. TRAINING OVERVIEW

A. INTRODUCTION

The Center for Evidence to Practice (Center for E2P) has written this Request for Application (RFA) in order to identify behavioral health practitioners in Louisiana who are equipped to successfully participate in ***Child-Parent Psychotherapy*** training and implementation.

CPP has been selected by the Office of Behavioral Health (OBH) as an evidence-based program that will be expanded statewide. OBH has published a Medicaid service definition for CPP (pg. 403-411) in their [LA Medicaid Behavioral Health Services Provider Manual](#), which demonstrates their support of this EBP model.

Through this Request for Applications (RFA), the Center for E2P along with Drs. Amy Dickson and Julie Larrieu, look forward to identifying a strong cohort to participate in this training and learning collaborative opportunity.

The **goal of this RFA** is to help providers determine if this EBP is a good fit for their clinicians, organization, and the youth, families, and adults they serve. It should also help providers determine if they are able to commit to the expectations of participating in this training opportunity and of delivering the EBP. The application requests information about the providers' qualifications, the services they provide to Louisiana Medicaid-insured children and families, and their readiness to participate in the training and to deliver the EBP. Drs. Amy Dickson, Julie Larrieu, and the Center for E2P staff will be reviewing applications based on the ***Application and Selection Process (Section 3) to select providers that are best able to take advantage of this training opportunity and to sustain delivery of the EBP.***

B. INFORMATION ABOUT THE LOUISIANA CENTER FOR EVIDENCE TO PRACTICE

The Center for E2P is a partnership between the Louisiana Department of Health – Office of Behavioral Health and the Louisiana State University, Health Sciences Center – School of Public Health, which is tasked with improving access to evidence-based behavioral health practices for Louisianan children and families insured by Medicaid. Our mission is to support the state and its agencies, organizations, communities, and providers in selecting and implementing evidence-based interventions to promote youth and family well-being, improve behavioral health outcomes, and address challenges related to sustaining quality practice. For more information on the E2P please visit our [website](#) and [subscribe](#) to our newsletter for updates.

C. CONTINUING EDUCATION CREDITS

The Center has been authorized as a social work continuing education (CE) pre-approval organization through the Louisiana State Board of Social Work Examiners (LABSWE). Additionally, the National Board for Certified Counselors (NBCC) approved the Center to become an NBCC Approved Continuing Education Provider (ACEP). Pending completion of training, complying with [Center Training Guidelines & Expectations](#), meeting the required amount of training minutes, and completing the end-of-training evaluation, participants should receive a CE certificate for their participation in this training opportunity. The Center encourages participants who are not licensed social workers or licensed professional counselors to submit their certificates to their respective licensing board upon renewal for CE credit.

D. TRAINING COMMITMENT EXPECTATIONS AND FORM

Dedication and commitment to this training is the utmost importance to participating in this training opportunity. *These trainings are typically very costly and would be a significant financial investment for practitioners if they were to participate on their own, however, if an agency/practitioner is chosen for this opportunity, it is provided at no cost to them. With that in mind, for each entity that is chosen for this training opportunity, we emphasize the necessity of completing all the training components as intended.* Should an entity drop out of this opportunity, it can impact their selection in a future training opportunity offered through E2P.

All chosen applicants are required to commit to participating in the training in its entirety. Upon selection, all applicants will be required to complete a **TRAINING COMMITMENT** between the applicant and E2P. *As this is a free, state-funded training, all participants must demonstrate their commitment to participate in ALL training days and to actively use the training approach with clients.*

Additionally, each individual trainee, upon completion of all training requirements, must aspire to completing all the components necessary to **become rostered in CPP**. The trainers and E2P staff and will assist in ensuring you are aware of the expectations to qualify for the [national roster](#) and be successful in completing this process.

E. TRAINING COSTS

There will be no cost to agencies for the course itself; however, agencies must financially commit to the time and effort required to complete the training and the delivery of the EBP. Agencies and clinicians must set aside the allotted training time to fully participate in this training opportunity, including any expectations outside of training (e.g. reading materials, completing web-based training, changing operations to accommodate delivery of the EBP). *This means that agencies and clinicians must set aside the allotted seven (7) training days and weekly consultation/supervision calls for 18 months to fully participate in this training opportunity.* For in-person training, the provider is responsible for covering the cost of travel and travel time. Training manuals will be provided by the Center for E2P.

2. SCOPE OF WORK

A. INFORMATION ABOUT CHILD-PARENT PSYCHOTHERAPY

(Source: [LA Medicaid Provider Manual](#))

Child-Parent Psychotherapy (CPP) is an evidence-based intervention model for children aged 0-5 who have experienced at least one traumatic event and/or are experiencing mental health, attachment, and/or behavioral problems, including posttraumatic stress disorder. The treatment is based in attachment theory but also integrates psychodynamic, developmental, trauma, social learning, and cognitive behavioral theories. Therapeutic sessions include the child and parent or primary caregiver. The primary goal of CPP is to support and strengthen the relationship between a child and his or her caregiver as a vehicle for restoring the child's cognitive, behavioral, and social functioning. Treatment also focuses on contextual factors that may affect the caregiver-child relationship. The relationship between the caregiver and child is the focus of the treatment, thus this is a dyadic treatment model.

B. TRAINING PROGRAM INTRODUCTION

The goal of this training and implementation program is for participating Medicaid agencies to successfully implement CPP into their agency and community. A Child-Parent Psychotherapy Learning Collaborative (CPP LC) is an 18-month training that is intensive enough to allow most practitioners to adopt CPP. The LC model was adapted from the National Child Traumatic Stress Network Learning Collaborative model. It is [one of three implementation-level training models we offer in CPP](#).

This approach systematically addresses both organizational- and clinical-level factors that are believed to influence uptake of an innovation within an organization. LCs typically include multiple organizations; each organization is encouraged to send clinicians, supervisors, and senior leaders to training sessions, which occur over the course of eighteen months and occur through a mix of face-to-face training and consultation calls. Defining features of the LC approach include:

- 1) targeting multiple levels within an organization (clinicians, supervisors, senior leaders) by structuring information for specific roles
- 2) encouraging shared learning across participants
- 3) organizing teams within each organization to make process improvements at the organizational and clinical levels

Trainings are designed for teams of licensed mental health professionals rather than for individuals and are typically organized in collaboration with large systems or agencies. If a member of your team is unlicensed, a licensed supervisor who oversees their work must participate in training for the duration of the training. Only unlicensed clinicians who are in the process of working toward licensure may participate in CPP training. They will not be eligible for the CPP roster until they become licensed.

The goal of this training and implementation program is for participating Medicaid agencies to successfully implement CPP into their agency and community. Providers should be able to demonstrate the capacity to identify and engage appropriate children and families for CPP, deliver the model to fidelity, and sustain the model long-term.

E2P expects all selected practitioners, supervisors, and administrators to complete all required responsibilities over the duration of the training. Once training is complete, clinicians will be expected to apply to be rostered as Child-Parent Psychotherapy clinicians.

C. TRAINING APPROACH

CPP Agency Administrative Requirements:

Senior Leader Administrators must be able to:

- Provide oversight of day-to-day activities of core team members (i.e., the clinical supervisor(s) and clinicians participating in trainings), including ensuring fidelity measures are completed
- Participate in all required CPP training components; this includes attending at least the first day of the face-to-face training; participating in all 3 days of the first Learning Session is preferable. Attending Learning Sessions 2 and 3 is recommended but not required
- Participate in one-hour monthly meeting with your agency team to assess progress and identify any concerns or needs. Inform CPP Trainers of any concerns, needs, or issues

Clinical Supervisor who holds a master's or doctoral degree who will:

- Provide clinical CPP supervision at least twice a month to CPP clinicians participating in the training
- Receive CPP training in full with participating CPP clinicians, including attending all days of the 3 face-to-face Learning Sessions
- Participate in Learning Collaborative Consultation Calls twice per month with your clinicians in their call groups
- Participate in a one-hour call with the CPP trainer once a month to discuss issues unique to supervision of CPP
- Engage in CPP treatment with at least 2 cases over the course of the Learning Collaborative
- Participate in one-hour monthly meeting with your agency team and Senior Leader to discuss progress and any concerns or needs
- Complete all fidelity measures and monitor the completion of fidelity measures of your CPP clinicians

3-5 Clinicians who hold a master's or doctoral degree who will:

- Receive CPP training in full, including attending all days of the 3 face-to-face Learning Sessions
- Participate in Learning Collaborative Consultation Calls twice per month
- Engage in CPP treatment with at least 4 cases over the course of the Learning Collaborative
- Participate in clinical CPP supervision at least twice a month with your CPP supervisor
- Participate in one-hour monthly meeting with your agency team and Senior Leader to discuss progress and any concerns or needs
- Complete all fidelity measures required of the CPP training team

Training Phases:

Upon being accepted to this CPP Learning Collaborative cohort, your agency will enter a phase in which you will be expected to prepare for your participation in the training. The trainers will host a kick-off call for all accepted agencies, in which they will provide more information on the training and answer any questions or concerns you may have. Additionally, there will be the opportunity to schedule consultation calls to have one-on-one support for training preparation.

Throughout the course of the training and implementation, teams will participate in three sessions of face-to-face trainings, also known as Learning Sessions. During each Learning Session, participants engage in a variety of activities targeting agency teams as well as individual affiliate tracks (senior leader, supervisor, and clinician). Goals of the learning sessions include:

- 1) providing exposure and skill practice related to the intervention
- 2) supporting teams in engaging with one another to build a collaborative network
- 3) supporting understanding of the training and implementation methodology (such as focusing on local expertise and embedding practices).

The learning session days and times are listed below:

Learning Session 1: October 6-8, 2025 from 8:30AM-5:00PM CDT

Learning Session 2: April 9-10, 2026 from 8:30AM-5:00PM CDT

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Learning Session 3: October 7-8, 2026 from 8:30AM-5:00PM CDT

The tracking of change is an integral part of CPP, as well as essential to understanding what is working well within the training and implementation. The E2P and CPP trainers will collaborate with selected agencies to develop an outcomes monitoring plan. Support will be provided in the development of the operational procedures for collecting and regularly reporting/reviewing data with E2P and CPP trainers. Monitoring requirements will be discussed during training.

The training will unfold as follows

Events	Date
RFA Opens	Monday, June 23, 2025
APPLICATION DEADLINE	WEDNESDAY, AUGUST 6, 2025
Notification of Application Status	Wednesday, August 13, 2025
Training Commitment Due	Wednesday, August 27, 2025
Textbook Request Form Due	Wednesday, August 27, 2025
Leadership Meeting #1	Monday, September 8, 2025 from 12pm-1pm CDT
MANDATORY Pre-Work Meeting	Monday, September 15, 2025 from 11am-1pm CDT
Learning Session 1	October 6-8, 2025 from 8:30am-5pm CDT
LS1 CE Eval Due	October 15, 2025
Leadership Meeting #2	Monday, January 12, 2026 from 12pm-1pm CST
Learning Session 2	April 9-10, 2026 from 8:30am-5:00pm CDT
LS2 CE Eval Due	April 17, 2026
Leadership Meeting #3	Monday, May 11, 2026 from 12pm-1pm CDT
Leadership Meeting #4	Monday, September 14, 2026 from 12pm-1pm CDT
Learning Session 3	October 7-8, 2026 from 8:30am-5:00pm CDT
LS3 CE Eval Due	October 15, 2026
Leadership Meeting #5	Monday, January 11, 2027 from 12pm-1pm CST
Consultation Call Commitment (Finalized during CPP LS1 Training)	Attend bi-weekly 1-hour consultation calls for 18 months

CE Eligibility: *The total amount of hours for the CPP training will be approximately **59.5 hours** and participants will be eligible to receive up to **51.0 of CE clock hours** if they participate in all training components and meet the online training requirements.*

D. CPP INFORMATIONAL WEBINAR

The Center for Evidence to Practice previously hosted a Child-Parent Psychotherapy (CPP) Informational Webinar in 2023. At this webinar, attendees had the opportunity to meet the trainer, learn about the basics of the modality, and get an overview of the application process. This webinar was recorded and posted as a free course on our online learning platform, [E2P:Learn](#). If you plan on applying to the upcoming CPP training, it is **highly** recommended that you take the free course to learn more about the model and training requirements. You can sign up for a free account here:

<https://learn.laevidencetopractice.com/registration/ebp-registration/>.

If you already have an account, you can self-enroll in the free course here:

<https://learn.laevidencetopractice.com/courses/introduction-to-child-parent-psychotherapy-cpp-2/>

E. CPP AGENCY LEADERSHIP MEETING

In addition to the informational webinars, E2P has also begun incorporating Agency Leadership Meetings for all new training opportunities to help maintain sustained practice and fidelity with the model after the completion of training. All agencies who are accepted into this training will be expected to have leadership representation at the scheduled leadership meeting opportunities. The first of these meetings will be held on **Monday, September 8, 2025 from 12pm-1pm CDT**. At these meetings, we will discuss EBP implementation best practices for agencies to consider as they support their trainees in the model.

Agencies that are accepted into this training opportunity should plan to have agency leadership present at this meeting. This can include but is not limited to: clinic directors, clinic supervisors, and clinic managers, etc.

F. SUSTAINED PRACTICE

Following the completion of the full course and implementation program, agencies will be expected to independently sustain CPP, including facilitating ongoing referrals and engagement, maintaining a caseload, and ensuring supportive supervision, leadership, and policy. **Having an agency's leadership (e.g., CEO, supervisors, and other decision-makers) directly involved in the implementation of an EBP is key to its long-term success.** Strategies of engaged leadership include being knowledgeable about CPP and directly involved in:

- 1) supporting clinicians and supervisors in maintaining fidelity to CPP,
- 2) recruiting staff to participate in learning and using the EBP,
- 3) integrating the EBP into the culture of the agency, and
- 4) demonstrating a commitment to the EBP through follow-through with the implementation plan.

In addition, each agency should also consider how their policies might support or conflict with EBP practice and identify ways to integrate CPP into their policies and procedures.

Examples may include:

- Considering an applicant's knowledge of (or openness to) EBPs in hiring decisions and integrating information about CPP into new employee orientations
- Setting participation in EBP supervision as a regular requirement
- Creating processes to track fidelity and measures in electronic medical records
- Integrating CPP into clinical documentation
- Recognizing EBP clinicians formally in performance reviews and merit raises and informally in newsletters, websites etc.

G. CONSULTATION CALLS

Agency teams participate in weekly consultation/supervision calls for the 18-month-long training. Participation in consultation calls is mandatory in an effort towards becoming CPP rostered.

3. APPLICATION AND SELECTION PROCESS

A. ELIGIBILITY REQUIREMENTS AND EXPECTATIONS

Selection will be based on an organization's readiness for CPP implementation, acceptance of Medicaid-insured families, and relevance of CPP to the population served by the applicant organization.

Preference will be given to organizations with multiple practitioners applying to be trained and demonstrated organizational leadership support for CPP, in recognition of the long training process CPP entails and necessity of inter-practitioner support. Organizations must also demonstrate understanding of the necessary changes to practitioner caseload in order for a trainee to include CPP in their schedule. ***Additionally, we highly encourage participation from supervisors and administrators as their understanding and support of the model contributes to long-term sustainability.***

Training Acceptance Criteria: Qualified behavioral health agencies/providers will be those who serve: Medicaid-insured individuals and/or provide clinical therapy services to children and their caregivers in Louisiana free of charge; are licensed (or actively working towards licensure); and are actively (currently) treating children and their caregivers.

Additionally, only complete applications will be considered, and all should include the individual [Trainee Application](#) AND the signed [Agency Agreement](#).

All behavioral health agencies selected to participate in the CPP training will be expected to complete all training components to achieve CPP Rostered status. Upon selection, all agencies will be requested to sign a [Training Commitment](#) between the agency and E2P. As this is a free, state-funded training, all agencies must demonstrate their commitment to the training and sustaining implementation of CPP.

B. APPLICATION REVIEW PROCESS

Upon receiving all the training applicants, an initial review of the applicants that meet the threshold requirements outlined in the **Eligibility Requirements** section will be executed. Following that initial review, the E2P staff will meet with the trainers and review the applicants based on their individual trainee application and agency agreement responses.

C. APPLICATION MATERIALS

The CPP training is scheduled to begin in **October 2025** with the CPP Training team, Drs. Julie Larrieu and Amy Dickson. **This CPP Learning Collaborative is limited to 45 clinicians.**

- 1.) The **TRAINEE APPLICATION** is to be completed by each applicant and can be accessed by filling out the **online application (through REDCap)** by **WEDNESDAY, AUGUST 6, 2025.**
- 2.) The **AGENCY AGREEMENT** must be completed and signed **ELECTRONICALLY** by a supervisor and/or administrator at the agency requesting participation in the training using PDF viewing/filling software (such as Adobe PDF or other similar software). The Agency Agreement **MUST BE SUBMITTED in the REDCap Application by WEDNESDAY, AUGUST 6, 2025.**

BOTH FORMS MUST BE SUBMITTED TO BE CONSIDERED FOR THIS TRAINING OPPORTUNITY

D. APPLICATION CHECKLIST

- Please review the **Request for Applications (RFA) for Child-Parent Psychotherapy (CPP)** to be aware of training requirements and expectations.
- (HIGHLY RECOMMENDED) WATCH THE RECORDING OF THE INFORMATIONAL WEBINAR** so applicants are aware of the training expectations and time commitment. Accessible on our E2P Learn Platform: <https://learn.laevidencetopractice.com/courses/introduction-to-child-parent-psychotherapy-cpp-2/>
- SAVE ALL IMPORTANT TRAINING DATES:** See page 7 of the RFA for the important dates and deadlines.
- Submit a **TRAINEE APPLICATION** on behalf of yourself as an applicant. Acceptance into the program will be evaluated on an individual basis based on the application responses.
- Submit an **AGENCY AGREEMENT** on behalf of your agency. *This step is necessary for those who are sole practitioners as well, please fill it out on behalf of yourself.*

E. NOTIFICATION OF APPLICATION STATUS

Applicants will be notified via email by **AUGUST 13, 2025** regarding their status in the training.

F. NON-DISCRIMINATORY POLICY

The Center for Evidence to Practice appreciates diversity and does not discriminate based on race, national origin, religion, color, ethnicity, age, sex, ability status, sexual orientation, or gender identity

Thank you for your commitment to serving Louisiana's children and families. We look forward to reading your application!