



MECKLENBURG COUNTY

Area Mental Health, Developmental Disabilities and Substance Abuse Services

429 Billingsley Rd., 2nd Floor
Charlotte, NC 28211-1098

PROVIDER HOT SHEET

- ⇒ Mecklenburg County General Manager Michelle Lancaster-Sandlin has discussed the current July 2011 implementation date for the 1915 b/c Medicaid Waiver with the Secretary of the North Carolina DHHS, Lanier Cansler. The date has been revised and the new implementation date is now scheduled for **July 2012**. We will begin the process of adjusting our implementation plan and proceed with the revised date of July 2012 in mind.

Should you have any questions, please forward them on to Jill Scott at Jill.Dineen-Scott@mecklenburgcountync.gov or 704-336-3793. We will keep you posted on any new information as it arises.

- ⇒ **CAP-MR/DD Policy Changes**-The following links serve to revise the implementation of Utilization Review Guidelines posted in IU #76 on July 7, 2010, and the *CAP-MR/DD Policy Requirements: Extension/Exception Request Form* and instructions posted 10/1/10.

Implementation of the CAP-MR/DD Clinical Policy/Manuals and Technical Amendment Number One: Read these documents for additional clarification regarding policy changes within the CAP-MR/DD Clinical Policy, Technical Amendment and Manuals.

[CAP-MR/DD UR Guidelines Extension-Exception Process](#) REVISED (11-1-10)

[CAP-MR/DD Utilization Review Guidelines](#) REVISED (PPT) (11-1-10)

[CAP-MR/DD Policy Requirements Extension/Exception Request Form](#) (Word) (11/1/10)

[CAP-MR/DD UR Guidelines Extension-Exception Process Table](#) REVISED (11/1/10)

- ⇒ **Attn Providers Who Complete LME Admission and Discharge Forms:**

As a reminder the LME Admission and Discharge Form was modified on 7/9/10 to include two new items (25A and 42A) which document consumer attendance in self-help programs. The previous LME Admission and Discharge form is no longer valid for registration purposes. Please be sure your staff is utilizing the correct form located on the division website at:

<http://www.ncdhhs.gov/mhddsas/statspublications/manualsforms/lmeconsumeradmission07-9-10.doc>

Effective November 22, 2010, MeckLINK will not accept the previous LME Admission and Discharge form for registration purposes. If you have any questions, please contact Martha Joslin at 704-432-1978.

- ⇒ **System of Care Open House**

Today is the last day to RSVP for this exciting event. Please join us for a special "Passport to Supports" Open House on November 17th--an educational and experiential journey through our community's System of Care. See first-hand how you play a part in improving the lives of young people and their families.

- ⇒ **New CAP MR/DD policies** contained in Implementation Update #76 will be effective February 1, 2011 unless otherwise noted. Participants, guardians and legally responsible persons will have this time to determine alternate support options to ensure the health and safety needs are adequately addressed. In the event a participant cannot make the transition to the policy changes **by the February 1, 2011 effective date**, DMH/DD/SAS will review the participant's PCP and determine if further time is needed or if other actions are necessary for the participant to safely make the transition.

The process to request an exception or extension for individuals who are unable to make the needed changes as required by February 1, 2011 is as follows:

Mecklenburg Area MH/DD/SA Services
PROVIDER HOT SHEET
November 12, 2010

By December 1, 2010 the case manager must send the LME the request for an extension or exception using the *CAP-MR/DD Policy Requirements Extension/Exception Request Form*. The request shall contain the revised PCP with any documentation and justification as to the specific health and safety issues and reasons why the individual cannot meet the transition requirements. The form is located at <http://www.ncdhhs.gov/mhddsas/cap-mrdd/index.htm>

- LME staff will review the request for an extension or exception, including the revised PCP and discuss with the case manager the specific health and safety issues preventing transition as required by February 1, 2011 and possible alternatives to address the individual's support needs.
- By January 1, 2011 the LME shall send the completed ***CAP-MR/DD Policy Requirements Extension/Exception Request Form*** and PCP with accompanying documentation/justification to DMH/DD/SAS and request an extension or exception to the required transition.
- DMH/DD/SAS will review the completed ***CAP-MR/DD Policy Requirements Extension and Exception Request Form***, the PCP and accompanying documentation/justification and discuss with the LME and case manager if appropriate.
- If DMH/DD/SAS determines the individual has health and safety risks that may be affected by the required transition an extension or exception may be granted.
- An extension or exception may be granted **ONLY if the services are necessary to assure the health and safety of the participant.**
 - If services are requested to assure the health and safety of the participant, the PCP must clearly describe:
 - ◆ how the health and safety of the participant is at risk without these services, **AND**
 - ◆ measures taken to use natural and other community supports to assure the health and safety of the individual, **AND** demonstrate that no other options are available to assure health and safety of the participant other than providing services that will exceed the UR guidelines.
- Within 15 days from receipt DMH/DD/SAS staff will provide a written response to the LME indicating the decision for the extension or exception request.
- If the DMH/DD/SAS approves the request, notification will be provided to the LME who will in turn notify the case manager.
- If the DMH/DD/SAS determines an extension or exception is not justified and denies the request, the DMH/DD/SAS will notify the participant and guardian (copying the LME). The LME will notify the case manager.
- Participants whose request for an exception or extension are denied will have due process rights for appeals of those decisions.

⇒ **Billing Compliance Reviews**

The LME conducts compliance reviews of Medicaid and non-Medicaid funded services:

- 1) To ensure services delivered are appropriate and are provided in accordance with the NC Administrative Code; the DMH/DD/SAS and Medicaid Services Definitions Manual; DHHS policies and communications; the Medicaid Provider Enrollment Agreement; the North Carolina General Statutes and the Federal Code of Regulations;
and,
- 2) To prevent and detect violations of Medicaid, State, Federal, and County billing requirements.

The Billing Compliance Review Tool Procedure, as well as the Billing Compliance Review Tool are now posted on the AMH Website for review.

- ⇒ **Responding to requests for additional incident information:** Please note that incidents must be entered accurately and completely into NC IRIS in order to meet the incident reporting guidelines for timely submission. If the LME requests additional information regarding an incident, it must also be submitted in a timely fashion. For Level II incidents, the LME typically requests that additional information be added within one business day. For Level III incidents, requests for additional information should be added as soon as the provider receives the request.

IRIS Training Offered:

Mecklenburg Area MH/DD/SA Services
PROVIDER HOT SHEET
November 12, 2010

- **IRIS Training for New Users** is available for those who have not attended any previous IRIS training. The next available session will be on **Dec 7th from 9:00-11:00 AM**.

NOTE: Participants will benefit from becoming familiar with the *IRIS Technical Manual* available at <http://www.ncdhhs.gov/mhddsas/statspublications/manualsforms/iris6-4-10dhhsmanual.pdf> and visiting the *IRIS TEST WEBSITE* at <http://hrdhhs63.dhhs.state.nc.us:8000/default.aspx> prior to attending.

To register, please email Nancy Cody at nancy.cody@mecklenburgcountync.gov . Include the participant's name, the agency's name, and the session date. You will receive confirmation by email. The training will be held in the Cedar Room at the Carlton Watkins Center, 3500 Ellington Street, Charlotte, NC 28211.

Space is limited and REGISTRATION is REQUIRED. Please do not send unregistered staff to the training. Limit 2 staff per agency. Thank you.

PROVIDER COUNCIL REMINDERS AND UPDATES

- ⇒ **Mecklenburg Provider Council** is currently seeking to fill a position on the Executive Board with a provider to represent the Adult Mental Health continuum. Interested and qualified individuals should complete the attached [Statement of Interest](#) and contact Rori Ashwood, True Visions at rori_truevision@bellsouth.net to submit. Statements will be accepted through Nov 30, 2010. Afterwards, as head of the Nominations subcommittee, Rori will vet the statements to determine if they meet the criteria and then later the EB will meet to discuss the nominations and vote on the EB Member candidates.
- ⇒ **Provider Council Minutes** for the Executive Board, General Membership and Committees are published and available on-line at the following website:
<http://chameck.org/MECKLENBURG/COUNTY/AREAMENTALHEALTH/FORPROVIDERS/Pages/MPCouncil.aspx>
- ⇒ **Provider Council Sub-Committees** – Three standing subcommittees have been formed by the Provider Council. If you are interested or want more information, please contact the committee chairs. The three committees are:
 - **Training and Development Committee** Trasha Black (Co-Chair), Genesis Project, tblack@genesisproject1.org, 704-596-0505
 - ◆ Angela R. Simmons (Co-Chair), The Right Choice MWM, 704-537-3650 x1105, angela@trcmwm.com.
 - > The next scheduled meeting is **Wednesday, November 17, 2010 at 9 AM** in the Carlton Watkins Center Multipurpose room.
 - **Provider Relations Sub-Committee**
 - ◆ Kira Wilson (Co-Chair), The Arc of NC, 704-568-0112, kwilson@arcnc.org
 - ◆ Tim R. Holland (Co-chair) Person Centered Partnerships, 704-319-7609, Tim.Holland@pcpartnerships.org
 - >The Provider Relations Committee meeting scheduled for Wednesday, November 17, 2010 at 12:00 PM has been **CANCELLED. Stay tuned for future notification of meeting date.**
 - **Provider Outreach Sub-Committee** – The Provider Outreach Committee is a new sub-committee, the general purpose of which is to establish mechanisms for the Provider Council to connect with new providers, to provide them basic resource information and to introduce them to the Provider Council.
 - ◆ Miranda Little (Co-Chair), Family Preservation Services, Inc., 704-344-0491, MIittle@fpscorp.com
 - ◆ Becky Millis (Co-Chair), Family Preservation Services, Inc., 704-334-0491, Rmills@fpscorp.com
 - >The next meeting will be on **Wednesday, November 17, 2010 at 1:30 PM** in the Carlton Watkins Center Multipurpose Room.

EDUCATION AND TRAINING OPPORTUNITIES

Mecklenburg Area MH/DD/SA Services
PROVIDER HOT SHEET
November 12, 2010

- ⇒ **Mecklenburg's PROMISE Recovery and Crisis Training Calendar.** Please feel free to print and post at your locations or pass it on to anyone you feel would benefit from our trainings. To register, go to www.meckpromise.com. If you have any questions or concerns, please feel free to contact us at (704) 525-4398, ext. 207. <http://www.meckpromise.com/node/43>
 - ⇒ **The Mecklenburg County Provider Council** has developed a comprehensive Training Calendar designed to serve as a one-stop location to view training events occurring in Mecklenburg County that are supported or sponsored by the provider community, the LME, AHEC or other entities. Following is a link to submit training events: <http://www.meckpromise.com/node/75>. To view training events, click on the following link: <http://www.meckpromise.com/mptc>
 - ⇒ **The LME Monthly AMH Training Calendar** is posted on-line at the following link: <http://charmeck.org/mecklenburg/county/AreaMentalHealth/ForProviders/Pages/ProviderTraining.aspx>
 - ⇒ **TIP – Training in Innovation and Practice** –The NC Council of Community Programs and the Administrative Services Organization, a group of providers, continue to offer training to help providers adapt to changing circumstances. For a list of currently scheduled training events and to register, go to www.nc-council.org.
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WEB RESOURCES

- ◆ **NC DIVISION OF MH/DD/SAS:** <http://www.ncdhhs.gov/mhddsas/>
- ◆ **MECKLENBURG AMH:** <http://mecklink.charmeck.org>
- ◆ **AMH BEST PRACTICES COMMITTEES AND SCHEDULE:**
<http://charmeck.org/mecklenburg/county/AreaMentalHealth/ForProviders/Pages/BestPracticeTeams.aspx>
- ◆ **HOT SHEET ARCHIVE:**
<http://charmeck.org/MECKLENBURG/COUNTY/AREAMENTALHEALTH/FORPROVIDERS/Pages/HotSheets.aspx>



MECKLENBURG COUNTY

Area Mental Health, Developmental Disabilities and Substance Abuse Services

429 Billingsley Rd., 2nd Floor
Charlotte, NC 28211-1098

From: Mecklenburg County LME

Re: Requirements for Out of County Residential Placements

Date: November 11, 2010

North Carolina Administrative Rule **10A NCAC 27G .0506** addresses communication procedures that should occur when children/adolescents are placed out of county and served through local public mental health, developmental disabilities and substance abuse services systems. In addition, Implementation Update #47 issued by the Division of Mental Health on August 4, 2008, clarifies that a Memorandum of Agreement is required when an endorsed provider from one LME catchment area serves a consumer living in another county (where the provider does not have a site) outside the LME catchment area.

Please remember, that before a Mecklenburg County consumer is placed out of county in a residential placement, it is the responsibility of the Clinical Home provider to adhere to following requirements:

- **Contact MeckLink at (704) 336-6404 to inform of the placement**
- **Complete** the attached Out of County Placement form and send it to:
Nicole P. McKinney
Mecklenburg LME
3500 Ellington Street
Charlotte NC 28211
(704) 319-9232 (fax)
- If the provider is enrolled with NC Medicaid to provide Residential Level III or Residential Level IV, contact Angie Jackson at (704) 336-6954 with the following information to help facilitate getting a Memorandum of Agreement in place:
 - name of the provider agency
 - date of admission
 - the service that will be provided
 - a contact name and number at the facility

Please note that Memorandum of Agreements will be processed **within 10 business days of receipt of the required information from the provider.**

Clinical Home providers who place consumers out of county in a residential placement and do not submit an Out of County form to the LME will be issued a plan of correction by the LME's Provider Relations Department. As such, if you currently have consumers placed outside of Mecklenburg County and you have not yet submitted the attached Out of County form to the LME, please submit such within 5 business days.

If you have further questions regarding this matter, please contact Nicole P. McKinney at 704-432-5539 or via email at Nicole.McKinney@MecklenburgCountyNC.gov

Notification of Out of Home Community Placement for Children/Adolescents

- A. North Carolina Administrative Rules require that when children/adolescents served through local public mental health, developmental disabilities and substance abuse services systems are placed in a community program out of their home community or reside in ICF/MR facilities, the home¹ area authority or county program is responsible for notifying the following:
- Legal guardian
 - Others involved in care and treatment
 - Host² community provider
 - Host community representatives (may include the court counselor, county DSS, regional children's developmental services agency (CDSA) or the local education authority)
- B. This is the official form for such notification.
- C. Notification shall be made within 3 business days of placement by fax or hard copy.
- D. In the case of an emergency placement, notification by telephone is acceptable, with written notification the following day.

Date: _____ Name of Child/Adolescent: _____
Date of Birth: ____ / ____ / ____ Date of Placement out of Home Community: _____
Grade: _____ Common ID#: _____ Social Security #: _____

Parent/Legal Guardian Name(s): _____
Address: _____
Phone: _____ E-mail: _____

Home Area Authority/County Program: _____
Contact Person: _____
Address: _____
Phone: _____ E-mail: _____

Host Area Authority/County Program: _____
Contact Person: _____
Address: _____
Phone: _____ E-mail: _____

Home DSS: _____ Contact Person: _____
Address: _____
Phone: _____ E-mail: _____

¹ A home program is one in the community of the child/adolescent's legal residence.

² A host program is one in the community in which the child will be residing.

Host DSS: _____ Contact Person: _____

Address: _____

Phone: _____ E-mail: _____

Home School: _____

Principal: _____

Special Education Program Administrator: _____

Address: _____

Phone: _____ E-mail: _____

Host School: _____

Principal: _____

Special Education Program Administrator: _____

Address: _____

Phone: _____ E-mail: _____

Physical Custodian/Provider: _____

Address: _____

Phone: _____ E-mail: _____

Person Completing Form: _____

Agency: _____

Address: _____

Phone: _____ E-mail: _____



**National Training Series on Mental Health & Intellectual Disability
2010-2011**

All training occurs via Webinar* from 12 noon to 2 PM Eastern Time

1. November 12, 2010: *Issues in Treating Trauma for People with Intellectual Disability*

Speaker: Nancy Razza, Ph.D.

Elizabeth Boggs Center on Developmental Disabilities, UMDNJ/Robert Wood Johnson Medical School, New Brunswick, New Jersey

2. December 10, 2010: *Clarifying and Understanding Psychotic Symptoms in Youth with Intellectual Disability*

Speaker: Robin Friedlander, MB, FRCPC

Program Director, Developmental Disorders Program, Department of Psychiatry, University of British Columbia; Chair, Developmental Disability Section of the Canadian Psychiatric Association

3. January 14, 2011: *Self-Injury in Persons with Intellectual Disability: Habilitative Mental Health Assessment and Treatment*

Speaker: William I. Gardner, Ph.D.

Professor Emeritus, University of Wisconsin-Madison

4. February 11, 2011: National START Team Meeting

Speaker: Joan B. Beasley, Ph.D.

Director, Center for START Services, Research Associate Professor, Institute on Disability - University of NH

5. March 11: *Mental Health Perspectives for Autism Spectrum Disorders in Adults with Intellectual Disability*

Speaker: Anne Desnoyers Hurley, Ph.D.

Research Associate Professor, Institute on Disability, Institute on Disability - University of NH & Tufts University School of Medicine

6. April 8, 2011: *Medical Conditions of People with Intellectual / Developmental Disabilities and Mental Health Challenges*

Speaker: I. Leslie Rubin, M.D.

President, Institute for the Study of Disadvantage & Disability; Research Associate Professor, Morehouse School of Medicine

7. May 13: *Developmental and Cognitive Limitations & Differences: Support Plans for Individuals with Mental Health Problems and Intellectual Disability*

Speaker: Anne Desnoyers Hurley, Ph.D.,

Research Associate Professor, Institute on Disability – University of New Hampshire & Tufts University School of Medicine

8. June 10, 2011: National START Team Meeting

Speaker: Joan B. Beasley, Ph.D.

Director, Center for START Services & Research Associate Professor, Institute on Disability - University of NH

**Registration information for webinars will be sent separately*



MPC
Mecklenburg Provider Council



presents

Person Centered Thinking Training

**Session 1: Monday, December 6th and
Tuesday, December 7th, 2010**

trainer

Sharon Welling

**Session II: Monday, December 20th and
Tuesday, December 21st, 2010**

trainer

Larry Adler

--LOCATION: Carlton Watkins Center, 3500 Ellington Street, Charlotte NC 28211

REGISTRATION: Register online: www.genesisproject1.org (Registration fees will be payable via Paypal)

*Total training hours: 12 hours

Cost: \$65 per person

For more information on this Person Centered Thinking Training, please contact, Dr. Trasha Black, PhD, LPC, NCC, Clinical Director at Genesis Project 1, Inc. (704.596.0505) [tblack@genesisproject1.org]

MPC

Mecklenburg Provider Council

TRAINING REGISTRATION FORM

Training Title:

Person Centered Thinking

(please check the desired training session:

Session I: December 6-7, 2010 _____

Session II: December 20-21, 2010 _____

Complete the information below and fax this form to Dr. Trasha Black at (704) 596-0507.

Please type or print

AGENCY INFORMATION

Agency's Name: _____

Agency's Contact Person: _____

Contact Person Phone: _____ Email: _____

-Participant (s) attending

Name (please print)	Email Address	Phone Number

*If there are more than 12 participants from your agency, please use another registration form.

SESSION & ATTENDEE INFORMATION

(Limit 50 per session. See the training flyer for times and locations)

	Number purchasing	Total Cost
Training Fee \$65.00		
TOTAL FEE		

PAYMENT INFORMATION

You will receive an online link for payment via Paypal in the registration confirmation email.

Training is limited to 50 persons per session. The training fee is nonrefundable and cannot be applied to a future training. Register early, space is limited. Participants who arrive more than 15 minutes late will NOT be admitted to the training session. Full attendance expected in order to receive training certificate (I.e. No partial credit will be given.) The Provider Network does not keep certificate copies so all participants will need to make all necessary copies and storage

arrangements as copies of lost certificates will NOT be available in the future. Please note that these sessions will be videotaped and all participants will be asked to sign a consent form.

Should you have any questions, please contact Dr. Trasha Black at (704) 596-0505 or Angela Simmons at (704) 537-3650 ext.1105.

MPC
Mecklenburg Provider Council

presents

Motivational Interviewing

Facilitator: Tony Beatty.

**December 29-30, 2010
8:30am-4:30pm**

Cost: \$40

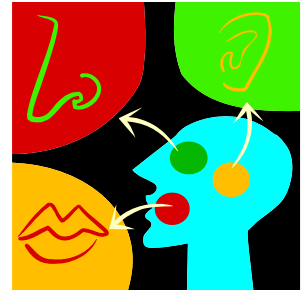
--LOCATION: Carl Watkins Center, 3500 Ellington Street, Charlotte NC 28211

REGISTRATION: Register online: www.genesisproject1.org (Registration fees will be payable via Paypal)

*Total training hours: 13 hours

Tony Beatty is a Licensed Clinical Addictions Specialist, who serves as a Program Administrator for Mecklenburg County Area Mental Health Provided Services Organization. Tony has three decades of experience working with individuals desiring recovery and is excited to provide Motivational Interviewing to the community.

For more information on this Motivational Interviewing Training, please contact, Dr. Trasha Black, PhD, LPC, NCC, Clinical Director at Genesis Project 1, Inc. (704.596.0505)[tblack@genesisproject1.org]



MPC Mecklenburg Provider Council

TRAINING REGISTRATION FORM

Training Title:

Motivational Interviewing Training

December 29 & 30

Complete the information below and fax this form to Dr. Trasha Black at (704) 596-0507.

Please type or print

AGENCY INFORMATION

Agency's Name: _____

Agency's Contact Person: _____

Contact Person Phone: _____ Email: _____

-Participant (s) attending

Name (please print)	Email Address	Phone Number

*If there are more than 12 participants from your agency, please use another registration form.

SESSION & ATTENDEE INFORMATION

(Limit 50 per session. See the training flyer for times and locations)

	Number purchasing	Total Cost
Training Fee (\$40.00)		
TOTAL FEE		

PAYMENT INFORMATION

You will receive an online link for payment via Paypal in the registration confirmation email.

Training is limited to 50 persons per session. The training fee is nonrefundable and cannot be applied to a future training. Register early, space is limited. Participants who arrive more than 15 minutes late will NOT be admitted to the training session. Full attendance expected in order to receive training certificate (i.e. No partial credit will be given.) The Provider Network does not keep certificate copies so all participants will need to make all necessary copies and storage arrangements as copies of lost certificates will NOT be available in the future. Please note that these sessions will be videotaped and all participants will be asked to sign a consent form.

Should you have any questions, please contact Dr. Trasha Black at (704) 596-0505 or Angela Simmons at (704) 537-3650 ext.1105.



MECKCARES

Cordially Invites You to Our

**Providers!
Families!
Youth!
Agencies!**

Come learn all about our community's System of Care in a fun, educational atmosphere.

- Community Resources
- Flex Funds
- Child and Family Teams
- Enrollment Process
- Natural and Informal Supports
- System of Care Coaching
- Case Consultation
- Family Supports and ParentVOICE

System of Care OPEN HOUSE

WEDNESDAY, NOVEMBER 17

4:00 P.M. TO 6:00 P.M.

**CAROLE A. HOEFENER COMMUNITY CENTER
610 EAST 7TH STREET**

Parking is available behind the building

Please R.S.V.P. by November 12 to
Francesca Morgan at
Francesca.Morgan@MecklenburgCountyNC.gov
call (704) 432-4592

FUN!

FOOD!

**RESOURCES &
INFORMATION!**

GIVEAWAYS!

ACC

2010 DR PEPPER ACC CHAMPIONSHIP



On December 4, 2010 the ACC's Atlantic and Coastal Division Champions will play for the right to represent the ACC with an automatic bid to the Bowl Championship Series. Charlotte is ready for 2010 and we want you to help!

We've created an opportunity for your organization to get involved with this prestigious event and in turn we are committed to make a donation to your organization based on the criteria outlined below:

- Your organization will have until November 1, 2010 to sell as many Upper Level tickets to the 2010 Dr Pepper ACC Championship Game.
- Based on the number of tickets sold, Charlotte Collegiate Football will make a donation to your group.
- Charlotte Collegiate Football will reserve an upper level section called the "___" **ZONE** where all tickets sold through your group will be located.
- Your organization will receive an LED Board and PA Announcement during the 2010 ACC Championship Game in Charlotte (minimum of 100 tickets must be sold).

Community Outreach Program Incentives:

100 to 199 Tickets- We'll donate 10% of the ticket sales to your group

200-349 Tickets- We'll donate 15% of the ticket sales

350 to 499 Tickets- We'll donate 20% of the ticket sales

500+ tickets- We'll donate 25% of the ticket sales

500 tickets = Up to \$4,122 donated!



When the ACC football championship was awarded to Charlotte late in 2007 it signified a move to locate the game in the geographic center of the conference.

Following the first five years, the 2010 Dr Pepper ACC Football Championship Game marks the first time that the conferences premier football event will take place in the state of North Carolina.

FOOTBALL CHAMPIONSHIP



Saturday, December 4th, 2010
7:45PM
Bank of America Stadium

GROUPS HAVE MORE FUN!

Watch the top two teams in the ACC battle for a chance to play in the 2011 Orange Bowl!

- Sit together in choice seat locations.
- Enjoy seven hours of ACC festivities at FanFest before the game. Participate in games and pep rallies throughout the day. Get pictures and autographs from ACC Legends. Watch the ACC Mascot Football Game and popular country music acts perform before kickoff. Enjoy food and fun all day long!
- Group recognition on the LED video board during the game and a thank you listing in the game day program.



TICKETS START AT \$25* PER PERSON



QUICK SCORE

Groups of fifty (50) or more receive free ACC Championship t-shirts and VIP Extra Point Passes while supplies last!

ORDER INFORMATION

Please contact your ACC Football Championship Representative to reserve your seats today!

JOHN MACONI

336-331-3829

jmaconi@accfootballchampionship.com

* Minimum purchase of 10 tickets

➤MPC
Mecklenburg Provider Council

9/09

Statement of Interest

Agency Name	
Populations Served	
Services Provided	
Name of Individual Representative	

Criteria for Executive Board Nomination:

Consistent Participation and Attendance with Best Practice Groups, Mecklenburg Provider Council Subcommittees, and Info Share. Please describe your involvement and participation with each.

Best Practice Groups	
MPC Subcommittees	
Info Share	

➤MPC
Mecklenburg Provider Council

9/09

Criteria for Consideration:

Agencies must not be on a current Plan of Correction (POC)and must have signed and returned the Code of Ethics Acknowledgement. Agencies must have been endorsed to provide services for a minimum of 3 years and must be in good financial standing.

*Exception: 1 New Provider Agency will be represented on the Executive Board. Agencies interested in serving in this capacity should have been endorsed at least 1 year but no more than two years.

Describe any experience that your agency has that would recommend your agency for the MPC Executive Board.

Peer Recommendations:

Two peer recommendations should be attached to the statement of interest. See below.

Peer Recommendation #1:



Mecklenburg Provider Council

9/09

Name of Agency Being Recommended:

Name of Individual (& Agency) Recommending Agency Above:

Contact Information for Individual (& Agency) Recommending Agency Above:

Why would this Agency be a good fit for the Mecklenburg Provider Council Executive Board?

➤MPC
Mecklenburg Provider Council

9/09

Peer Recommendation #2:

Name of Agency Being Recommended:

Name of Individual (& Agency) Recommending Agency Above:

Contact Information for Individual (& Agency) Recommending Agency Above:

Why would this Agency be a good fit for the Mecklenburg Provider Council Executive Board?



Mecklenburg Provider Council

9/09

LME Verification of Good Standing:

Signature

Date

Mecklenburg Provider Council President:

Signature

Date

Please submit completed Statement of Interest to any member of the Executive Board or to:

Ashley Jacobs

Mecklenburg Open Door

1515 Mockingbird Lane, Suite 1015

Charlotte, NC 28209

Phone: 704.525.3255 x214

Fax: 704.525.0949

ajacobs@mecklenburgopendoor.org

READY FOR YOUR FUTURE?

Youth, Families, and Staff

You're Invited to Explore the Question.....

*How will life change for young adults
struggling with emotional challenges and/or co-occurring disabilities
when they turn **16 yrs old.....what about 21?***

What will happen after **HIGH SCHOOL?**
How will you make **MONEY\$\$\$**
Where will you **LIVE?** What if you become **HOMELESS?**
How will you get your **DRIVERS LICENSE? SOCIAL SECURITY?**
HEALTH INSURANCE? MULTIPLE SYSTEMS? Get the answers to
these questions and much more by attending the workshop:

Futures Ready! Over & Under 18

A Transition Curriculum for Emerging Young Adults (14-26)

For More Information Please Contact:

cwilson@mhacentralcarolinas.org or 704-432-4521



North Carolina Families United, NFFCMH, Inc. Transition Mentoring Services is made possible by the NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services Block Grant Funds

FUTURES READY

December 7, 9 & 13, 2010 5 - 8 pm

Futures Ready Interest Form

Date completed: _____

Name of interested person:		
(First)	(Last)	(Middle initial)
Address:		
City:	State:	Zip Code:
Telephone Contact Number(s):		
E-mail address:		
Age:	Race:	Sex
Person who told you about the workshop:		

***Please complete the following questions to the best of your ability.
Keep in mind, there are no right or wrong answers, it is all about you!***

How did you hear about Futures Ready? _____

Why do you want to participate in Futures Ready? _____

What do you consider your best attribute, quality or strength? _____

Who are the most important people in your life and what is their relationship to you? _____

What goals are you hoping to accomplish through participating in Futures Ready? _____

Additional information you would like us to know about you? _____

Thank you for your interest in the Futures Ready workshop!

Please Submit Completed Interest Form to:
ParentVOICE Attention: Candace Wilson
3500 Ellington Street Charlotte, NC 28211

cwilson@mhacentralcarolinas.org
704-432-4521 phone / 704-432-4547 FAX

Return form no later than November 22, 2010

Signature of Participant

Date

Signature of Parent/Guardian Consenting Participation

Date