

MECKLENBURG COUNTY Area Mental Health, Developmental Disabilities and Substance Abuse Services January 28, 2011

PROVIDER HOT SHEET

PROVIDER COUNCIL REMINDERS AND UPDATES

- ⇒ 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, <u>tblack@genesisproject1.org</u>, 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, February 16, 2011 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, <u>kwilson@arcnc.org</u>
 - Tim R. Holland (Co-chair) Person Centered Partnerships, 704-319-7609, Tim.Holland@pcpartnerships.org
 - > Stay tuned for future notification of the next 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, <u>Mlittle@fpscorp.com</u>
 - Becky Mills (Co-Chair), Family Preservation Services, Inc., 704-334-0491, <u>Rmills@fpscorp.com</u>
 >The next meeting will be on Wednesday, February 16, 2011 at 1:30 PM in the Carlton Watkins Center Multipurpose Room.

EDUCATION AND TRAINING OPPORTUNITIES

- ⇒ MeckCARES Training Institute offers a full range of high-quality classroom and now <u>online courses</u> that meet state service definitions and requirements and will empower you to improve outcomes for youth and families.
 - Learn about System of Care principles and practices
 - See how Child and Family Teams should operate
 - Gain knowledge, power and respect to strengthen families and improve lives

Register Today! http://charmeck.org/mecklenburg/county/MeckCARES/training/Pages/default.aspx

⇒ Mecklenburg's PROMISE Recovery and Crisis Training Calendar. MeckPromise is offering free Wellness, Recovery & Crisis Education classes for consumers and providers at our new location 1041

Mecklenburg Area MH/DD/SA Services PROVIDER HOT SHEET January 28, 2011

Hawthorne Lane, Charlotte, NC 28205. Please feel free to drop by and see what we've got going on! For more information on our classes please call 704-625-6236 or email John Cunningham at <u>jcunningham@meckpromise.com</u> to request a current calendar.

- ⇒ 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: <u>http://www.meckpromise.com/node/75</u>. To view training events, click on the following link: <u>http://www.meckpromise.com/mptc</u>
- ⇒ **The LME Monthly AMH Training Calendar** is posted on-line at the following link: <u>http://charmeck.org/mecklenburg/county/AreaMentalHealth/ForProviders/Pages/ProviderTraining.aspx</u>
- ⇒ 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.
- ⇒ Mental Health Association offers various training opportunities in collaboration with Charlotte AHEC. Please visit website <u>http://www.charlotteahec.org/</u> for more information.

WEB RESOURCES

- ⇒ NC Division of MH/DD/SAS
- ⇒ NC Division of MH/DD/SAS Implementation Updates
- \Rightarrow <u>Mecklenburg AMH</u>
- ⇒ AMH Best Practices Committees and Schedule
- ⇒ AMH Hot Sheet Archive

⇒ AMH Provider Document Library

The following policies have been added to the Provider Document Library. Please review these policies as they pertain to your agency.

Consumer Affairs

٠	CA-01 Complaint Management	Updated
•	CA-02 Consumer Choice	Updated
•	CA-07 Referral of Complaints	Updated
-	CO OG Incident Management	Indeted

CO-06 Incident Management
 Updated

Compliance

- CC-01 False Claims Compliance Updated
- CC-02 Reporting and Investigating Compliance Concerns Updated

Finance

- LME 29 Monetary Donations
 Updated
- LME-30 Donated Goods
 Updated

MPC Mecklenburg Provider Council



Presents

Motivational Interviewing February 11 & 18, 2011 8:30am-4:30pm

Location: Charlotte, NC

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

*Total training hours: 13 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]

MINT Certified Trainer Tony Beatty



Tony Beatty is a MINT certified trainer. He is a Program Administrator with Mecklenburg County Area Mental Health. He has served over 20 years as a substance abuse counselor.

TRAINING REGISTRATION FORM

Training Title: Motivational Interviewing

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 30 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 30 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 or Sharday Black at (704) 596-0505

MPC Mecklenburg Provider Council



Presents

Person Centered Thinking Training

Saturday, February 19th and Saturday, February 26th, 2011 Trainer Sharon Welling

--LOCATION: EnterPro STC Services LLC 1100 South Mint Street, Suite 101 Charlotte, NC 28203

REGISTRATION: Register online: www.genesisproject1.org (Registration fees will be payable via Paypal). Other methods of payment include either a certified check or money order.

*Total training hours: 12 hours

Cost: \$80 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 Training

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

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 \$80.00		
	TOTAL FEE	

PAYMENT INFORMATION

You will receive an online link for payment via Paypal at www.genesisproject1.org

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 or Sharday Black at (704) 596-0505

SAVE THE DATE!

FUN!

FOOD!

RESOURCES &

INFORMATION!

GIVEAWAYS!



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, FEBRUARY 24 3:00 P.M. TO 5:00 P.M. SOUTHVIEW RECREATION CENTER-GYM 1720 VILMA STREET

For any questions or to R.S.V.P. Contact Francesca Morgan at Francesca.Morgan@MecklenburgCountyNC.gov call (704) 432-4592

*Provider agencies wishing to distribute materials, please contact Angie Traylor at 704-336-4757.



F Request for Proposal - 2011 Grant Cycle

Request for Proposal (RFP): Gang of One is seeking agencies in Mecklenburg County to partner with its Gang Reentry and Intervention Team (GRIT Team). The GRIT Team is composed of Gang of One staff and case managers who work one-on-one with gang-involved juveniles to assist them in gang and criminal disassociation by connecting them to community-based services and activities.

In addition to the case management services provided by the GRIT Team, Gang of One will provide subgrants up to \$10,000 to partner agencies to provide specialized classes in Life Skills and/or Job Training to the juveniles served by the GRIT Team. Life Skills and Job Training classes will be held in a small group format (up to 20 youth/class) and will be implemented at the Greenville Neighborhood Center, 1330 Spring Street, March – December 2011.

Purpose: The purpose this RFP is to identify up to two local agencies with an established record of success, interested in and most capable of providing the following services to juveniles served by the GRIT Team:

- Life Skills Training, including personal self-management (decision-making, managing stress, anger management), general social skills (strengthen communication skills, building healthy relationships), and drug resistance skills (consequences of substance abuse and risk taking, influences of the media)
- Job Skills Training, including goal-setting, time management, task management, planning, decision-making, dressing for success, interviewing skills, perseverance

Population Served: Documented gang members and associates in Charlotte-Mecklenburg are predominately African-American and Hispanic and male. GRIT Team juveniles reflect this demographic. The following gang-involved juveniles are served by the GRIT Team:

- Reentry Clients Juveniles transitioning back to Mecklenburg County referred by Stonewall Jackson Youth Development Center (YDC) and other YDC's in North Carolina
- Intervention Clients Juveniles residing in Mecklenburg County referred by the North Carolina Department of Juvenile Justice and Delinquency Prevention – District 26
- Prevention Clients Juveniles residing in Mecklenburg County referred to Gang of One, with an emphasis on pre-adjudicated youth

Deadline: Proposals must be hand delivered, received by post, and/or emailed no later than Friday, February 18, 2011 at 2 pm. Proposals should be emailed to <u>gangofone@cmpd.org</u> or mailed to CMPD/Gang of One, 601 E. Trade Street, Charlotte, NC 28202.

Funding Priorities: Gang of One will give priority to agencies that

- Currently work with urban youth
- Utilize a standardized or best practice curriculum
- Possess demonstrable program outcomes
- Provide at least two (2) facilitators per small group training session
- Demonstrate how the proposed project will positively impact GRIT Team clients
- Have a plan to effectively track and evaluate program outcomes
- Identify the service to be provided life skills training or job skills training

Eligibility:

- Organizations must be located and provide services in Mecklenburg County, North Carolina
- Applicants must qualify as tax-exempt under Section 501(c)(3) of the Internal Revenue Code or be classified as a unit of government
- Applicants must have recently audited financial statements confirming conformity with generally

accepted accounting principles, unless legally exempt from a required audit

- Organizations must not discriminate on the basis of age, race, national origin, ethnicity, gender, physical ability, sexual orientation, political affiliation or religious belief nor be a religious organization that serves exclusively sectarian purposes
- Applicants should demonstrate a commitment to high-quality programming, employ highly qualified professional staff, and have experience working with the target population

Areas/Agencies Not Eligible:

- Capital and endowment campaigns
- Travel and conferences

Fraternal organizations

Projects promoting religious or political views

Award Information: Gang of One is the fiscal agent for the allocated funds.

- Funding is provided through a grant from the North Carolina Department of Juvenile Justice and Delinquency Prevention through the Mecklenburg County Juvenile Crime Prevention Council.
- Funds may not be used to supplant (reduce local funds for an activity specifically because these funds are available) an existing agency budget. Funds may be used to supplement (expand or enhance) an existing agency budget.
- Compensation for agency staff should not exceed \$56.25/hour (a maximum of \$450/day).
- The sub-grant recipient will provide narrative and fiscal reports, evaluating the project and accounting for grant expenses.
- The sub-grant recipient will submit monthly invoices for payment. Grant funds are distributed through reimbursement. All accurate, properly submitted, and approved invoices will be paid within thirty (30) days of receipt.
- Gang of One will conduct site visits during the implementation phase of the award.

Proposals: All Proposals will be reviewed. Proposals must include the following:

- 1) Completed one-page application form
- 2) Project Narrative
- 3) Project Design and Implementation
- 4) Project Impact/Outcomes and Evaluation
- 5) Capabilities/Competencies
- 6) Budget

For Proposal Assistance or Questions, please contact:

Melissa Treadaway CMPD – RP&A Office: 704.336.2757 Email: mtreadaway@cmpd.org

Proposal Deadline: Proposals must be hand delivered, received by post, and/or emailed no later than Friday, February 18, 2011 at 2 pm.

Proposal Submission: Proposals should be emailed to <u>gangofone@cmpd.org</u> or mailed to CMPD/Gang of One, 601 E. Trade Street, Charlotte, NC 28202.

Notification of Award: Notification of award will occur by March 4, 2011.

Program Agreements: Agreements will be prepared by March 18, 2011 for agency review and signature.

Project Period: March 1, 2011 – December 31, 2011.

Gang of One Grant Application Form

Agency Information

Name of Agency	
Executive Director	
Contact Person/Title	
Address, City, State, Zip	
Phone	
Fax	
E-mail	
Web site	
Agency's Mission	
Statement	

Please assemble the items in grant application in the order listed below and check off each piece as it is completed. Do not staple together.

Grant Application Form
Grant Narrative
Line-item budget with anticipated income and expenses
List of the current Board of Directors, including a brief business/community affiliation (if applicable).
Brochures and/or promotional materials, outlining programs/activities offered (optional, but encouraged electronic copy not necessary).
For 501(c)3 organizations, attach a copy of the applicant's official notice of tax exempt status from the Internal Revenue Service, or explain here if not included:
If the applicant organization is exempt as a
local unit of a national organization, attach certification of membership. (Note: Do not send the federal tax ID number notice or state tax exemption letter as these items do not meet this requirement.).
Enclose one copy of the applicant's most recent audit. If no audit exists, please explain here, and attach most recent financial statements:

Agency Request

Program to be Funded: Life Skills Training or Job Skills Training (circle your response)

Amount of Funding Requested:	
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	Agency L	egal Entity Type		
	C-Corporation General Partnership	Cooperative S-Corporation	on	
	Sole Proprietorship	Not for Profit		
	Limited Liability Corporation	Limited Liability Partnership		
	Other			
	Agency Federal Tax ID #:			
	surance coverage - Professional Liability Have you ever had a claim against you? If " and amounts of the insurance and dispositio		Yes	No □
2.	Are there any current, unsettled claims?			
3.	Have you ever had a policy cancelled?			
4.	Have you or any owners ever been convicted but not limited to, crimes involving children, minor traffic violations? If "Yes", please list	fraud, or narcotics other than		
5.	Have you or has anyone in your company we managerial or clinical role ever been sanction or government agency?			

If you answered "Yes" to any of the above questions, please explain in an attachment.

Gang of One Grant Narrative

Please answer the following questions in order and as concisely as possible on a separate page(s).

A. Project Narrative

- 1. Describe the organization's guiding principles, vision, and mission.
- 2. Describe the organization's experience with the population to be served.
- 3. Describe the organization's experience with the service to be provided.
- 4. Describe the proposed project. Be sure to include purpose of project, specific services to be provided, and program outline/curriculum.

B. Project Design, Implementation, and Timeline

- 1. Describe clearly and specifically how you intend to implement the proposed project.
- 2. Include a description of how the project will operate.
- 3. You may attach a copy of your curriculum.

C. Outcomes and Evaluation

Gang of One requires results-oriented outcomes.

- 1. Describe how your project is measured...identify the goal, objectives, performance measures, measurement tool(s), and evaluation method.
- 2. You may attach a copy of your current evaluation tools and outcomes.

D. Capabilities/Competencies

- 1. Describe the roles and responsibilities of project staff, including how the project will be managed.
- 2. Include qualification(s) of the persons in the organization who will have primary responsibility for service implementation and supervision.

E. Budget

Provide a detailed line-item budget explaining the proposed use of grant funds (e.g.; personnel, materials and supplies, evaluations, travel). Please use the attached Budget Form (a sample budget is also provided). Funds must be linked to project goal and objectives.

- 1. Identify clearly the total funds requested.
- 2. Describe other funding sources (if any) that will be used to support the program.

Please limit your narrative to a maximum of five pages, attachments excluded, and use a 12-point font.

Gang of One		
Request For Proposal - [inse	rt name of agency here]	
Detailed Budget Worksheet		
	PERSONNEL	
Description	Computation	Amount
	Total Personnel	\$
	FRINGE BENEFITS - EXCLUDED	
Description	Computation	Amount
Excluded		
	Total Fringe Benefits	\$
	TRAVEL	
Description	Computation	Amount
	Total Travel	\$
	EQUIPMENT	
Description	Computation	Amount
	Total Equipment	\$

	SUPPLIES	
Description	Computation	Amount
	Computation	-
	Total Supplies	\$ -
	CONSULTANTS/CONTRACTS	<u> </u>
Description		Amount
Description	Computation	Amount
Consultants/Contracts		
Consultant Travel Expenses		
•		
	Total Consultant/Contracts	\$-
	OTHER COSTS	
Description	Computation	Amount
	Total Other Costs	\$ -
	Total Other Costs	\$- \$-

Youth Crisis Prevention: Predict, Prevent and Plan Life Lessons Classes Part 1 and Part 2

February 8 and 10, 2011 5:00 pm until 7:00pm

This workshop will be held at MeckPromise

1041 Hawthorne Lane, Charlotte NC 28205

For questions regarding training and to register please contact:

Lakika Marshall at 704-625-6236 or Kevin A. Markle at 704-432-4522 (office) 980-406-1169 (cell)

Life Lesson Part 1

- Provides young people with the foundation to understand what a crisis looks like and feels like to them.
- Presents the four "universal" stages of a crisis and helps youth apply this process to their individual circumstances.
- Focuses on their current coping skills and resources and identify ways to enhance both.



Life Lesson Part 2

Youth will:

- Learn about the importance of preparing a crisis plan.
- Gather tools to create their own individual "wellness toolbox".
- Leave the class with their own crisis plan that is unique and usable to them.

Dinner will be provided for participants. Registration deadline is February 4, 2011

Workshop Sponsors:

MeckPromise MENTAL HEALTH ASSOCIATION of Central Carolinas, Inc. Parent OICE A Program of the Mental Health Association of Central Carolinas, Inc.