



MECKLENBURG COUNTY
Area Mental Health, Developmental Disabilities and
Substance Abuse Services
April 30, 2010

PROVIDER HOT SHEET

- ⇒ **Practice Guidelines** - The LME has updated our website with links to numerous nationally recognized Practice Guidelines. Over the coming months the LME will work with CFAC, Providers and other community stakeholders to update our consumer and family information packets for schizophrenia, attention deficit disorder and bipolar disorder. You can find relevant links under "Practice Guidelines" in both the Provider and Consumer sections of the AMH Public Web Page (left side of the Home page). All provider and practitioners are expected to provide services in accordance with evidence based practice guidelines.
- ⇒ **NC-TOPPS training will be held May 5, 2010 and May 19, 2010** from 9 – 11 AM at Watkins Center, 3500 Ellington Street in the Computer Lab. We have **12 spaces available**. If you or your staff need training, a refresher or have questions concerning NC-TOPPS Interviews, please e-mail LME-NCTOPPS@MecklenburgCountyNC.gov to confirm a space. Space is limited so please only send one or two representatives from your agency. Please remember to bring a light jacket or sweater when attending these sessions.
- ⇒ **Incident Response Improvement System (IRIS) Implementation** – Please see the attached information from the Division of Mental Health regarding the implementation of IRIS. Mecklenburg County will provide training to *no more than two staff from each provider agency* on the following dates: May 18th, May 20th, June 8th, 10th, 15th, and 17th.

Two 2-hour sessions will be offered on each of these days from 9:00-11:00 A.M. and 2:00-4:00 P.M. ***Space is limited and REGISTRATION is REQUIRED.*** To register, please email Nancy Cody at nancy.cody@mecklenburgcountync.gov. Include your agency name, the name of your attendees, your preferred date and time along with your second choice in the event that a class is full. You will receive confirmation by email. All sessions will be held in the Cedar Room at the Carlton Watkins Center, 3500 Ellington Street, Charlotte, NC 28211.

- ⇒ **Request For Proposal release dates:**
- DSS RFP – **please see attached narrative.**
 - Jail Services Wellness Program RFP will be released on 5/14/10
 - CMS Provider RFP will be released 6/4/10
- More details regarding the information sessions and the RFP due dates will be announced later.
- ⇒ **LME Contract Providers - Year-End Date for submitting invoices and claims**
We strongly encourage your agency to submit all invoices and claims and bill us no later than May 17, 2010 for all contracted services that were provided July 1, 2009 through April 30, 2010. July 5, 2010 is the deadline for submitting invoices and claims for all services rendered and expenditures incurred through June 30, 2010. *Please see attached memo for more information.*

*-To be a community that supports individuals and families who are fully
empowered to lead healthy and independent lives.-*

Mecklenburg Area MH/DD/SA Services

PROVIDER HOT SHEET

April 30, 2010

- ⇒ **Provider Expectations for Transition of CMC –Randolph Child and Adolescent Outpatient Consumers** - In response to the elimination of Outpatient Services for child and adolescent consumers at CMC-R, the following expectations have been established. These apply for any provider who would like to offer outpatient services these consumers.
- Services must be provided by a fully licensed Mental Health professional.
 - The provider must be able to respond to a referral within 48 hours and must be able to schedule two visits within 14 days and 4 visits within 45 days. If not, the provider will need to decline the referral.
 - There must be a high level of service coordination; the therapist must continually assess the level of need and refer as appropriate.
 - The provider must treat children in the context of their family and in the context of System of Care values and principles.
 - The provider must ensure that medications are appropriately managed, discussed with the parents and guardians and coordinated with the physician. If the child's medications are being managed by CMC-R the provider must coordinate those services with the CMC-R Medication Clinic physicians.

The list of Medicaid and Non-Medicaid providers who have informed the LME that they have capacity to deliver outpatient therapy has been posted on the AMH website in the “Find A Provider” section, and updated as new information is received by the LME.

- ⇒ **The Mecklenburg Provider Performance Report (MPPR)** is a local four star measurement of the performance of child and adult mental health, developmental disability and substance abuse service providers based on specific quality indicators. It brings together pieces of information about each provider that have not previously been available in one place. For a full description, please click on the link below:
<http://www.charmeck.org/Departments/Area+Mental+Health/PPR.htm>

When are Provider Performance Reports (PPR) completed?

A Provider Performance Rating (PPR) will be completed on each provider agency as follows:

- After the Provider Monitoring Tool (PMT) has been completed.
 - The scheduling of the PMT monitoring will be based on the score your agency received from the Frequency and Extent Monitoring Tool (FEM).
 - Providers agencies will have the FEM completed after they receive a service contract or an endorsement with the LME. FEM reviews for newly Endorsed providers will occur after the 60 day review when the provider organization has begun accepting consumers and delivering services, i.e., post endorsement and enrollment.
- Information gathered to complete the PMT, such as QA/QI information, Incident Reporting and Compliance will be used in completing the PPR; however, if additional information is needed, a written request will be sent via **certified mail** to the provider. The provider will have 15 business days from the date of the request to submit additional information via e-mail, US mail, or hand delivered to the LME. **Please note that reminders will not be issued.**
- The PPR will be initiated within 30 days following the completion of the PMT review, and completed within 90 days after the PMT review.

Mecklenburg Area MH/DD/SA Services

PROVIDER HOT SHEET

April 30, 2010

⇒ **Implementation Bulletin #71**

<http://www.ncdhhs.gov/mhddsas/servicedefinitions/servdefupdates/index.htm>

[Summary of Implementation Update #71](#)

- Attachment 1 [CABHA Position Descriptions](#)
- Attachment 2 [TCM Transition Requirements](#)
- Attachment 3 [TCM Attestation Letter Template](#)
- Attachment 4 [Supplement 1 for Attachment 3](#)

⇒ **NOTIFICATION REGARDING AGENCY CHANGES**

Please remember if your agency is changing ownership, merging, or closing, you must notify the LME, DMH and CSC within 30 days of this change.

Updates and changes should be submitted to the following:

NC Medicaid Provider Enrollment

CSC

PO Box 300020

Raleigh NC 27622-8020

Or Fax to 1-866-844-1382

AND to:

DMH/DD/SAS

3012 Mail Service Center

Raleigh, NC 27699-3012

Or Fax to 919-508-0968

AND to:

The LME (**send information to your assigned Service Analyst**)

Please refer to Implementation Update #70 dated March 1, 2010 for more detailed information regarding when notification is required and the information that must be provided:

<http://www.ncdhhs.gov/mhddsas/servicedefinitions/servdefupdates/update70/dmadmh3-1-10update70.pdf>

⇒ **Please Note:** Providers need to ensure when releasing confidential consumer information that the recipient of the information is aware of the following:

PROHIBITION AGAINST RE-DISCLOSURE

10A NCAC 26B .0304(a)

Agencies disclosing confidential information pursuant to G.S. 122C-52 through G.S. 122C-56 shall inform the recipient that redisclosure of such information is prohibited without client consent.

10A NCAC 26B .0304(b)

A Stamp may be used to fulfill this requirement.

⇒ **CHOICES IN RECOVERY II – Live Your Life Well – Achieving Wellness & Recovery at**

The Park (formerly the Charlotte Merchandise Mart), Freedom Hall – AA Rooms, 800 Briar Creek Road, Charlotte, NC 28205 - Friday, May 7, 10:00am – 2:00pm.

Please see attached flyer for more information.

Mecklenburg Area MH/DD/SA Services

PROVIDER HOT SHEET

April 30, 2010

PROVIDER COUNCIL REMINDERS AND UPDATES

- ⇒ **Provider Council Minutes** for the Executive Board, General Membership and Committees are published and available on-line at the following website:
<http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/MPCouncil.htm>
- ⇒ **Provider Council Sub-Committees** – Four standing subcommittees have been formed by the Provider Council. If you are interested or want more information, please contact the committee chairs. The four 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, arsrightchoice@therightchoicemwm.com.
 - > The next scheduled meeting is Wednesday, May 19, 2010 at 9:00 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 will meet on Wednesday, May 19, 2010 at 12:00 PM to 1:30 PM in the Carlton Watkins Center Multipurpose room.
 - **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.
 - ◆ Frankie Tack (Co-Chair), Anuvia Prevention and Recovery Center, Inc., 704-927-8789, frankie.tack@anuvia.org.
 - ◆ Miranda Little (Co-Chair), Family Preservation, Inc., 704-344- 0491, MLittle@fpscorp.com
 - >The next meeting will be on Wednesday, May 19, 2010 at 1:30 PM in the Carlton Watkins Center Multipurpose Room.
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IMPORTANT REMINDERS AND RESOURCES

- ⇒ **Save the Date: Friday, May 21, 2010, Marshall Park, 1:00 – 3:00 PM** – Rally to Support Individuals with Mental Illness, Developmental Disabilities and Substance Abuse needs. This is the 2nd annual rally and a Call to Action: We Need Your Help. Calling all service providers, public agencies, faith organizations, consumers, family members, advocates and general public to come and attend the Rally to:
- **Help Raise Public Awareness**
 - **Provide helpful Information/Literature**
 - **Build Partnerships**
 - **Reach out to the Community**
 - **Support Individuals in Recovery**

-To be a community that supports individuals and families who are fully empowered to lead healthy and independent lives.-

Mecklenburg Area MH/DD/SA Services

PROVIDER HOT SHEET

April 30, 2010

- **A short walk will follow the Rally as a show of Unity
Please see attached flyer for more information.*

⇒ **National Children's Mental Health Day - WANT TO SHARE YOUR INFORMATION ON MAY 6th?**

MeckCARES, WTVI, the Junior League of Charlotte and other community partners will host a special Ask Me How I Am event from 5:30-8:00 pm at the Great Aunt Stella Center at 926 Elizabeth Avenue to honor youth and families in Mecklenburg County. Please join us! RSVP: to (704) 371-8855.

Also, if you are interested in having your information and resources made available to attendees during the vendor fair/reception portion from 5:30-6:00 pm, please contact Charmaine Carter at 432-0698. *Please see attached memo for more information.*

EDUCATION AND TRAINING OPPORTUNITIES

- ⇒ **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://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/Provider+Resources/training.htm>
- ⇒ **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.

WEB RESOURCES

- ♦ **NC DIVISION OF MH/DD/SAS:** <http://www.ncdhhs.gov/mhddsas/>
- ♦ **MECKLENBURG AMH:** <http://mentalhealth.charmeck.org>
- ♦ **AMH BEST PRACTICES COMMITTEES AND SCHEDULE:**
<http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/BestPractice.htm>

Mecklenburg Area MH/DD/SA Services

PROVIDER HOT SHEET

April 30, 2010

- ♦ **HOT SHEET ARCHIVE:**

<http://www.charmeck.org/Departments/Area+Mental+Health/For+Providers/Provider+Resources/Provider+Hot+Sheets.htm>

NC-IRIS

Incident Response Improvement System

The new web based incident reporting system, NC-IRIS, will be implemented on May 1, 2010. NC-IRIS will be ready to receive and process incident reports on this date. The web site address for connecting to NC-IRIS is: <https://iris.dhhs.state.nc.us>. This site will not be available for use before May 1, 2010.

Providers who have been trained to use NC-IRIS are required to begin submitting incident reports through NC-IRIS on May 1, 2010. Providers who have not been trained to use NC-IRIS are requested to contact their LME for training so that they can begin using the new incident reporting system as soon as possible.

Effective July 1, 2010, all MH/DD/SAS providers who are required to participate in the DHHS incident reporting system shall be required to use NC-IRIS. Providers should contact their LME if they have questions about this new system.

Due to the many functions built into NC-IRIS, the system is very sophisticated; errors may occur during the start-up phase. All providers are asked to report to their LME any errors that occur and any problems they encounter.

The providers who submit incident reports through IRIS are not required to submit paper copies. They are expected to submit their incident reports through IRIS only.

Providers who do not begin submitting incident reports through NC-IRIS on May 1, 2010 are to continue submitting paper copies of Level II reports to their LME and continue submitting Level III reports to their LME and the DMH/DD/SAS QM office (fax number 919-508-0986). Providers are to also continue to submit the paper incident reports to other entities as needed (the DHSR Health Care Personnel Registry and the DHSR Complaint Intake Unit, etc.). These providers are to use the newly revised paper reporting form, Form QM02, Effective October, 2004, Revised 04/27/2010. This form may be found at <http://www.ncdhhs.gov/mhddsas/statspublications/manualsforms/index.htm> under INCIDENTS.

NOTE: Effective July 1, 2010, the use of *DHHS Incident and Death Report*, form QM02 will be discontinued.



MECKLENBURG COUNTY
Area Mental Health, Developmental Disabilities and Substance Abuse
Sam Billings Center
Provider Relations and Support
429 Billingsley Rd., Charlotte, NC 28211-1098

Date: April 30, 2010

To: Child/Adolescent Providers

**Re: REQUEST FOR PROPOSAL (RFP) –DEPARTMENT OF SOCIAL SERVICES &
MECKLENBURG AREA MENTAL HEALTH – [Mental Health Services for Children and Youth in Custody Treatment Continuum](#)**

Mecklenburg County Area MH/DD/SAS Authority (AMH), along with Mecklenburg County Department of Social Services/Youth and Family Services Division (YFS), would like to identify two qualified service providers for specific child/adolescent services for the children and youth in YFS custody. The purpose of this Request for Proposals (RFP) is to select providers who will commit to a collaborative partnership with both agencies and have available a comprehensive continuum of services and supports able to meet the mental health or substance abuse needs of children and youth who have been taken into custody.

A continuum of residential and non-residential services is a critical need for this population of focus in order to provide planned and immediate alternatives to inappropriate or unnecessary use of detention, hospital admissions or higher levels of residential care. While System of Care (SOC) principles provide a general framework for service provision, Wraparound is the standard for implementation of services within this framework. The continuum of services must minimally include Comprehensive Clinical Assessments, Crisis Assessments, Outpatient Therapy, and Community Support/Case Management. There should also be a demonstrated partnership with residential providers such as Therapeutic Foster Care/Therapeutic Family Services, Rapid Response Homes, and Level III Residential if these services are not provided directly by the applicant agency.

INITIAL & KEY ACTIVITIES TO SUCCESSFUL IMPLEMENTATION:

- ◆ Recruitment of interested, qualified and committed staff;
- ◆ Completion of training through the MeckCARES Training Institute ;
- ◆ Coordination of all consumer systems utilizing a Wraparound Approach based upon System of Care Principles;
- ◆ Proactive crisis planning and the ability for immediate crisis assistance;
- ◆ Timely and efficient access to service on an as needed basis 24 hours/day, seven days per week.

EXPECTED OUTCOMES

- ◆ To promote symptom stability for a child or youth with serious emotional disturbance and his/her family;

AMH/YFS MENTAL HEALTH SERVICES FOR CHILDREN/YOUTH IN CUSTODY

- ◆ Work collaboratively with YFS to ensure permanency and stability of the children and youth served;
- ◆ Diversions from unnecessary and repetitive detention, hospital and/or ineffective residential treatment placements;
- ◆ When appropriate, reduce family stress; enhance family coping abilities; improve attitudes toward the individual with special needs;
- ◆ Strengthen the family's ability to care for their family member at home if appropriate and safe;
- ◆ Opportunity for Child and Family Teams to assess child and family needs to successfully return and maintain the child in his/her home and community if appropriate and safe.

PROVIDER REQUIREMENTS AND SUPERVISION

The provider must meet minimum staffing and supervision requirements and adhere to published service definitions as stated by the Division of Medical Assistance in the Clinical Coverage Policies for each service provided.

MINIMUM EXPECTATIONS FOR PROVIDER AGENCY:

- a) Represent Mecklenburg County's interest in overall care of the child's mental health needs. Making decisions that involve the coordination and implementation of planning for a child's therapeutic care. Coordinate the implementation of the child's access to services that are within the PROVIDER AGENCY service array.
 - will make an assessment of the child's needs.
 - will work with the Child and Family Team (QP, YFS Social Worker, Court Counselor, Service Providers, and any other Natural Supports for the Child, i.e., Coach, Family), GAL, Council for Children, etc.) to develop person centered plan within all established timeframes.
 - will be responsible for coordinating and ensuring the implementation of and monitoring the Person Centered Plan (PCP).
- b) Participate with the local educational authority (CMS) related to appropriate educational services, i.e., IEP attendance or participation, educational advocacy, and problem solving educational issues, etc.
- c) Arrange access to needed mental health services as required by the Person Centered Plan (PCP). Participate in Child and Family Team meetings on behalf of the child with the legal guardian, other agencies and the child's family (as appropriate per YFS).
 - will develop an individualized PCP by working with the Child and Family Team.
 - will be responsible for monitoring and evaluating services called for in the PCP.
 - will be responsible for ensuring communications with team members regarding progress being made in the PCP.
 - will ensure required documentation is complete and accurate and submitted in a timely fashion to facilitate treatment implementation.
- d) Take the lead to create an interim Mental Health plan and work continuously with the YFS worker to secure and implement that interim Mental Health plan, if a situation arises where the PCP calls for a specific mental health intervention and that intervention

AMH/YFS MENTAL HEALTH SERVICES FOR CHILDREN/YOUTH IN CUSTODY

- is not immediately available. Should the unavailable intervention involve a therapeutic placement, PROVIDER AGENCY will work continuously with YFS to assure that the interim plan meets the requirements for the appropriate level of care. The responsibility for the interim plan will remain with PROVIDER AGENCY; however, the plan will require YFS collaboration and support. Monitoring of the interim plan will occur routinely with documented evidence and follow-up to YFS. Service gaps and service access issues will be documented and sent to the Director of System of Care at AMH.
- e) Actively monitor each child's case to ensure that services are being provided that best meet the child's needs, according to the PCP. Maintain contact with the child, family, providers and other team members per agency standards.
- will be responsible for the ongoing assessment, monitoring and evaluation of each child's case and will make appropriate referrals when consumer needs exceed the PROVIDER AGENCY'S capacity, inclusive of clinical home responsibilities.
 - QP will include a monthly face-to-face meeting with the client; except when the consumer is placed out of county and it is agreed upon by the Child and Family Team that a monthly face to face meeting is not required.
 - will model open and honest communication with proactive problem solving as an end result.
 - will comply with the documentation requirements.
 - will ensure the Child and Family Team plans for adequate support for consumers in treatment awaiting authorization for higher levels of care.
- f) Provide crisis assessment, referral and assistance when therapeutic crisis situations arise. Arrange therapeutic placement, if necessary, to meet the child's treatment needs. Will facilitate pre-crisis planning on each case with identified Child and Family Team members.
- will develop a crisis plan for each child with the assistance of the Child and Family Team.
 - will assist with crisis intervention, as needed.
 - will facilitate therapeutic placement if disruption occurs.
 - will follow-up and monitor crisis plan to ensure that resolution of any crisis occurs.
- g) Maintain active communication with interagency team members related to the child's ongoing treatment needs by attending meetings, by notifying providers of treatment plans, making contact according to the agency standards, etc.
- QP will act as the lead for the treatment team.
 - QP will be responsible for ensuring timely Child and Family Team meetings, treatment plan development and Court reports.
 - QP will ensure that all team members are kept informed and given an opportunity to participate in the treatment planning process.
 - QP will comply with the documentation requirements.
- h) Will submit required Court reports to the YFS social worker or YFS attorney five days

AMH/YFS MENTAL HEALTH SERVICES FOR CHILDREN/YOUTH IN CUSTODY

prior to Court for all normal reviews and twelve days prior to Court for Permanency Planning Hearings. Actual report submission dates, especially if early, should be discussed in the Child and Family Team meetings to ensure that reports are attached and submitted together. It is the expectation that PROVIDER AGENCY staff that have knowledge of and can speak to treatment progress and the Person Centered Plan will attend all Court Hearings or ensure coverage when unable to attend.

- QP has lead responsibility to ensure treatment recommendations are available as outlined in Court reports.
 - QP will provide written Court reports for all Court hearings, using the approved Court report form and will attach the clinically approved plan.
 - As the clinical home, PROVIDER AGENCY has the responsibility to ensure that a provider has been approved by the LME to deliver services to Mecklenburg County residents prior to making a referral. If the provider is not on the LME Provider Directory, PROVIDER AGENCY will consult with their assigned Service Analyst before making the referral.
 - QP will provide current clinical information to the Courts that will include the child's progress/regression in treatment, discharge plans and barriers to effective treatment.
- i) Will collaborate and share information by presenting Child and Family team recommendations and advocate on behalf of the Child and Family team. YFS will share full and complete information regarding the child with PROVIDER AGENCY.
- QP will recognize YFS as the legal decision maker for the child.
 - QP will work with YFS to determine the role of the Family in the planning process.
 - QP (in conjunction with Licensed Supervisors & Licensed Psychologist) will take the lead in guiding the Child and Family Team with making clinically appropriate requests.
 - QP will be responsible for advocating the Child and Family Team recommendations in all venues.
- j) Will work with the Child and Family team to ensure that the child's clinical needs are met. Has a lead role in negotiations when clinical conflicts arise between providers, i.e., differing recommendations. If PROVIDER AGENCY is informed by the LME that a provider has violated a contractual or MOA requirement, they will work with the Child and Family Team to ensure that the consumer's needs are met with another provider or other community resources. When there are differing recommendations, the Child and Family Team will follow the united & treating clinician recommendation (psychologist, psychiatrist, therapist, etc).
- QP will be responsible for ongoing assessment, monitoring and evaluating therapeutic services.
 - QP will serve as primary mental health contact for the provider of care.
 - QP in conjunction with their clinical supervisor will determine conflict resolution around any clinical issues in a proactive way.

AMH/YFS MENTAL HEALTH SERVICES FOR CHILDREN/YOUTH IN CUSTODY

- k) Facilitate the admission process to therapeutic placements to ensure the mental health needs of the child(ren) are met, to develop treatment goals and begin discharge planning in accordance with policy.
- QP will assume the lead in arranging therapeutic placement.
 - QP will complete or coordinate assessment, referral, admissions and discharge processes.
 - QP will ensure comprehensive treatment plan is provided to the service provider – that outlines the goals for the particular treatment intervention.
- l) Notify YFS about needs and/or problems with any child, as soon as they are identified (prior to placement disruption), so that treatment needs can be evaluated and addressed.
- QP will be responsible for ongoing assessment of treatment needs and intervention for clients.
 - QP will ensure timely effectively communications with all team members.
 - QP will immediately notify the legal guardian when problems are identified.
 - QP will discuss any placement changes with the legal guardian prior to any moves being made.
 - QP will ensure notification to the YFS Worker so Court can be notified of placement changes.
- m) Facilitate joint Child and Family Team meetings with guardians and/or family and community partners to present collaborative sharing of information. YFS will communicate relevant case decision information when applicable (i.e. why a biological family member cannot participate in a Child and Family Team meeting; why a biological family member can't have visitation; if a biological family member is arrested). Depending on the sensitivity of the information, it may be shared at the unit supervisor's level.
- YFS Social Worker will make information available to PROVIDER AGENCY QP available as appropriate for the needs of the child. If abuse and investigative information is requested, the YFS Social Worker must clarify with his/her supervisor as to what information can/will be released.
- n) Attend Child and Family Team meetings routinely and actively participate in the planning process. Routinely encourage family and community partners' participation in treatment planning, unless otherwise indicated.

DOCUMENTATION REQUIREMENTS

Provider agencies must follow Medicaid and licensure documentation requirements for all levels of service provided. Minimum documentation is an event service note that describes the purpose of contact, any provider interventions, and the impact of such.

AMH/YFS MENTAL HEALTH SERVICES FOR CHILDREN/YOUTH IN CUSTODY

FUNDING

- ◆ All children and youth in the custody of YFS have Medicaid and all services provided must be preauthorized by and billed to Value Options with the exception of Therapeutic Foster Care which is billed through AMH and Rapid Response Homes, which are authorized by AMH;
- ◆ No start up or supplemental funds are available in connection with this RFP.

REQUEST FOR PROPOSAL

Mecklenburg AMH would like to identify two qualified providers from among currently endorsed LME service providers to provide services as described. Interested providers should submit a plan in response to this RFP in accordance with the following requirements.

THE PROPOSED PLAN SUBMITTED MUST INCLUDE:

- A. A brief description of the agency's proposed plan, principles and approach to accomplish the expectations identified in this RFP including a description of how to ensure positive and collaborative working relationships with both AMH and YFS;
- B. A brief description of the agency's experience with this population and relevant services;
- C. A brief description of proposed service delivery strategies;
- D. A brief description of ability and intentions to adhere to Minimum Requirements;
- E. Qualifications (resume or curriculum vitae) of the person(s) in the organization who will have primary responsibility for service implementation and supervision;
- F. Credentials and experience of staff that will provide services;
- G. Proposed Budget;
- H. Current audited Financial Statement;
- I. Scoring Criteria are attached at the end of this RFP;
- J. Text should not exceed **10 double-spaced pages using a minimum 12 pt. font**. Additional pages for addenda may be attached. **All pages must be numbered;**
- K. Each section must be **tabbed and labeled;**
- L. Please prepare eight (8) copies of your proposed plan and submit them in soft binders.

REVIEW:

- ◆ A Technical Review Team will score proposals based on the attached Review Criteria. Those proposals judged to meet all technical criteria and capability to provide services as described will be forwarded to the Consumer and Community Review Team.
- ◆ A Community and Consumer Review made up of parents, consumers, advocacy agencies and professional from the community will review proposals judged to meet technical criteria. This team will make recommendations to the Consumer and Family Advisory Committee (CFAC).
- ◆ Final recommendations will go before the CFAC for approval and recommendations.
- ◆ The Area Director will have final responsibility for selection of the provider.

TIMELINE

- ◆ Information Session Wednesday, May 5, 2010
4:00-5:00 PM, 429 Billingsley Rd., Charlotte, NC
(RSVP to Francesca.morgan@mecklenburgcountync.gov)
- ◆ Proposal Due Date Friday, May 21, 2010
- ◆ Technical Review Completed Tuesday, June 1, 2010
- ◆ Consumer and Community Review completed Friday, June 11, 2010
- ◆ CFAC Review and Recommendation Thursday, June 17, 2010
- ◆ Final Decision Announced Friday June 18, 2010

AMH/YFS MENTAL HEALTH SERVICES FOR CHILDREN/YOUTH IN CUSTODY

◆ Contract and Service Implementation

Thursday July 1, 2010

CONTACT INFORMATION:

Proposed plans must be received by end of the business day (**5:00.p.m.**) on **Friday, May 21, 2010** and sent to:

Kimm Campbell

704-432-0695

Carlton Watkins Center

3500 Ellington St.

Charlotte, NC 28211

kimm.campbell@mecklenburgcountync.gov

Please contact me by email or phone if you have any questions or need additional information.
Sincerely Yours,

Kimm Campbell, MSW
Director MeckCARES & Forensic Evaluations
Area Mental Health

REVIEW CRITERIA

Criterion 1: Experience and Capability (20 Points)

1. The proposal lists verifiable experience with projects or contracts (most recent five years) that exemplify direct provision of services for the population to be served. (5 points)
2. Program implementation track record - the proposal offers evidence of prior success at implementing these types of services for the specific target population(s). (5 points)
3. The proposal describes and demonstrates a commitment to quality of services to youth in a System of Care framework with a commitment to fidelity. (5 points)
4. The proposal describes a detailed plan for maintain positive and collaborative working relationships with AMH and YFS. (5 points)

Criterion 2: Technical Approach (10 Points)

1. The application contains the required elements. (5 points)
2. Proposal demonstrates an understanding of services provided using the Medicaid Service definitions as described in the RFP. (5 points)

Criterion 3: Program Implementation and Management (20 Points)

1. The proposal demonstrates a commitment to provide evidence based services and interventions within a System of Care framework, including a commitment to utilize the Wraparound approach to service delivery planning and implementation. (10 points)
2. The proposal provides a clear program implementation plan and time-line. (5 Points)
3. The proposal demonstrates a commitment to service delivery in the least restrictive, least costly means possible. (5 points)

Criterion 4: Staffing, Supervision and Training (20 Points)

1. The proposal describes services provided by well-qualified, well-trained and appropriately supervised staff with required qualifications to provide the services specified. (10 points)
2. The proposal describes how funding will be utilized to implement service delivery. (10 points)

Criterion 5: Budgetary Plan (30 Points)

1. The proposed expense budget is commensurate with the level of effort needed to provide the services outlined in the proposal and is within the grant amounts specified in the RFP. (7 points)
2. The proposed revenue budget is commensurate with the level of income that is needed to provide the service outlined in the proposal. (7 points)
3. The proposed expense budget is consistent with current budget allocations and requests no additional funds from the AMHA. (6 points)
4. The agency's audit and/or financial statement(s) exhibit financial stability. (10 points)



MECKLENBURG COUNTY
Area Mental Health, Developmental Disabilities and
Substance Abuse

MEMORANDUM

DATE: April 22, 2010
TO: LME Contract Providers
FROM: Jean-Claude Toussaint, Jr.,
Fiscal Administrator
SUBJECT: Year-End Date for submitting invoices and claims

The purpose of the memo is to ensure that the LME receives all of your invoices and claims for State & County funded services within a timely manner.

We strongly encourage your agency to submit all invoices and claims and bill us no later than May 17, 2010 for all contracted services that were provided July 1, 2009 through April 30, 2010. July 5, 2010 is the deadline for submitting invoices and claims for all services rendered and expenditures incurred through June 30, 2010.

Additionally, as we approach the end of the fiscal year, we will be making decisions about allocations for Fiscal Year 10/11 contracts. One of the criteria we use is utilization during Fiscal Year 09/10. Therefore, it is imperative that your reporting and billing to us be current. If you have questions about your billing or payments, please consult your assigned fiscal analyst for assistance.

Thank you for your cooperation.

cc: Carlos Hernandez, Deputy Director
Julie Daughety, Sr. Fiscal Administrator
Dennis Knasel, Sr. AMH Manager
Martha Joslin, Director of Utilization Management
Kimm Campbell, Director, MeckCARES SOC & Forensic Evaluations
Angie Jackson, Provider Relations and Support Manager
Kimberly Alexander, CAP-MR/DD Provider Network Manager
AMH Financial Services

PEOPLE • PRIDE • PROGRESS

429 Billingsley Rd, 2nd Floor • Charlotte, NC 28211-1098 • 704-336-2550 • Fax 704-432-0145

Director
704-432-0695

Assistant Director
704-336-4757

Clinical Supervisor
704-432-5539

Enrollment Coordinator
704-336-4757

SOC Coaching Coordinator
704-432-5539

Resource Development Coordinators
704-432-0698
704- 432-4567

Administrative Support
704-432-4592

Training Coordinator
704-432-0986

Public Information Specialist
704-336-3793

MeckLINK
704-336-6404

April 9, 2010

Dear Provider Agency:

On May 6, 2010 Mecklenburg County will recognize National Children's Mental Health Awareness Day. MeckCARES, in partnership with WTVI, Teen Health Connection, The Junior League of Charlotte and others, will host a community event.

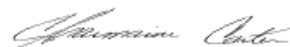
This is the 4th. Year that MeckCARES and community partners will host an awareness event, to provide mental health related education, information and resources to the community. Each year we have a large representation from families who are living with a child that has mental health challenges. This year many of those same families have agreed to provide the audience with firsthand testimonials about their personal experiences. We will also hear from Ms. North Carolina. In addition, we expect to have a panel of experts to answer questions from the audience as well as enjoyable entertainment.

We want to invite you to partner with us by providing promotional items that can be used as give-a-ways and door prizes for the event. It would be extremely helpful if you have items that would appeal to youth as well as adults. If you do not have promotional items, we would encourage you to consider purchasing one or two large items to be given away as a door prize in recognition of your agency. This is an excellent opportunity for you to support this event while gaining exposure for your agency.

Please do not miss this opportunity. Together, we can deliver vital resources and information to help improve outcomes for children and families who struggle with mental health challenges.

Thank you for your thoughtful consideration.

Sincerely,



MeckCARES, Resource Development Coordinator



Our community; coming together for families

Ask Me How I Am

Thursday, May 6

National Children's
Mental Health
Awareness Day

- 5:30pm** Food and Entertainment
6:00pm Special Sneak Preview Screening –
PBS documentary
Misunderstood Epidemic
6:15pm Screening of *In Our Words*
and Family Discussion

Special Guest: Miss North Carolina

Great Aunt Stella Center
926 Elizabeth Avenue, Charlotte, NC 28204

FREE event • ALL ages welcome • Door prizes & gifts!

PLEASE RSVP to (704) 371-8855 • www.wtvi.org

Sponsored by:





CHOICES IN RECOVERY II
Live Your Life Well – Achieving Wellness & Recovery
 at The Park (formerly the Charlotte Merchandise Mart)
 Freedom Hall – AA & BB Rooms
 800 Briar Creek Road, Charlotte, NC 28205
 Friday, May 7th - 10:00am – 2:00pm

A FREE educational program – the second in a series – to help you understand mental illness and recovery. The day will include a keynote presentation by *Dr. Michael Fuller from the University of Texas*, as well as presentations by consumers who will share information about achieving wellness. Participants will select breakout sessions at time of registration.

Selections for breakouts include: (1) Is Recovery Possible? (2) Mentoring for Peer Success (3) Practical Steps to Wellness (4) Creative Arts: Using Creative Arts to Support Recovery.

Community resources will be on hand; a boxed lunch will be served; and **MUCH MORE!**

Space is limited and reservations are required.
 For more information or for reservations contact:
 Kathryn Falbo-Woodson at 704-365-3454 or
 Email kfalbo-woodson@mhacentralcarolinas.org





“BE THE BRIDGE”

RALLY

To support individuals with Mental Health, Developmental Disabilities & Substance Abuse needs

Sponsored by the Provider Council of Mecklenburg

**Friday, May 21st, 2010
Marshall Park (800 E. Third Street)
downtown Charlotte
1:00 - 3:00pm**

Call to Action: We Need Your Help

Calling all service providers, public agencies, faith organizations, consumers, family members, advocates and general public to come and attend the Rally to:

- **Help Raise Public Awareness**
- **Provide helpful Information/Literature**
- **Build Partnerships**
- **Reach out to the Community**
- **Support Individuals in Recovery**

**A short walk will follow the Rally as a show of Unity*

For Additional Information Please Contact:

Tim Holland: Phone: 704-319-7609
Ellis Fields: Phone: 704-365-3454
or email us at bethebridgemeck@yahoo.com

**Come and Join Us as We
Build Bridges to Community Resources**

Visit us on line at bethebridgemeck.org

BE THE BRIDGE RALLY UPDATES

- **Vendors**: This year we will have vendors set up under tents at booths to pass out information/literature about the programs, services, etc. they provide. Already we have over 30 provider/agencies committed. Time is running out. If you have not signed up and still would like to be a vendor please complete the attached “Vendor Reservation” form and mail **no later than Monday, April 26th** (we have to receive them no later than April 29th). Cost is \$75 for space rental.
- **Participant/Consumer Rally Speakers**: We need to identify a couple of participants who would be willing to speak at the Rally and share their story of Recovery and/or self determination. If you have someone from your agency that you would like to nominate, please complete and fax the attached “Consumer Rally Speaker Nomination” form to Tim R. Holland at 704-567-8735 no later than by Wednesday, April 21st, 5pm.
- **Be the Bridge Rally T-Shirts**. This year we will be ordering Rally t-shirts. If your agency would like to order t-shirts for your staff and/or participants, please fill out the attached Rally T-shirt Order form. The t-shirts will be purple with yellow and blue lettering, front and back. We will have men and women’s styles and sizes. T-shirts are \$10 a piece and **we must receive your order along with your check no later than Tuesday, April 27th**.
- **Next Planning Subcommittee meeting** – Thursday, April 22nd, 12:00 – 1:30pm at 5700 Executive Center Drive, second floor conference room (bring your own lunch).

This year is going to be a great Rally. Please support this cause by helping us to get the word out by inviting all your staff, consumers and their family members, advocacy groups, support groups, other human service providers, neighbors, faith based organizations, private businesses and government officials. Remember – there is power in numbers.

For additional information please contact Tim Holland (704-319-7609) or Ellis Fields (704-365-3454) or email us at bethebridgemeck@yahoo.com

“Be the Bridge”

Vendor Reservation Agreement Form

Date: May 21, 2010

Time: 1:00 - 3:00pm

Location: Marshall Park (downtown Charlotte)

Agency/provider name: _____
(please print legibly)

Contact person: _____

Contact person phone #: _____

Contact person's email: _____

This is my confirmation that my agency will be a vendor at the “Be the Bridge” Rally at Marshall Park, May 21, 2010. Enclosed is my check for \$75.00 that is required of all vendors to secure their reservation.

Signature

Date

Please mail/make the check out to the agency/location listed below;

Make checks payable: The MHA Central Carolina
(earmarked: “Be the Bridge Rally”)

Amount: \$75.00

Mail check to: The MHA of Central Carolinas
c/o Be the Bridge Rally
3701 Latrobe Dr., Suite #140
Charlotte, NC. 28211

“Be the Bridge” Rally
Consumer Speaker Nomination Form

Agency/provider name: _____
(Please print legibly)

We would like to submit the name of _____
to be considered as a consumer speaker at this year’s “Be the Bridge” Rally.

Please list below the reasons you think this individual would make a good speaker:

What examples can you provide of how this individual is involved in either making or crossing “bridges” in their own recovery or self determination:

***Please feel free to attached additional pages if needed**

Contact person: _____ phone #: _____
(person making the nomination)

Contact person’s email: _____

Please fax your nomination form to Tim Holland, c/o PCP, at 704-567-8735 no later than Wednesday, April 21st, 5pm.

Don’t forget to obtain a release of information from the consumer to be nominated. Thanks.

“Be the Bridge”

T-shirt Order Form

Agency/provider name: _____
 (please print legibly)

Contact person: _____

Contact person phone #: _____

Contact person’s email: _____

I would like to place an order for the “Be the Bridge” Rally t-shirts. The number of t-shirts and sizes I need to order are listed below. I have also enclosed my check for the total cost. (Note: All sizes are considered “true fit” and are Hanes 100% preshrunk cotton. The woman sizes are for ladies who do not want the bulky fit of a unisex sized t-shirt).

Adult Women Sizes					Total	Unisex Sizes					Total
S	M	L	XL	XXL		S	M	L	XL	XXL	

Total number of t-shirts ordered _____ x \$10.00 = _____ (total amount)

***Please be aware that no t-shirts can be ordered without prior payment. Also, once the t-shirts have been ordered there can be no changes made to the order.**

All orders and payments must be received no later than Tuesday, April 27th. No exceptions. Please allow a couple of days if submitting your order by mail. Orders may also be dropped off at the locations listed below.

Make all checks out to: **The MHA Central Carolinas**
 (earmarked: “Be the Bridge Rally” t-shirts)

Mail all t-shirt order forms to: The MHA of Central Carolinas
 c/o Be the Bridge Rally
 3701 Latrobe Dr., Suite #140
 Charlotte, NC. 28211

Drop off orders: The MHA of Central Carolinas
 Mon – Fri/8am – 5pm 3701 Latrobe Dr., Suite #140
 (two locations) Charlotte, NC. 28211

or Person Centered Partnerships
 5601 Executive Center Drive
 Suite 201
 Charlotte, NC. 28212