

APPLICATION
for
AUTHORIZATION
to provide
Alcohol and Drug
Education Traffic School
(ADETS)
for
DWI OFFENDERS

Application for ADETS Services

(Revised 03/14/11)

Office of DWI Services
Justice Systems Innovations Team
Community Policy Management Section
NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services
3008 Mail Service Center
Raleigh, NC 27699-3008
919-733-0566
FAX: 919-508-0963

<http://www.ncdhhs.gov/mhddsas>

PACKET CHECKLIST

APPLICATION PACKET: Place an "x" in each box as you complete each step toward submission of your ADETS application.

- Copy of NCSAPPB Credential for all ADETS staff
- Copy of ADETS Instructor Certificate for all ADETS staff (if applicable)
- Facility Affirmations and Stipulations
- Letter of Intent

Send the application packet via mail or fax to:

Department of Health and Human Services
Division of MH/DD/SAS
Office of DWI Services
3008 Mail Service Center
Raleigh, NC 27699-3008

Fax: 919-508-0963

ADET School Application

A. General Information

MHL #: _____ Exp. Date: _____
(if applicable)

DWI Facility Code: _____

Facility Name: _____

Contact Person for ADETS: _____ Email: _____

Phone: _____

Fax: _____

B. Service Provision- non-English speaking clients

Do you provide ADETS services for non-English speaking clients? Yes No

If **yes**, per 10A NCAC 27G .3816, please list all direct care staff name(s) and include a copy of their NCSAPPB credentials (certificate) and ADETS Instructor Training Certificate.

If **no**, please list the ADET schools where non-English speaking clients will be referred.

B. Staffing

Certified ADETS Instructor(s):

ADETS Instructor (Name, Credentials): _____

ADETS Instructor (Name, Credentials): _____

X _____
Signature/Credentials: (ADETS Instructor) Date:

X _____
Signature/Credentials: (Clinical Director) Date:

Remember to include copies of NCSAPPB credentials and ADETS Instructor Certificate for all ADETS staff.

LETTER OF INTENT TO PROVIDE: Alcohol and Drug Education Traffic School (ADETS) Guidelines and Template Letter

As Per **General Statute 122C-142.1 (a)** *before a private facility located in this State provides the substance abuse services needed by a person to obtain a certificate of completion, the facility shall notify both the designated area facility for the catchment area in which it is located and the Department of its intent to provide ADETS and shall agree to comply with the laws and rules concerning these services that apply to area facilities.*

This letter of intent shall be addressed to the Local Management Entity (LME) in your catchment area.

The letter should include information about your facility, your mental health license number, location, contact information, administrative director, clinical director, and the specific DWI services that you propose to offer as indicated in item B. on the application.

Items to be included in your letter of intent are as follows:

- 1) Purpose
For example: *"The purpose of this letter is to inform you of the intent of this facility to provide substance abuse services to DWI offenders in the specified catchment area listed below. Information pertaining to this facility is as follows:"*
- 2) Physical address, phone, and fax number of your facility
- 3) Mental Health License number (if applicable)
- 4) Population being served
- 5) Type of service being provided (ADETS)
- 6) Hours of operation
- 7) Names of the Administrative and Clinical Directors of the facility
- 8) Names of ADETS Instructors (if applicable)
- 9) Signature of Clinical and/or Administrative Director(s)

FACILITY AFFIRMATIONS AND STIPULATIONS

ADETS Providers Only

I agree to provide Alcohol and Drug Education Traffic School in accordance with **General Statute 122C-142.1** and Rules for Mental Health, Developmental Disabilities and Substance Abuse Facilities and Services **10 NCAC 27G .3800** including, but not limited to, the following:

- A. Being an authorized provider of substance abuse services to Driving While Impaired offenders;
- A. Offering the curriculum established by the Commission and complying with rules adopted by the Commission;
- B. Providing a properly qualified instructor in each class in accordance with statute and rules above;
- C. Remitting to the Division ten percent (10%) of each fee paid by a person who attends the ADET school on an annual basis;
- D. Notifying the designated LME (for the catchment area in which ADETS is located) of its intent to provide ADETS services with a copy of this notification sent to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services.

X

Signature/Credentials: (Clinical Director)

Date:

Name/Credentials/Title:

X

Signature/Credentials: (Administrative Director)

Date:

Name/Credentials/Title: