

Adventure House Referral Fact Sheet

Required for referral:

- ✓ Adventure House Referral (You may copy as many as you need)
- ✓ If you are a Behavioral Health Provider, please include an updated copy of the Diagnostic Assessment/CCA to support Medical Necessity and an updated PCP that has PSR as a goal.

Screening Criteria:

- ✓ 18 years of age or older
- ✓ Primary diagnosis of mental illness
- ✓ No active substance abuse
- ✓ No history of random violence

Please complete the section above the dotted line on the referral form. Please note that a MD or NP signature are required for this form to be accepted by Adventure House.

You may fax, mail or drop off the referral to Lavonda Hunter, Program Coordinator at:

*Adventure House
924 N. Lafayette St.
Shelby, NC 28150
Ph. 704-482-3370 Fax. 704-482-3383
LavondaH@adventurehouse.org*

Please understand that each referral is important. You will be contacted upon a decision regarding the referral. The intended process is as follows:

- 1.** Program Coordinator screens the information and makes the reply to the referral source. The Program Coordinator may request that she be able to meet with the perspective member before a decision is made.
- 2.** If the response to the referral is yes, Adventure House orientation staff will contact the perspective member and will coordinate a start date. Typically a Monday is best. Transportation will be worked out between the perspective member and Clubhouse staff. We can make a TACC referral if no other transportation is available.
- 3.** We ask each perspective member to attend at least 2-3 days to get a feel for the Clubhouse before deciding whether to join. A week long orientation is a scary endeavor, but it will be much more informative and productive than someone attending sporadically at first.
- 4.** We ask that perspective members **not** “stop by to see the program” before the screening process has been completed and the individual has been accepted.

*** If you have questions or concerns, please feel free to call.**