



4431 County Home Road
Conover, NC 28613
(828) 256-3436

Fax form to The Cognitive Connection Attention: Renee` Moriarty (828)256-3623

**SCHOOL REFERRAL
Out of School Suspension**

Date of Referral: _____ **School:** _____

School Contact Name: _____ **Fax#** _____

Name of Referral: _____ **DOB** _____

Reason for Referral: _____

Parent/Guardian Name: _____

Address: _____ **City,** _____

Phone: _____ **Cell:** _____

- I understand that I have been referred to Cognitive Connection Corporation for a screening. I agree to call and make an appointment and am seen within 5 days of my referral date. I will follow the conditions and recommendations that have been decided by the screening.
- I consent to communication between the program instructor and the referring school staff/agency for the purpose of the program attendance, notification of completion in lieu of suspension days.
- If I do not comply with the prescribed program I understand this will result in reinstatement of my suspension days.

Student Signature _____

Parent/Guardian _____

Office Use Only

Screening Date: _____ **Attended** _____ **No Show** _____ **Rescheduled** _____

Follow up: Group assignment **PAYC** _____ **Start Date:** _____

Full assessment referral: _____

Provider Signature:



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**Referral Process
Out of School Suspension Policy
Cognitive Connection Corporation**

- 1. Fill out referral form –Fax to Renee’ Moriarty @ 828-256-3623**
- 2. Let parent if available and youth sign form.**
- 3. If parent is not available then they will sign at screening.**
- 4. Parent/student call and schedule date of screening. Parent must accompany student to screening appointment.**
- 5. On date of appointment, the referral form will be given to the student /parent and they are responsible for returning it to the appropriate school official.**
- 6. If further evaluation is needed the recommendation will be documented on this form.**
- 7. Upon completion of recommended program, a letter will be given to the student/parent.**
- 8. If student does not comply with recommendations or does not complete program, referring school will be notified.**



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2016/2017

This year the PAYC (Parent and Youth Connection) class will be offered at **Sipes Orchard Home on County Home Road on Tuesday evenings from 6pm to 8pm.**

- Each youth/family must register by appointment and complete the intake process at Cognitive Connection Corporation prior to attending class.
- The PAYC class continues to be offered at No Charge to the families that attend.
- Each student is required to attend 6 meeting sessions with family members or guardian and pass a drug screen to complete requirements of class.
- If a student is displaying signs of greater need other than prevention, referrals will be made for a full substance abuse assessment, which may include a cost.
- To make an appointment to enroll in the PAYC class contact: Renee' Moriarty at 828-256-3436 ext. 18 or 828-217-4619, evening appointments are made available as needed.

The Parent and Youth Connection (PAYC)

The Parent and Youth Connection (**PAYC**) class is designed to offer substance abuse prevention education to youth ages 12-18 years old in Catawba County. Parents will be provided STEP- Systematic Training for Effective Parenting classes while their youth are receiving the Project Towards No Drugs curriculum. Both curriculums are evidence based and approved by NCDHHS for use in prevention programs.

Cognitive Connection Corporation has funding for this program through a Federal and State Block Grant that offers this program at no cost for the families that participate. This program is a 6 week education program that is continually offered throughout the school year, usually from late September to July of the following year.

We have 1 fully Certified Substance Abuse Prevention Consultant and 2 Certified Substance Abuse Counselors-Registered that teach the classes. We have served an average of 68 families a year for the past 5 years, throughout Catawba County, with a successful completion rate of 89%. Successful completion means attends 6 sessions and has a negative drug screen upon completion. If upon our initial interview or evaluation throughout the prevention services offered our staff determines that the student would not benefit from Prevention strategy and needs more assistance, we will refer youth to a full substance abuse evaluation or other services as needed.

We work with Catawba County Schools, Hickory City Schools, and Newton-Conover Schools for referrals to our program. These youth are referred because they have violated school Alcohol/Drug policy and have been suspended from school for 10 days. If they attend a screening, the required 6 sessions of PAYC with a parent/guardian and pass a drug screen, then the schools will reduce the days of suspension to 5 therefore keeping our youth in school and reducing failure and dropout rate.

We also serve self referrals from families who are dealing with youth who may have violated the home policy on use of drugs and alcohol or families who want to know more about how to prevent their youth from using.

We believe that bringing the family to the table when discussing Drugs and Alcohol is the most effective way of addressing youth and drugs and negative behaviors that youth can display. It can not only increase knowledge, but increase family cohesiveness, build trust and open communication lines to families who are struggling with this issue.

For more information call: Renee' Moriarty at 828-217-4619