

ROCK VALLEY COMMUNITY PROGRAMS, INC.

HOUSING 4 OUR VETS

203 W. SUNNY LANE RD.

JANESVILLE, WI 53546

(608)741-4500

HOUSING 4 OUR VETS

ADMISSIONS AGREEMENT

This admissions agreement shall be completed and signed before or at the time of admission. Agreement and signing of this agreement is required to enter this program. In some instances, a Veteran may have an additional behavioral contract to enter RVCP. This is in place to reduce admission barriers as much as possible while still maintaining a safe community living environment for all Veterans.

Veteran Name: _____

Date of Admission: _____

A. SERVICES: The following services will be provided by Rock Valley Community Programs, Inc. (RVCP) at the level and frequency needed by the Veteran and documented in their Individual Service Plan (ISP):

1. Safe, Sober, Transitional Housing
2. Individualized case management with supportive services (as needs are identified)
3. Substance abuse treatment (if assessed as a need)
4. Assistance in obtaining employment and/or increasing income
5. Development of a Housing Plan with case manager assistance in carrying out plan
6. Increase Veteran's self-determination (as identified in ISP)
7. Assistance in managing medical and mental health needs
8. Transportation (as program is able, to include RVCP staff transports, bus tokens, gas cards)
9. Opportunities for Recreation / Physical activities / Fitness Room
10. Three meals per day
11. Opportunities to have a voice and aid in operating and maintaining the Veterans wing. (House chores & Participation in Veterans' Voice Council and House Meetings)
12. Free, on-site laundry
13. Access, as needed, to clothing closet and hygiene and linen supplies
14. Free cable and wireless internet
15. Use of Computer Lab (unless restricted) and Library
16. Use of outside patio and grilling areas

- B. PROGRAM FEES:** Veterans are required to pay 30% of any income, up to a maximum of \$224.50 per month, in program fees. Veterans with no income will not be responsible for program fees. Failure to pay program fees in a timely manner will result in interventions up to and including termination from the program. There are no additional fees.
- C. PROGRAM PARTICIPATION:** I understand this is a program, not just housing. I understand that I may stay for a maximum time of 24 months as long as I am showing progress towards my goals and am actively participating in required programming. I also understand that I am not guaranteed to remain in the program for the maximum amount of time available if I am no longer in need of transitional housing and supportive services.

Required programming includes:

1. Participation in assigned groups. RVCP groups include, but are not limited to:
 - Cognitive Behavioral Interventions for Substance Abuse
 - Wellness Recovery Action Planning (WRAP)
 - Employment Group
 - Housing Group
 - Individual sessions with case managers and substance abuse counselor
 - House Meetings
 - Various presentations, such as budgeting, credit repair, healthy lifestyles, etc.

2. Financial Responsibility
 - Full disclosure of all income.
 - Obtaining credit report and reviewing with case manager (within 90 days of admission)
 - Budgeting
 - Payment of fines, accounts listed on credit report, and other legal obligations.
 - Savings Plan (including full disclosure of balance with case manager)
 - Payment of Program Fees.

3. Actively participating in achievement of ISP goals
 - Attend weekly case manager sessions and provide input and updates to your ISP.
 - Seek assistance from RVCP staff in any barriers that you find in progressing toward your ISP goals.

- Utilize the available supportive services to obtain your goals.
- Be productive.

4. Cleanliness

- Maintain appropriate personal hygiene (regular showering, wearing clean clothing and changing daily, keeping my laundry done at minimum weekly, including my linens).
- No hoarding is allowed. Excess property will be required to be removed.
- Resident rooms will be kept neat, orderly and clean. RVCP staff will conduct a minimum of weekly room inspections.
- Room refrigerator and kitchenette will be free of expired foods and beverages.
- Compliance with refrigerator temperature daily logs. Reporting temperatures out of recommended range.
- Completion of assigned chore.
- Assistance in keeping all common areas neat, clean, orderly and free of clutter.

5. Medical

- Attend all scheduled appointments, or if unable to attend, cancel appropriately.
- Compliance with all prescription medication(s), including psychiatric medications.

6. Miscellaneous

- Compliance with urine testing and breathalyzer testing, as requested.
- Compliance with daily signature log.
- Compliance with curfew.
- Behavioral contracts may be utilized to address inappropriate behavior as a last option prior to termination from programming.

D. NOTIFICATION OF CHANGES: Any changes in services provided or program fee rate changes will be communicated in writing to all residents.

E. POTENTIAL CONDITIONS FOR PROGRAM TERMINATION:

1. Failure to pay program fees.
2. Continued substance use and/or abuse.
3. Possession of contraband (contraband is outlined in Resident Handbook).

4. Failure to attempt to make progress on agreed upon goals as outlined in the Individualized Program Plan.
5. New criminal charges.
6. Threats, harassment, racial slurs or other inappropriate behavior displayed.
7. Failure to participate in assigned group and individual programming.
8. Failure and / or continual failure to follow program rules (as outlined in the Resident Handbook).
9. Inability to independently care for self / need for higher level of care.
10. Other behaviors or incidents that are determined by the clinical team as detrimental to other residents, self, RVCP staff and the community living environment.

F. RESIDENT RIGHTS:

Resident rights have been explained to me and I have been provided a copy of the Resident Handbook that details my rights while a resident of this program. I understand that I can request RVCP staff assistance, including the Resident Rights Specialist, Marcia Galvan, at any time I feel my rights are being violated. I further understand that there will be no retaliatory action(s) by RVCP staff for any grievances I may file while a resident of this program.

I have read and agree to the conditions outlined in this admissions agreement.

 Veteran's Signature

 Date

 Veteran's Printed Name

 RVCP Staff Signature

 Date

 RVCP Staff Name Printed