

REQUEST FOR PROPOSALS

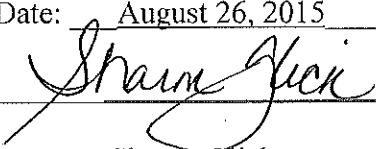
Issue Date: August 7, 2015
 Title: Day Reporting Center
 Issuing Entity: County of Rockingham Board of Supervisors
 Mail to: County of Rockingham
 20 East Gay Street
 Harrisonburg, VA 22803-1252
 Hand Deliver to: Rockingham County
 20 East Gay Street
 Harrisonburg, VA 22802

The County will receive sealed initial proposals until 2:00 P.M., Wednesday, August 26, 2015 for providing services for a Day Reporting Center. The procurement process shall be competitive negotiations for professional services. Inquiries for information should be directed to Ann Marie Freeman, Director of Court Services, at amfreeman@rockinghamcountyva.gov

IF PROPOSALS ARE MAILED, SEND DIRECTLY TO THE ADDRESS SHOWN ABOVE. IF PROPOSALS ARE HAND DELIVERED, DELIVER TO: address shown above.

In compliance with this request for proposals and to all the conditions imposed herein, the undersigned offers and agrees to furnish the services in accordance with the attached-signed proposal or as mutually agreed upon by subsequent negotiation.

Names and Address of Firm:

<u>Gemeinschaft Home</u>	Date: <u>August 26, 2015</u>
<u>1423 Mt. Clinton Pike</u>	
<u>Harrisonburg, Virginia 22802</u>	By: <u>Sharon Glick</u>
FEI/FIN NO. <u>54-1326987</u>	Title: <u>Executive Director</u>
	Telephone No. (540) <u>434-1690</u>
	Fax No. (540) <u>432-9479</u>



Gemeinschaft Home

Day Reporting Center Pilot Program for Rockingham County and the City of Harrisonburg

Proposal

Submitted by

Sharon Glick, Executive Director
execdir@gemeinschafthome.org
Phone: 540-434-1690

August 26, 2015

Gemeinschaft Home
1423 Mt. Clinton Pike
Harrisonburg, VA 22802
www.gemeinschafthome.org

Table of Contents

Introduction

Program Overview

Letter from the Executive Director

Description

- Core Values
- Employment
- Drug Screening
- Group Sessions
- Individual Counseling and Coaching
- Case Management
- Community Support/Referrals
- Community Service

Eligibility

Participant Risk Levels

- Level 1-Low
- Level 2-Medium
- Level 3 High
- Level 4-Very High

Program Rules and Standards

Cardinal Rules

Hours of Operation

Attendance

Gemeinschaft Grounds and Property

Transportation and Parking

Contraband/searches

Fraternization with CRP Residents

Participant Dress Code

Visitors/Guests

Visitor/Guest Dress Code

Legal Issues

Meals/Food

Medical Issues

Mentors

Phones

Technology

Tobacco

Fire Drills

Lost Items/Personal Property

AA/NA

Responding to Participant Behavior

Learning Experiences
Therapeutic Confrontations
Confrontation/Encounter Sessions

Departure from the DRC

Frequently Asked Questions

Attachments

DRC Pilot Program Fee Structure

Staff Member Resumes

Richi Yowell, Program Director
Jumar Peterson, Case Manager
Jasmine Gray, Program Assistant

Sample Forms & Documents

Initial Intake Form
Intake Form and Questionnaire
Voluntary Admission Form (Substance Use)
Media Release Form
Release of Information/Consent Form
Medical Screening Form
Receipt of Program Manual Confirmation Form
Personalized Goals Sheet
Vision Statement Form
Treatment Plan Form
Transition Plans Form
Relapse Prevention Plan
Group Sign-In Sheet
Employment Verification Form
Medications Log
Community Service Log
Drug Screen Log
Monthly Report
Behavior Report
Property Damage Report
Termination Report
Discharge Summary Report
Exit Interview
Case/Contact Notes (fictional)

Introduction

The purpose of this proposal is to establish a Day Reporting Center (DRC) at Gemeinschaft Home and to operate a pilot program for adult offenders in Rockingham County and the City of Harrisonburg. In conjunction with the Rockingham Regional Jail, Harrisonburg-Rockingham General District and Juvenile and Domestic Relations Courts, and the Harrisonburg-Rockingham Circuit Court, the program will serve individuals convicted of, on probation for, or awaiting trial for nonviolent misdemeanors, nonviolent felonies, and certain drug offenses.

The information that follows is based on the program manual that we have developed to describe the details, policies, and procedures of the DRC, beginning with a letter from the Executive Director to new program participants. Also included are the resumes of Gemeinschaft Home staff members responsible for running the pilot program as well as a wide selection of sample forms and documents that will be updated and revised for use in the DRC program.

Program Overview

Letter from the Executive Director

Dear GHDRC participant,

Welcome to our DRC program here at the Gemeinschaft Home. For at least the next 90 days you are expected to actively participate in an exciting, interactive, life recovery program tailored specifically to meet your needs. Gemeinschaft Home will work directly with Court Services and other local service providers to create an individualized case plan that will help you get your life on track.

The purpose of this DRC program is to provide an alternative to incarceration for selected individuals who have been charged with a crime and are awaiting trial. Some participants may also enter into this program on a post-sentence basis. The DRC program is a partnership between the City of Harrisonburg, Rockingham County and Gemeinschaft Home. Rather than being confined in a local or regional jail, this program allows participants to maintain their freedom, which also allows for continuity of employment, residency, healthcare, sobriety, childcare, and other obligations. You will be required to report regularly to our facility and comply with all staff directives while in the program, which includes intensive supervision, ongoing drug screens, case management, and access to a variety of other community services.

Here at the Gemeinschaft Home our focus is on you. We work closely with local officials, including probation officers. However, our primary concern is your well-being. We are here to help you become the person that you want to be. We understand the struggles you face, especially as they relate to criminal thinking and substance use/abuse. We've been working with people to help overcome these kinds of issues for over 30 years! Our staff is committed to assisting you on your journey to wholeness. You can help US to help YOU by being cooperative, respectful, and by trusting our process as a pathway to recovery.

We are led by a Board of Directors who gives our program vision and guidance. Our Executive Director – Sharon Glick promotes our mission to the greater community and implements action plans to achieve our mission. The Program Director –Richi Yowell- oversees the therapeutic aspects of both the

Community Residential Placement (CRP) program as well as the Day Reporting Center (DRC). His leadership, motivation and wisdom helps participants in both programs reach their therapeutic goals.

Our Day Reporting Manager- Jumar Peterson- helps to carry out the vision of Gemeinschaft Home by personally assisting you in achieving your goals. He will also address any needs or concerns you may have. He also assists in holding DRC participants accountable for their actions and keeps them focused on their recovery. Finally, our Program Assistant- Jasmine Gray- is always ready and willing to assist you in finding resources in the community that will help on your journey to recovery.

Our program is set on proven practices. We offer dynamic group interactions, one-on-one coaching sessions, case management and referral services. Our program is designed to challenge you to live to a higher standard and not settle for the ordinary. We want to help you live up to your fullest potential by first identifying areas of your life that need improvement and then working to improve them. The question that you must ask yourself is “Am I ready to take control of my life and live in wholeness, sobriety and hope?”

We love what we do here, and our hope is that you will love it as well. From all of our staff here at Gemeinschaft Home, we welcome you! We are excited to walk with you on your journey toward embracing a “new” you.

**Sharon Glick,
Executive Director**

Description

The Gemeinschaft Home Day Reporting Center (DRC) is a Life Recovery/Re-entry program. While the primary goal is to reduce recidivism and prevent relapse, we are not solely a substance abuse program. We will accept any candidate who meets the eligibility criteria. Ours is a 90 day program (at minimum) with extended stays as the case demands, and as approved. All participants in the Day Reporting Center program are expected to enter and successfully complete it or risk the possibility of a probation violation. There are several focal points to our Day Reporting program:

Core Values- The Gemeinschaft Home organization provides an opportunity for program participants to better themselves in areas essential to a successful recovery and for productive citizenship. While in the Day Reporting Center, program participants are expected to conduct themselves as responsible adults. There are several core values that we promote and uphold as a community.

Honesty Morality Responsibility Accountability Respect Safety

Not every inappropriate behavior or action can be addressed in this manual. A participant may be confronted on a behavior that is not specified in this manual. Program participants are expected to come into compliance with staff directives as they are provided, and must behave in ways that are consistent with these core values at all times while on Gemeinschaft Home property.

Employment – Employment is a vital part of success and Life Recovery. A participant’s successful transition to stable independent living depends upon rebuilding a positive employment history. We do not have jobs waiting for participants upon their release from incarceration. We do have some longstanding relationships with key employers in the area and we are able to assist participants in their job search. We also partner strategically with Goodwill Industries of the Valley’s Career Connections

Center. They regularly work with Gemeinschaft clients to provide career counseling, job seeker services, and several seminars on job interviewing, resume writing, professionalism in the workplace and other similar topics. Because of these relationships, securing employment is fairly easy. Participants must maintain employment while in the program and must notify staff of any changes in employment.

The program defines a job as follows: A position that requires the participant to be at a previously specified site (with a verifiable phone number and address) to perform a previously specified task for which the participant will receive a regular paycheck as compensation for hours worked. Full-time employment is considered to be at 32 hours or more. Part-time employment is considered to be 31 hours or less.

- Participants must maintain employment while in the DRC program and must notify staff of any changes in employment.
- Each unemployed participant must actively search to find employment while enrolled in the Gemeinschaft Home Day Reporting Center program. Participants should plan to submit a minimum of 5 applications per week to potential employers and must also develop a resume if the participant does not currently have one.
- All unemployed participants are encouraged to register with area employment agencies (VA Employment Commission, Temporary Agencies, Goodwill, etc.).
- Proof of Job search and employment activities must be provided to staff upon request. Staff has the right to verify these activities as deemed necessary.
- All program participants must tell the truth about his residence and history (including his criminal history) when seeking employment.
- Upon accepting a job, a program participant is expected to hold the position for the full length of the program. If another job search is needed, the participant must obtain permission from Gemeinschaft staff.
- If work-related problems develop with supervisors or co-workers, the participant is encouraged to discuss his problems with the onsite (employer's) HR Staff as well as the Gemeinschaft Home DRC program staff.
- A participant may neither quit nor get terminated from a job. Consequences include sanctions (up to and including termination from the program). The participant's probation officer will also be contacted. Permission to terminate a position must be obtained from program staff. Proper notification must be given.

Drug Screening – Use or possession of alcohol or illegal drugs is grounds for immediate termination from the program. Personal items containing alcohol, such as mouthwash, are also prohibited. A positive test for alcohol due to the use of items containing alcohol *will be considered the same as use.*

Drug and alcohol testing will be done based on participants' risk assessment and case plan. They may

also be conducted randomly, “for cause”, and based on suspicion. All program participants should expect to be drug tested at any time and for any reason. Refusing or altering any drug or alcohol test is the same as a positive result, and will result in termination from the program. If a participant is directed to submit a urine sample for screening, they are expected to provide one without incident, and within a reasonable time frame before leaving the property. All results, incidents of noncompliance and staff concerns will be reported to the participants’ probation officer.

Group Sessions- Some program participants will be expected to attend certain **life recovery group sessions** as their case plan demands. These groups deals with processing life issues, establishing personal goals, and receiving feedback on behavior. Program participants are expected to actively and fully engage in the group activities and conversations by giving and receiving feedback as well as working on personal issues.

There are 10 key areas of Life Recovery that will be explored:

Cognitive Development	Health	Managing Change	Communication & Conflict Resolution	Relationships
Staying Organized	Professionalism	Emotional Control	Relapse Prevention	Self-Awareness

Under each key area, there are numerous courses currently developed and in use at Gemeinschaft Home, with the ability to add or change as needed:

Self-Awareness (12 courses)

- SELF 101 - Self-Awareness: Who Am I? (My Identity)-Be the Person I want/need to be
- SELF 102 - Self-Awareness: Where do I come from? (My History/Roots)
- SELF 103 - Self-Awareness: How did I get here? (Life mapping)
- SELF 104 - Self-Awareness: Why do I do what I do? (Motivation)
- SELF 201 - Self-Awareness: Why Am I here? (My Life Mission)
- SELF 202 - Self-Awareness: What do I believe/care about? (My Core Values)
- SELF 203 - Self-Awareness: Where do I want to go in life? (A Vision for My Future)
- SELF 204 - Self-Awareness: How do I get where I’m going? (Setting goals)
- SELF 301 - Self-Awareness: Needs Vs. Desires: Maslow’s Hierarchy of Needs
- SELF 302 - Self-Awareness: Plan your work and work your plan! (action planning)
- SELF 303 - Self-Awareness: Self-Esteem (positive self-image, affirmations, etc.)
- SELF 304 - Self-Awareness: How do I want to be remembered? (My Legacy)

Relapse Prevention (13 courses)

- RELAPSE 101 - Relapse Prevention: Reasons for Relapse
- RELAPSE 102 - Relapse Prevention: The Phases of Recovery
- RELAPSE 103 - Relapse Prevention: Codependency
- RELAPSE 104 - Relapse Prevention: People, Places and things (prosocial vs. antisocial behaviors)
- RELAPSE 201 - Relapse Prevention: Denial
- RELAPSE 202 - Relapse Prevention: Recognizing Triggers

- RELAPSE 203 - Relapse Prevention: Cross-Addictions
- RELAPSE 204 - Relapse Prevention: Breaking the Cycle of Addiction
- RELAPSE 301 - Relapse Prevention: Adult Children of Alcoholics
- RELAPSE 302 - Relapse Prevention: The Pleasure Principle/Indulgent Behavior
- RELAPSE 303 - Relapse Prevention: 12 Steps
- RELAPSE 304 - Relapse Prevention: Neuropsychology and its impact on addiction
- RELAPSE 305 - Relapse Prevention: Don't S.L.I.P. up! (Sobriety Loses Its Priority)

Emotional Control (11 courses)

- EMOCON 101 - Emotional Control: "Understanding Emotions: The Basics"
- EMOCON 102 - Emotional Control: Primary and secondary emotions
- EMOCON 103 - Emotional Control: Stress, depression and anxiety
- EMOCON 201 - Emotional Control: Stress management and coping skills (keeping calm)
- EMOCON 202 - Emotional Control: Attitude is Everything
- EMOCON 203 - Emotional Control: Shame Vs. Delight (opposite ends of the spectrum)
- EMOCON 204 - Emotional Control: Assertive Vs. Aggressive
- EMOCON 301 - Emotional Control: Controlling Impulsive Behavior
- EMOCON 302 - Emotional Control: Overcoming the Fear Factor (fight or flight, confidence, preparation, etc.)
- EMOCON 303 - Emotional Control: ABC's of Anger Management
- EMOCON 304 - Emotional Control: Stages of Grief and Loss

Professionalism (5 courses)

- PROF 101 - Professionalism: Dressing for success
- PROF 102 - Professionalism: Resumes and Job Applications
- PROF 201 - Professionalism: Job Interviewing 101
- PROF 202 - Professionalism: Being a good employee (Attendance, Getting along with Others)
- PROF 203 - Professionalism: Professional Courtesy (calling in advance of absence, giving notice, etc.)

Staying Organized (4 courses)

- ORG 101 - Staying Organized: Neatness Counts: Everything Has its Place
- ORG 102 - Staying Organized: Time Management
- ORG 201 - Staying Organized: Personal finance and budgeting
- ORG 202 - Staying Organized: Staying on track-maintaining stability

Relationships (15 courses)

- RELATE 101 - Relationships: Healthy relationships
- RELATE 102 - Relationships: Functional vs. Dysfunctional Families
- RELATE 103 - Relationships: Reconnecting with family
- RELATE 104 - Relationships: What is Love? (Will you really be there for me?)
- RELATE 105 - Relationships: "Who Am I to Judge?"
- RELATE 201 - Relationships: Benevolence: The art of giving ("givers and takers") – The Healing Power of Service
- RELATE 202 - Relationships: Gratitude: The art of receiving

- RELATE 203 - Relationships: Grace: The art of Forgiving
- RELATE 204 - Relationships: Respect for self and others (manners, etiquette, etc.)
- RELATE 205 - Relationships: Sympathy/empathy
- RELATE 301 - Relationships: Caring for others: nurturing
- RELATE 302 - Relationships: Being Cared For: responding w/ gratitude and thanks.
- RELATE 303 - Relationships: Sex Vs. Intimacy
- RELATE 304 - Relationships: Relating to those in authority (PO, Boss, etc.)
- RELATE 305 - Relationships: Accountability Relationships/Social Support

Communication and Conflict Resolution (6 courses)

- COMCON 101 - Communication/Conflict Resolution: (Strategies: Collaborating, Competing, Compromising, Accommodating, Avoiding)
- COMCON 102 - Communication/Conflict Resolution: Generate, Don't Evaluate, Judge the situation (cost/benefits/pros/cons) and not the person, Seek common ground,
- COMCON 103 - Communication: Effective Confrontation Skills
- COMCON 201 - Communication: economy of words, thinking before speaking, active listening, hyperverbality, thinking out loud)
- COMCON 202 - Communication: Conflict resolution (seek to understand and be understood, not to be right or to win)
- COMCON 203 - Communication: Body Language (verbal & nonverbal communication)

Change Management (6 courses)

- CHANGE 101 - Change: What creates change? (thoughts, feelings, experiences, beliefs)
- CHANGE 102 - Change: The Stages of Change
- CHANGE 103 - Change: Resistance to change (defense mechanisms, threat to security: minimizing, rationalizing, justifying and blaming).
- CHANGE 201 - Change: Risk Management and Antisocial Cognition
- CHANGE 202 - Change: "Constant change, constant growth, daily opportunities"
- CHANGE 203 - Change: "Rising to Meet the Challenge" (preparing for change)

Personal Health (11 courses)

- HEALTH 101 - Health of body (Hygiene)
- HEALTH 102 - Health of body (Exercise/Rest-Importance of Leisure time)
- HEALTH 103 - Health of body (Nutrition)
- HEALTH 104 - Health of Spirit: "May the Source be with You": Reconnecting with your power source
- HEALTH 201 - Health of body (Unhealthy Behaviors)
- HEALTH 202 - Health of Mind (Commitment to Continuous Learning)
- HEALTH 203 - Health of Mind (Making good decisions)
- HEALTH 301 - Health of Spirit (believing in yourself)
- HEALTH 302 - Health of Spirit (Creative outlets and expressions)
- HEALTH 303 - Health of Spirit (Religion Vs. Spirituality)
- HEALTH 304 - Health of Spirit: Spirituality and Recovery

Cognitive Development (10 courses)

- COGDEV 101** - Cognitive Development: Five Stages of Manhood/Womanhood
- COGDEV 102** - Cognitive Development: No substitute for honesty
- COGDEV 103** - Cognitive Development: “No Excuses”: Accepting Personal Accountability
- COGDEV 201** - Cognitive Development: Criminal thinking vs. Responsible thinking
- COGDEV 202** - Cognitive Development: Coping with Adversity (Stumbling blocks (obstacles) and stepping stones (opportunity)).
- COGDEV 203** - Cognitive Development: ABC’s of Thought and Behavior (Antecedents, behaviors, consequences)
- COGDEV 301** - Cognitive Development: Arrogance, Fear and Ignorance: Death Traps of Life
- COGDEV 302** - Cognitive Development: Failing Wonderfully (Bending but not breaking. Getting back up after being knocked down. OK to make mistakes)
- COGDEV 303** - Cognitive Development: “Meakness Isn’t Weakness: A Lesson in Humility”
- COGDEV 304** - Cognitive Development: “A New Beginning”: Adjusting to Life on the Outside

Individual Counseling and Coaching- Some participants will be required to attend Individual Counseling and Life Coaching sessions as their case plan demands. This may be facilitated by a Gemeinschaft Home staff member on site or a designated service provided from the community at another location. The goal is to resolve individual mental and emotional health issues that may need to be addressed in order for life improvements to occur. Other issues such as finances, relationships, health, continued education, literacy and lifestyle development are introduced and discussed as needed. Referrals will be made as needed. Gemeinschaft will strive to provide as much individual counseling, education and case specific programming on site as possible, based on participant needs and interests. There is also an option for community providers to come to Gemeinschaft to provide services in a “one-stop-shop” environment as the program develops and as partnerships with those local agencies are solidified.

Case Management- Every participant is expected to cooperate with an assigned Case Manager as their case plan demands. Gemeinschaft Home staff members will serve as onsite Case Managers who will work closely with participants, their families, their probation officer and other stakeholders to assess participants’ needs and work to meet them. Once needs are assessed, a case plan will be developed to include very specific goals and tasks that each participant is expected to engage and complete while in the DRC program.

Community Support/Referrals- From time to time, participants’ needs exceed the scope and abilities of DRC program and staff. When this happens, other community resources may be required. This may include referrals to agencies such as:

Community Services Board (CSB)	Dept. of Rehabilitative Services	Dept. of Social Services
Free Clinic	Dept. of Veterans Affairs	People Helping People
Virginia Employment Commission	Goodwill Industries	Skyline Literacy Coalition
Local Colleges and Technical Schools	Childcare Connection	Sentara RMH

Blue Ridge Legal Services	Salvation Army	Mercy House
Valley Program for Aging Services	Valley Associates for Independent Living	Patchwork Pantry
Open Doors Shelter	Alcoholic/Narcotics Anonymous	H/R Community Health Center
H/R Health Dept.	Kingsway Ministries	Harrisonburg Redevelopment/Housing Authority
Our Community Place	Dayton Learning Center	

**This is not an all-inclusive list.*

Community Service- Some program participants may be required to perform a certain amount of community service projects as assigned by staff. Participants are also encouraged to create and propose original community service plans, to be presented to staff for approval. **IT IS UP TO PARTICIPANTS TO KEEP TRACK OF THEIR HOURS.** Forms to do so are found in the front office.

Eligibility

Be advised that we do look at each individual case when determining eligibility. Referrals must come from a Court Services Probation Officer. Criminal History, Pre/Post Sentence Investigations, medical health status, mental health status and substance abuse history must be submitted along with the standard referral form. General eligibility criteria is as follows:

- All participants must be on Court Services Probation as ordered by a local court. It is both desirable and possible that the program participants on felony supervised probation with the Virginia Department of Corrections (District 39 Probation and Parole) be allowed to participate in the program at some point in the future.
- Roughly 85% of criminal offenders in the Commonwealth of Virginia are male. However, Gemeinschaft Home does have the ability to provide service to both male and female participants as needed. Due to the specific needs and differences inherent in these populations, group sessions, drug testing and reporting days will be separated by gender, with no fraternization between genders allowed.
- Known sex offenders, known gang members, members of security threat groups and those with a consistent/lengthy history of truly violent charges (multiple murder, malicious wounding, kidnapping charges, etc., especially if they occurred more recently) are not eligible for our program.
- Weapons charges in and of themselves are admissible (Possession of a Firearm, Brandishing, etc.) It's when they are used in commission of another felonious crime (such as Armed Robbery) that it becomes a disqualifier. Some consideration can be given for singular, isolated incidents of violent crime, pending review and approval, especially if they occurred in the distant past.
- Referrals should be sent for all other criminal charges/convictions and will be reviewed by staff on a case by case basis.
- We accept most mental health cases provided there is no history of violence or detachment from reality that might present a safety risk to staff and other participants. All participants with mental

health issues are expected to be actively enrolled in a qualified treatment program with a licensed mental health service provider. Further, all such participants must comply with all treatment directives.

- Regarding medical history, all participants must be ambulatory. We prefer that there be no medical restrictions and that potential participants are physically able to work. However, will accept participants with a variety of health conditions and even some who would qualify for disability benefits. Participants with medical issues are expected to comply with all treatment directives as provided by their physician(s).

Participant Risk Levels

<u>Level</u>	<u>Risk</u>	<u>Status</u>	<u>Criteria</u>
One (1)	Low	Amenable	Generally compliant. Likely employed/easily employable. Stable residency. May have 1-2 issues to work on. Self-aware. Engaged. Respectful. Motivated toward positive change. Reports to DRC 1-2 times per week.
Two (2)	Medium	Guarded	Somewhat compliant. Likely unemployed/lacking skills. Unstable living situation. May have multiple issues requiring referrals to other Human Services agencies. Difficulty coping with adversity. Somewhat disconnected/apathetic. Lacks motivation. Ambivalent. Reports to DRC 2-3 times per week.
Three (3)	High	Resistant	Generally noncompliant. Unemployed. Requires intensive supervision/support and accountability. Requires significant structure. Little to no motivation toward positive change. Likely transient/homeless. Disengaged. Reports DRC 3-5 times per week. It is anticipated that most residents would be assessed at this level upon intake and changed as needed upon monthly review/reassessment.
Four (4)	Very High	Highly Resistant	Same as Level 3 but requires the structure and supervision of a residential stay under the same program requirements of the DOC's Community Residential Program (CRP). Lives at Gemeinschaft.

Program Rules & Standards

Cardinal Rules

Violation of the following cardinal rules typically results in immediate termination from the DRC program.

1. Posturing threatening behavior (Fighting/acts of violence, invading the personal space of another, inappropriately touching another, verbally threatening another).
2. Stealing
3. Gambling
4. Destruction of property
5. Use of drugs/alcohol, or refusal to cooperate with testing procedures
6. Possession of contraband
7. Quitting without notice or being involuntarily terminated from employment

Hours of Operation

Gemeinschaft Home is staffed 24 hours per day, 7 days per week per agreement with the Virginia Department of Corrections, and in compliance with Community Residential Placement (CRP Standards). The Day Reporting Center (DRC) is generally expected to operate between the hours of 8:00 a.m and 8:00 p.m Monday through Friday but does have the capability to operate beyond these hours and on weekends as needed.

Attendance

Attendance at all DRC activities is required based on staff directives and participant risk levels. All absences will be documented and reported to the supervising probation officer. At least a 24-hour prior notice is required if a participant must miss a previously scheduled appointment, meeting, event. Missing an appointment for any reason will likely result in an increase in drug screenings and future contacts. All medical absences must be supported by documentation from an approved service provider. Ongoing attendance issues will likely result in termination from the program.

Gemeinschaft Grounds/Property

There are currently three primary facility structures on the property:

1. *The Farmhouse* (the main building that faces Mt. Clinton Pike)
2. *The Bender Building* (a smaller, secondary building directly behind the Farmhouse)
3. *The Tenant House* (located directly beside the Farmhouse, and also facing Mt. Clinton Pike)

All program activities for the Day Reporting Center will be conducted in the Bender Building located directly behind the main building ("the farmhouse"). DRC participants are only allowed in

Gemeinschaft Home's parking lot and the Bender Building. Program Participants are strictly forbidden to be in the farmhouse, the tenant house, or any other areas of the premises without the permission of a senior staff member.

Transportation and Parking

DRC program participants are responsible for their own transportation to and from Gemeinschaft Home for designated program activities. Participant may at times solicit rides from employers, fellow employees, mentors, relatives, friends etc.; At their discretion, staff may require any and all drivers to provide a copy of his/her valid driver's license and a valid vehicle registration in order to be approved to give participants rides. This applies to transportation to any event or circumstance related to the Day Reporting Center program. The information will only be required once per approved driver, after which permission is granted to give rides at other times.

Parking at Gemeinschaft Home is very limited. Most parking spaces are for staff members. Other spaces are available for DRC program participants on a first come, first serve basis. However, those being transported by other people should inform those drivers that they are not allowed to linger on property for more than 15 minutes in order to wait for a participant to finish program business. Should that wait time be exceeded, said drivers should plan on leaving the property and returning at a later, pre-arranged time. Exceptions must be approved by Gemeinschaft Home staff members on a case-by-case basis.

Harrisonburg also has a public bus system that charges \$1 to ride one way. Schedules are available upon request.

Bicycles must be kept in the bike rack. When using a bicycle on the road, program participants are responsible for the same traffic regulations that apply to vehicles. Program Participants are allowed to bring their own bikes; however, if they do not want anyone else using them, they must bring a bike lock as well. *The facility does not assume any responsibility for bicycles or their riders.*

Contraband/Searches

All persons, property and vehicles are subject to random contraband searches at any time while on Gemeinschaft Home property. IF A STAFF MEMBER WANTS TO SEARCH A PARTICIPANT OR THEIR PROPERTY/VEHICLE, THEN THAT PARTICIPANT MUST COMPLY. Any parcels, bags, containers or items taken from or brought onto the property are also subject to search by staff. Any of the following contraband items confiscated from residents will not be returned:

- pornography
- drugs or alcohol – including synthetics
- prescription drugs not in the original container, or those belonging to others.
- drug Paraphernalia
- items that promotes drugs, alcohol, or slogans degrading another's gender/ethnicity
- weapons of any kind
- tools for work- may be checked in upon arrival as needed.

Fraternization with CRP Residents

Gemeinschaft operates a separate residential program for the Virginia Department of Corrections (DOC). It is known as a Community Residential Placement (CRP) program. Residents in this program are convicted felons on supervised probation with the DOC. They live on site in the farmhouse while in the program. The Day Reporting Program and Community Residential Placement program are separate and mutually exclusive. Therefore, contact between or among participants enrolled in these two separate programs is strictly forbidden for safety and security reasons. DRC participants are not allowed in the farmhouse without staff permission and CRP participants are not allowed in the Bender Building without staff permission. Any inappropriate fraternization will be addressed and is subject to sanction, up to and including termination from the program.

Participant Dress Code

Participants are expected to be fully and appropriately clothed at all times, in accordance with the following standards:

- Undergarments should not be visible to others.
- Shoes or sandals must be worn at all times.
- Clean, appropriately-sized pants or shorts worn no lower than at the hip-bones (with a belt if necessary).
- Sagging or oversized pants that reveal undergarments are expressly prohibited.
- Clean T-shirts, button-down shirts, or pullovers are acceptable. Sleeveless shirts (Tank tops, mesh shirts, cropped shirts, and shirts that expose any area of the torso) are not acceptable.
- Sweat suits are acceptable
- Hats, skull-caps or headgear of any kind are not acceptable unless approved by staff (typically for medical reasons only).

Absolutely NONE of the items below should be worn in the public/common areas:

- Shower shoes
- Bedroom slippers
- Pajama pants/sleepwear
- Undershirts (thin cotton undergarment as compared to a thicker, "outerwear" tee shirt).
- Sleeveless Shirts (tank tops, muscle shirts, cropped shirts, etc.)
- Clothing with references to drugs, sex or profanity or the like is prohibited entirely.

Visitors/Guests

Visitors, guests, friends and family members are not allowed on Gemeinschaft Home property except to drop off and pick up program participants, or with prior approval from the Day Reporting Manager. Visitors should be aware that they are subject to search upon reasonable suspicion for contraband.

Visitors who are on Gemeinschaft Home grounds who fail to follow these rules can be banned from future visits, and legal action can be taken.

Visitor/Guest Dress Code *

- Each visitor is required to be dressed with outer garments and undergarments appropriate for his or her gender.
- Outer clothing should be opaque and completely cover undergarments.
- All visitors shall be required to wear footwear.
- Exposed midriffs are not permitted for either gender.
- Halter-tops, tank tops, strapless tops, tops with shoulder straps that expose the top of the shoulder are not permitted.
- Dresses/skirts or shorts should be no higher than four (4) inches above the mid-knee.
- Skirts or dresses that are slit should not have the slit higher than four (4) inches above the mid-knee.
- Pants or slacks will not be worn in a manner that exposes body parts.
- No clothing is allowed that contains gang symbols or signs with inappropriate language, graphics, racist comments, etc.
- Female visitors may wear scarves and other head coverings. No hats are to be worn inside the house. All headgear will be subject to routine search procedures prior to the visitor beginning their visit.

** taken from Indian Creek Correctional Center Visitor Dress Requirements*

Legal Issues

The Day Reporting Manager or attending case manager must be made aware of all new/pending appearances, summons, contacts with law enforcement officers and other legal matters. Residents must also notify their Probation Officer of these issues immediately.

Meals/Food

Participants who are required to be on Gemeinschaft Home Grounds for more than 4 hours at a time may be eligible to receive a meal during some portion of their stay, based on availability. Those who are not able to secure food/meals on their own can also discuss their situation with a staff member. Food may be provided based on need and availability on a limited basis, if approved.

If a participant cannot eat a specific food due to medical, religious or personal reasons, he will be given a menu alternative. This is discussed as part of intake. Those who simply do not like the food offered will NOT be given an alternative.

Medical Issues

- Upon arrival, each participant will meet with a case manager to review their medical history and assess needs.
- Information about community health services is available from the Case manager.

- Emergency contact information must remain on file for all active program participants.
- All (prescription and non-prescription), vitamins, minerals and cold medications, etc., must be kept at home unless absolutely necessary. If your medical condition requires you to be in possession of such medications, you must notify a staff member immediately, and prior to arrival on Gemeinschaft Home premises.
- In such cases, Medications must be taken in the presence of a staff member, and in accordance with the directions on the bottle.
- Program participants are required to report all legitimate prescription drugs to a staff member upon intake, and at such times as there are changes in dosages, frequency of use or new prescriptions that occur thereafter.
- Notify a staff member immediately if you get injured while on Gemeinschaft Home property or are in need of emergency first aid, no matter how small or insignificant the injury or illness may seem. Staff members are trained in CPR and First Aid and have access to basic supplies needed to administer these services. They are also the primary point of contact for Emergency Medical Services (EMS) should a higher level of care be necessary.

Mentors

Program participants are encouraged to seek out support and accountability relationships. Participants are encouraged to seek out a mentor and may begin doing so immediately upon entering the program. Mentors must be approved by the Gemeinschaft Home staff. All time spent with an approved mentor must be documented and submitted to staff for submission to the participant's case file

Phones

Cell phones are allowed at Gemeinschaft Home. However, they are to be on vibrate or off entirely while on Gemeinschaft property, especially during group and individual sessions. Participants must also be considerate of their peers when talking on the phone around each other. Program participants who have to be asked to silence their phone multiple times will have their phone confiscated.

Gemeinschaft phones (landlines) are off limits to participants, except in rare situations, at the discretion of staff.

Technology

Office equipment owned by Gemeinschaft Home is off limits to DRC program participants (copier, phones, printers, scanners, etc). They are to be used exclusively by staff, and for business purposes only. Several computers are on site for program participants to use for JOB SEARCHING ONLY. These computers do not access social media, YouTube, or other forms of leisure and entertainment. Attempting to do so will result in the computer locking itself down. Participants should not bring any other electronic devices onto the property besides cell phones.

Tobacco :

The Day Reporting Program is a tobacco free program. Program participants are not allowed to use tobacco products, vapor pens, or electronic products anywhere on the property. Those caught using tobacco or other products will be fined \$5.00 for each infraction and may be terminated from the program for continued noncompliance.

Fire Drills

Fire Drills are a regular occurrence at Gemeinschaft Home, for obvious safety reasons. Upon hearing the alarm, immediately exit the building and report to the parking lot below the Bender Building. (behind the red fire line) All fire drills must be completed in no more than 5 minutes. Should the Bender Building itself be the affected location the 2nd staging area is in the front yard by the Gemeinschaft Home sign. Remember, “*when in doubt, get out!*”

Lost Items/Personal Property

Gemeinschaft Home assumes no responsibility for personal items left on the premises by any program participant, at any time, up to and including a participant’s departure from the program. Items found and unaccounted for will likely be secured, inventoried and discarded at the sole discretion of staff.

AA/NA Meetings

Participants with a substance abuse history are strongly encouraged to attend AA/NA meetings in the local community in addition to DRC activities. In some cases, AA/NA meeting attendance may be made mandatory as part of an individual case plan. All AA/NA meetings must be verified by having the meeting chairperson sign the verification form, which Gemeinschaft Home staff members can provide.

Responding to Participant Behavior

Learning Experiences (LEs) - Learning Experience may include such things as written actions, shadowing a role model, required participation in awareness activities, and so forth. Learning Experiences are assigned to help participants learn from their mistakes when displaying inappropriate behaviors or actions.

Therapeutic Confrontations - Any staff or participant may confront any individual found to be lacking in responsibility or displaying an inappropriate behavior/attitude. A confrontation may come in either verbal or written form. Behavior reports may be filed. A confronted individual must be receptive of the confrontation and be willing to take a look at his behavior. Resistance to confrontation may have more serious consequences than the original behavior violation. Multiple confrontations of the same individual will be met with any of the following:

- a written behavior report stating assigned consequences,

- a confrontation/encounter with staff and/or residents, or
- a strict behavior contract from staff, with the possibility of termination.

Behavior reports may be read in one of the group sessions. After the participant is confronted, LEs may be assigned and read in an upcoming group session. The participant is expected to completely follow through with the LE.

Confrontation/Encounter Sessions - Some participants may be required to sit before a panel of both peers and staff to receive feedback and corrective assistance in a meeting called a confrontation/encounter. The confrontation/encounter session is designed to build awareness, to mediate differences, or even to determine the future of the participant's status in the program. The following are basic guidelines for facilitating a confrontation/encounter session:

- The meeting should begin with the facilitator explaining the background reason and the principles behind the confrontation/encounter session.
- The facilitator should then explain the purpose and specific goal of the confrontation/encounter session, which should include any one or all of the following: awareness, ownership, commitment to change.
- The facilitator should conduct the confrontation/encounter allowing only one person to speak at a time. The receiving participant cannot speak unless called upon. The main assignment of the individual under confrontation/encounter is to listen in order to understand.
- The facilitator should conduct the session moving from one goal to another until satisfactory achievement is agreed upon by the members of the group session.
- If the session must close prior to the proper resolution or achievement of the determined goals - then a mentor may be assigned to follow up with the confronted or encountered resident for support.
- It is appropriate and expected that members of the session propose methods of support of LEs for the confronted or encountered resident and submit them to staff for final assignment of support.

Departing from the DRC

Departure from the program occurs once all case plan objectives have been met and approval from the attending probation officer has been received. A minimum of 90 days must be documented and successfully completed in order to qualify for departure. A certificate of completion will be issued to the program participant when all case plan objectives have been met. Once a participant has completed the program, they are not allowed on Gemeinschaft Home premises without prior approval from senior staff. However, if at any time a former program participant feels they may need additional assistance, they are encouraged to consult with senior staff in order to get the assistance they need. Gemeinschaft is here to help!

Frequently Asked Questions

Where can I smoke? Nowhere on Gemeinschaft property. We are a Tobacco-free facility.

Where do group meetings take place? In the Bender Building. It is up to you to know what time meetings are taking place.

Can I use mouthwash/cough syrup while here? No, if used that will show a positive on the breathalyzer, and that is considered the same as use. Same with cough syrup.

Can I wear perfume/cologne? Yes, provided it is not a bother to any other participants.

How often are urine screens? At random. Participants should expect to be urine screened at any time while on Gemeinschaft Home property.

Where do I find Community Service papers? NA/AA papers? Just ask a staff member.

I am frustrated about a program matter. Who do I go to first? You should speak with either the DRC Manager or the Program Assistant first.

Does Gemeinschaft Home have computers I can use? Yes, they are in the Hoover Room, located in the Bender Building. The computers are for JOB SEARCH ONLY.

How soon can I look for a job? Immediately.

--Other FAQs to be developed as issues arise--

DRC Pilot Program Fee Structure

One (1)	Low	Amenable	Generally compliant. Likely employed/easily employable. Stable residency. May have 1-2 issues to work on. Self-aware. Engaged. Respectful. Motivated toward positive change.	On-site reporting once or twice a week for check-in, status report and drug screening. <i>(staff time + cost of drug test)</i>	\$20 per person per day
Two (2)	Medium	Guarded	Somewhat compliant. Likely unemployed/lacking skills. Unstable living situation. May have multiple issues requiring referrals to other Human Services agencies. Difficulty coping with adversity. Somewhat disconnected/apathetic. Lacks motivation. Ambivalent.	On-site reporting two or three times a week for check-in, status report and drug screening. Also includes staff interviews, needs assess't, case mgt., groups/targeted interventions and referral services as needed. <i>(staff time + cost of drug test)</i>	\$35 per person per day
Three (3)	High	Resistant	Generally noncompliant. Unemployed. Requires intensive supervision/support and accountability. Requires significant structure. Little to no motivation toward positive change. Likely transient/homeless. Disengaged.	On-site reporting three to five times a week for check-in, status report and drug screening. Also includes staff interviews, needs assess't, case mgt. and referral services as needed. Also includes additional Therapeutic Life Recovery Groups. <i>(staff time + cost of drug test)</i>	\$45 per person per day
Four (4)	Very High	Residential	Same as Level 3 but require the structure and supervision of a residential stay under the same program requirements of the DOC's Community Residential Program (CRP)	Residential/24 hour supervision in accordance with all CRP standards.	\$55 per person per day

RICHARD H. YOWELL

15527 Forestville Rd. Timberville, VA 22853

Email: richi.yowell@gmail.com Home/Cell: (540)-271-0552

EXPERIENCE:

Program Director, Gemeinschaft Home-Harrisonburg, VA (July 7, 2014 to present)

- Serve as Senior Staff and back-up to the Executive Director
- Responsible for all program referrals, intakes, individual, and group counseling interventions
- Responsible for the safety, well-being and treatment of approximately 35 male residents in this Therapeutic Community (TC) environment, providing oversight to all programs, residential life activities, conflict resolution, crisis intervention, home plan development and employment.
- Develop, maintain and implement the program's Life Recovery curriculum
- Responsible for all Community Residential Program (CRP) regulations as required by the Virginia Department of Corrections (VADOC)
- Provide regular monthly progress reports, termination reports and discharge summaries for all residents as needed. Liaise with probation officers and other stakeholders as needed.
- Responsible for interns, practicum students and volunteers as available for use in the program.
- Use Evidence-Based Practices such as Motivational Interviewing and Cognitive-Behavioral Strategies to improve individual re-entry outcomes.

Probation and Parole Officer I, District 39-Harrisonburg, VADOC (April 30, 2011 to June 30, 2014)

- Apply knowledge of VADOC systems and procedures to enhance the healing environment.
- Serve as an officer of the Circuit Court, enforcing all court-ordered probation conditions and returning cases to court for Show Cause, Case Handling and Probation Violations as needed.
- Manage a caseload of 80-140 probationers, assisting with re-entry from intake to release.
- Evaluate probationer risk levels and needs to develop case plans and make pertinent referrals.
- Maintain a balanced approach to supervision with each probationer to produce positive results.

Pastor, Cedar Run Church of the Brethren, Broadway, VA (2005 to present); Part-time, Ordained

- Provide spiritual leadership, administrative oversight, pastoral care and counseling as needed.

Shift Supervisor, Gemeinschaft Home, Harrisonburg, VA (March 2009 to April 30, 2011)

- Supervise residents in accordance with VADOC regulations and CRP standards.
- Manage a caseload of up to 30; document contacts, report progress, address problems.

Human Resources Manager (previously PHR certified) Nine years providing Generalist services for:

- Virginia Mennonite Retirement Community, Harrisonburg, VA (2005-2008)
- Berryville Graphics, Berryville, VA (2003-2005)
- Technicolor Home Entertainment Services, Ruckersville, VA (2001-2003)
- Specialty Blades, Staunton, VA (2000-2001)

U.S. Army Veteran (E-4 Specialist), 3rd Infantry Division (1990-1993)-MOS: 11B/11M.

- Advanced training in armed and unarmed combat as well as operational security tactics.
- Served as dismount squad leader, machine gunner, and driver for Bradley Fighting Vehicle.

EDUCATION:

- Liberty University: Currently in M.A. Addictions & Recovery Counseling program (6 classes left)
- Eastern Mennonite University: 24 graduate credits toward M.A. Counseling (2008-2010)
- James Madison University: B.S. Degree (1995) Major: Psychology

ADDITIONAL INFORMATION:

- Sixteen years of management and supervision of up to 65 employees in various environments.
- Currently pursuing certification as a Certified Substance Abuse Counselor (CSAC)
- Certified Prepare/Enrich Pre-Marital/Marriage Counseling Facilitator for the last ten years.

Jumar D. Peterson

820 Vine Street
Harrisonburg, VA 22802
(540) 435-7274
petersjd1@gmail.com

EDUCATION

- James Madison University,** **Harrisonburg, VA**
Bachelor of Arts in Psychology, Spring 2014
Major GPA: 3.0
- George Wythe High School,** **Richmond VA**
Advanced Diploma, 2006
- Richmond Technical Center,** **Richmond VA**
Honors in Carpentry, 2006
-

EXPERIENCE

- Current** **Gemeinschaft Home, -Program Case Manager/Shift supervisor** **Harrisonburg, VA**
Manage individual referrals, assistant to program director, meet with residents to establish goals, organize and facilitate group counseling sessions, responsible for issuing disciplinary behavior reports, coordinate with probation offices from districts in VA, Maintain order and program standards, implement program rules and regulations, aid residents in obtaining program goals, collect breath analysis and urine analysis
- 2012 – 2013** **Virginia Department of Medical Services- Respite Care** **Harrisonburg, VA**
Cared for an individual with autistic needs, taught language skills, Behavior analysis, Brief counseling for family, Encourage through patience and commitment.
- 2009 – 2011** **Tyson Foods Inc. - Quality Assurance** **Harrisonburg, VA**
Data entry, maintained proper food preparation standards, CVP Machine operator
- 2006 – 2009** **Chick-fil-a, - Supervisor** **Harrisonburg, VA**
Maintained a proper work environment, improved office organization, trained new personnel, organized Stock and Shipments
- 2007(summer)** **Service Master- Janitorial Personnel** **Richmond, VA**
Maintained a clean working environment, supplied employee's with proper work equipment, installed correct equipment to clean machines, provided Janitorial service throughout entire office building
- 2004-2007** **Carl Coles Construction- Carpenters Assistant** **Richmond VA**
Drywall installation, head carpenters assistant, installation of vinyl siding, framing, Hardwood floor installation.

ACTIVITIES

- **Divine Unity Community Church:** Leadership, Building Manager, Current
- **Divine Unity Righteously Applying God –** College Ministry co-leader, 2011-2012
- **Mission trip leader:** Spring 2008, 2009, 2010
- **Divine Unity Righteously Applying God ministries-** Small Group Leader, 2009-2010
- **Shepherd Heart Evangelistic Ministries -** Youth Leader, 2006-2008

Certificates/Awards

- **Certificate of completion:** Strategies for Trauma Awareness & Resilience (STAR I)

Jasmine S. Gray

Address: 2470B Reservoir Street Harrisonburg, VA 22801

E-mail: grayj8626@gmail.com

Phone: (804) 239-0838

- Education** **James Madison University**, Harrisonburg, VA
Bachelor of Arts, May 2015
Major: Justice Studies Concentration: Crime and Criminology
Relevant Coursework: Criminal Law and Procedure, Global Justice, Juvenile Delinquency, Criminological Theory, Nelson Research Seminar
- Work**
- Gemeinschaft Home** Harrisonburg, VA September 2014 - Present
Shift Supervisor
- Clerical and Administrative duties
 - Assisted residents with re-integrative process
 - Worked with a team of supervisors to oversee the residents during their stay
- Massanutten Resort** McGaheysville, VA June 2014 – September 2014
Le Club Desk Supervisor
- Assisted guest with customer service needs
 - Worked with a team of supervisors to oversee the daily operations of the building
 - Dealt with daily cash transactions and deposits
- Aramark** Harrisonburg, VA August 2012 - Present
Employee
- Trained other student employees on food processing responsibilities and other job duties
 - Planned and executed large and small food service events for customers
- Community Involvement**
- Gemeinschaft Home** Harrisonburg, VA May 2014 – September 2014
Intern
- Clerical and Administrative duties
 - Assisted residents with their re-integrative process
- Richmond City Public Schools** Richmond, VA June- July 2010 - 2012
Summer School Teaching Assistant
- Served as a one-on-one facilitator for multiple students between the ages of 5-7 years old with various special needs
 - Co-taught summer school classes with the teacher
 - Collaborated with the teacher to design and execute educational activities for students

- Campus Involvement**
- JMU Disability Services** January 2013- May 2015
Transcriptionist
 - Recorded in-class notes for student with various disabilities
 - Developed note taking skills
 - JMU Black Student Alliance Executive Board** June 2012- May 2015
Publicity/Advertising Chair
 - Created a marketing campaign for various events hosted

- References**
- Jumar Peterson**
Internship Supervisor
(540) 434-1690
 - Sharon Glick**
Executive Director at Gemeinschaft Home
(540) 434-1690
 - Tiandra Stone**
Mentor
(804)- 232-2553

- Certifications**
- Red Cross**
 - CPR/AED
July 2014
 - First Aid and Blood Borne Pathogen
July 2014

Gemeinschaft Home Initial Intake Information Sheet

New Resident Name: _____ Today's Date: ____/____/____

State #: _____ SS#: _____

Gender: M DOB: ____/____/____ Height: _____ Weight: _____ Hair color: _____ Eye Color: _____

Sending Institution: _____ Admission Date: ____/____/____

Probation Parole District #: _____ Reason for referral _____

Length/condition of sentence: _____

P&P Officer: _____ Sanctioned to complete? Yes No

Substance Abuse Background: yes no

For program use
Mental Health Issues: _____

Emergency Contact: _____

Relationship: _____

Phone #: (____) - _____ - _____ Address: _____

Education completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College _____

Do you need assistance with reading or writing? _____

Hometown: _____ Address/Phone #: _____

Special Medical Conditions, Allergies, Special Dietary Needs, Etc.: _____

Doctor's Name & Address: _____

ATTACH A PHOTO BEHIND THIS SHEET

Resident Signature _____ Date: _____

Staff Signature _____ Date: _____

Gemeinschaft Home Resident Intake Form and Questionnaire

Basic Intake Information

Name: _____

Today' Date: ____/____/____

Questionnaire

History

1. Explain the course of events that led to your coming to our program. _____

Domestic

2. Married Single Separated Divorced Widower

3. Children: yes no How many? _____ Names _____

4. Who is the most important person to you at the present time? _____

5. Comment on the relationship with your father: _____

6. Comment on the relationship with your mother: _____

7. Parents' status: Married Single Separated Divorced Widowed

8. List siblings oldest to youngest: _____

Health

9. Have you ever been in mental health counseling before? yes no

If yes, explain: _____

10. Any history of family illness of any kind? yes no

If yes, explain: _____

11. Are you taking medication of any kind? yes no

If yes, explain: _____

12. Do you believe you have a problem with substance abuse or addiction of any kind? yes no

Explain: _____

13. What is your choice of mood altering substance? _____

14. Have you ever attended NA/AA meetings? yes no

Spiritual/Religious

15. What is your religious background? _____

16. Do you desire to have spiritual counseling or would you welcome the opportunity to talk with someone about your faith? yes no

17. What resources would you like to have regarding your faith walk? _____

Other

18. Do you have any interests or hobbies? yes no

If yes, what are they? _____

19. Do you have any legal problems pending? yes no

If yes, explain: _____

20. What kind of work are you looking for? _____

21. How would you rate your work history and performance on a scale from 1 to 10, 1 being poor and 10 being excellent? 1 2 3 4 5 6 7 8 9 10 Explain: _____

22. What are you most anxious or concerned about at this point in your life? _____

23. How do you feel about being here? _____

24. What would you say are the most important things that you need to work on in your life at this time? _____

25. Do you have any problems reading or writing? ? yes no

If yes, explain: _____

Sexual Abuse History

26. Have you ever been sexually abused? Yes No

27. Have you ever been sexually abused while incarcerated? Yes No

Comments: _____

Gemeinschaft Home
Voluntary Admission Form

Any admission recorded below was given voluntarily and without duress. Sections I and/or II may be completed.

I. I, _____ VSP# _____
(Name of Resident) If Parolee

voluntarily admit to using substances checked below within the last 30 days:

- | | |
|--|--|
| <input type="checkbox"/> Cocaine, including crack | <input type="checkbox"/> Barbituates |
| <input type="checkbox"/> Marijuana | <input type="checkbox"/> Heroin |
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Phencyclidine (PCP) |
| <input type="checkbox"/> Amphetamines, including Ice | <input type="checkbox"/> Other: _____ |

By: _____ Witnessed by: _____
Signature of Resident Signature of Staff

Date: _____ District/Unit: _____

II. I, _____ VSP # _____
(Name of resident) If Parolee

voluntarily confirm that the positive (dirty) on-site test findings for the substances checked below are based on test samples provided by me:

- | | |
|--|--|
| <input type="checkbox"/> Cocaine, including crack | <input type="checkbox"/> Barbituates |
| <input type="checkbox"/> Marijuana | <input type="checkbox"/> Heroin |
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Phencyclidine (PCP) |
| <input type="checkbox"/> Amphetamines, including Ice | <input type="checkbox"/> Other: _____ |

By: _____ Witnessed by: _____
Signature of Resident Signature of Staff

Date: _____ District/Unit: _____



Gemeinschaft Home
1423 Mt. Clinton Pike
Harrisonburg, VA 22802
540-434-1690

Media Release Form

I, _____ hereby grant **Gemeinschaft Home** to interview me and/or to use my likeness in photograph(s)/video in any and all of its publications and in any and all other media, whether now known or hereafter existing, controlled by **Gemeinschaft Home**, in perpetuity, and for other use by **Gemeinschaft Home**.

I will make no monetary or other claim against **Gemeinschaft Home** and/or any employee of **Gemeinschaft Home** for the use of the interview and/or the photograph(s)/video.

Signature of Resident

Date

GEMEINSCHAFT HOME RELEASE OF INFORMATION FORM

TO: _____ (Releasing/Receiving Agency)

I. Consent for Release of Information – All Clients

I, _____, the undersigned hereby authorize any agency, institution, public or private, or person to release any information they may have concerning me or my background to a Gemeinschaft Home authorized agent. Implicit to this authorization is that a Gemeinschaft Home authorized agent may release to you any necessary information regarding me to facilitate this request.

This consent and authorization for release of information shall include such information as it relates to my emotional, mental and physical health, medical records, school records, test scores, academic or behavioral memoranda, all court records, past and present employment records, any possible military history and information regarding alcohol and other drug use including history of use, diagnosis, testing results, treatment recommendations and compliance with screening, assessment, testing, or treatment.

II. Substance Abuse Disclosure Consent Authorization – If Applicable

I, _____, the undersigned hereby authorize Gemeinschaft Home and their agents to release confidential information on my criminal history, instant offense and disposition or on my history of alcohol and other drug use, diagnosis, treatment recommendations and compliance with treatment in their knowledge, possession or records for the purpose of identification, diagnosis, prognosis, and/or by the courts in sentencing, and Gemeinschaft Home in the investigation and/or treatment supervision of my case for probation, incarceration, post release supervision and/or parole to include any application for supervision transfer to any Virginia Department of Corrections agency or facility or any member of the Interstate Compact.

III. Use of Information – All Clients

I understand that (1.) the use, disclosure, and re-disclosure of such information is made only in the investigation and/or supervision of my case; (2) while under investigation, incarceration and/or supervision I cannot revoke this consent; and (3) this consent will terminate upon my release from the custody of Gemeinschaft Home and their authorized agents of when there is a substantial change in my correctional, probationary or parole status.

IV. Understanding – All Clients

By affixing my signature, I attest to having read, or been read, this document and fully understand same. I consent and request that all such persons or agencies accept a photocopy of this authorization as valid authorization to give such information or records. I also understand that my disclosure and any re-disclosure is bound by Part 2 of Title 42 of the Code of Federal Regulations governing confidentiality of patient alcohol and drug use and applicable Qualified Service Organization Agreements.

Date

Resident Signature

Date

Staff/Witness Signature



Gemeinschaft Home Day Report Medical History Screening Form

Circle YES or NO...

Have you or any immediate family member ever been told you have:

	<u>Self</u>	<u>Family</u>
Angina/chest pain	Yes ... No	Yes ... No
Cancer.....	Yes ... No	Yes ... No
Diabetes	Yes .. No	Yes No
High blood pressure.....	Yes .. No	Yes No
Heart disease.....	Yes ... No	Yes No
Multiple Sclerosis.....	Yes...No	Yes....No
Osteoporosis	Yes .. No	Yes No
Osteoarthritis	Yes ... No	Yes No
Rheumatoid arthritis	Yes ... No	Yes No
Stroke.....	Yes ... No	Yes No
Thyroid problems.....	Yes...No	Yes....No
Tuberculosis.....	Yes...No	Yes....No

In the past **3 months** have you had or are you currently experiencing:

- A change in your health Yes No
- Changes in appetite..... Yes No
- Changes in bowel or bladder Yes No
- Depression Yes No
- Difficulty sleeping Yes No
- Dizziness..... Yes No
- Fever/chills/sweats..... Yes No
- Nausea/Vomiting Yes No
- Numbness or tingling..... Yes No
- Shortness of breath Yes No
- Under stress Yes No
- Unexplained weight change..... Yes No
- Upper respiratory infection..... Yes No
- Urinary tract infection..... Yes No
- Unsafe at home Yes No

Family Physician and/or Primary Health Care Provider: Yes.....No

Doctor/Other: _____

Address: _____

City&Zip: _____

Phone: _____

Circle YES or NO...

Do you have a history of:

- Allergies/Asthma..... Yes..... No
- Anemia Yes.....No
- Blood thinning medication..... Yes..... No
- Bronchitis Yes..... No
- Domestic violence..... Yes..... No
- Headaches Yes..... No
- Hepatitis..... Yes.....No
- Kidney disease..... Yes..... No
- Rheumatic fever Yes..... No
- Recreational drug use Yes..... No
- Skin ulcers..... Yes..... No
- Stomach ulcers Yes..... No
- Sexually transmitted disease Yes..... No
- Seizures Yes..... No
- Surgeries..... Yes..... No
- Steroid medication Yes..... No
- Unexplained falls Yes..... No

Do you have a problem with ... (check all that apply)

- Hearing Vision Communication
- Speech Swallowing Balance

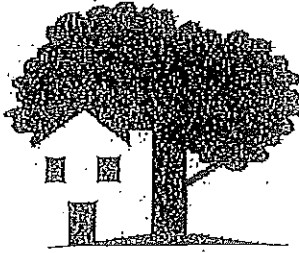
Participant Signature: _____

Date: _____

Staff Signature: _____

Date: _____

To be reviewed by nursing staff



GEMEINSCHAFT HOME

(a non-profit corporation)

CORRESPONDENCE ADDRESS: POST OFFICE BOX 288

HARRISONBURG, VIRGINIA 22802

TEL: 540.434.1690 FAX: 540.432.9479

I _____, have:

_____ received a copy of the *PROGRAM MANUAL*

_____ reviewed a copy of the *PROGRAM MANUAL* with a staff member or resident during orientation.

_____ read and accepted responsibility to follow the *PROGRAM MANUAL*

Signature of resident

Signature of staff member conducting orientation

Date

THIS DOCUMENT IS TO BE PLACED IN THE RESIDENT'S FILE.

Revised 5.15.12

Personalized Goals Sheet

In light of your vision statements, these will be the intermediate to short-term goals that will take you closer to the vision statements that you articulated. Note that some goals may be to remove barriers to your vision picture. For example: *a habit of drinking too much, or a problem with impulsive spending*. Other goals may be to acquire various things. For example: *a education in computers or training in communication*.

GOAL: _____

Step 1:

_____ Time commitment _____

Step 2:

_____ Time commitment _____

Step 3:

_____ Time commitment _____

Step 4:

_____ Time commitment _____

Step 5:

_____ Time commitment _____

Resident: _____ Date: _____ Counselor: _____ Date: _____

Resident Vision Statement

Resident Name: _____

Date: _____

Articulate the picture of your life that you wish to be experiencing in 10 to 15 years. The more you are clear and focused in your vision, the more likely you are to complete your picture. Include as many areas of your life as you can. Also try to include how you will be feeling about yourself as you describe this picture. If you chose to draw a picture rather than write, that's good too.

Some areas to be sure to include: **Relationships/Social, Employment/Economic, Housing, Hobbies/Interest, Physical maintenance, Spiritual maintenance.**

Example (for Relationship/Social): I envision being in a healthy relationship with a well-balanced wife who is a good communicator and who is not so self-centered. She is confident in who she is and she contributes to the relationship in ways that respects her rights as well as mine. I feel safe in this relationship and I feel total trusting of her motives and her intentions. We resolve conflicts well and are honest and respectful with each other.

Now it's your turn. Write a vision statement for each of the above areas of life. If more space is needed, use the reverser side of this form.

Resident: _____ Date: _____

Case Manager: _____ Date: _____

ASSESSMENT AND TREATMENT PLAN

Name: _____ **Date:** _____

Areas affected and presenting issues:

Physical	_____	Substance Abuse	_____
Emotional	_____	Legal	_____
Psychological	_____	Social	_____
Spiritual	_____	Educational	_____
Marital/Relationship	_____	Sexual	_____
Parenting	_____	Military	_____
Employment	_____	Financial	_____

Other: _____

Estimated Intellectual Functioning:

Average _____ **Below average** _____ **Above average** _____

Initial Impressions:

Treatment Recommendations:

Goals: _____

Objectives: _____

Duration: _____

Goals: _____

Objectives: _____

Duration: _____

Goals: _____

Objectives: _____

Duration: _____

Goals: _____

Objectives: _____

Duration: _____

Comments: _____

Client Signature: _____ **Date:** _____

Case Manager Signature: _____ **Date:** _____

Transition Plans

Name _____

Probation Officer _____

Reporting District _____

Presenting Issue(s)

1. Area to be addressed while in transition _____

Goals for area 1 _____

2. Area to be addressed while in transition _____

Goals for area 2 _____

3. Area to be addressed while in transition _____

Goals for area 3 _____

Resident Signature _____

Program Director Signature _____

RELAPSE Prevention PLAN

Relapse: to regress or fall back into a former state (of criminal thinking/living)

1. Name three people you can talk to if you get the urge to use drugs or commit another crime?

First Choice: _____

Second Choice: _____

Third Choice: _____

2. What are your triggers? What can you do to take your mind off these triggers?

Worst Trigger: _____

Preventative Action: _____

Other Trigger: _____

Preventative Action: _____

Other Trigger: _____

Preventative Action: _____

3. What is your worst fear about relapsing? _____

4. What is your best reason to live a clean, sober, and/or crime-free life? _____

GEMEINSCHAFT HOME EMPLOYMENT VERIFICATION FORM

RESIDENT NAME: _____

START DATE: _____

EMPLOYER: _____

SUPERVISOR'S NAME: _____

PHONE #: _____

<u>WORK SCHEDULE</u>	
	From: To:
MONDAY	_____
TUESDAY	_____
WEDNESDAY	_____
THURSDAY	_____
FRIDAY	_____
SATURDAY	_____
SUNDAY	_____

PAY SCHEDULE (circle one): DAILY WEEKLY BI-WEEKLY MONTHLY

PAY RATE \$: _____ PAY DAY: _____

EMPLOYMENT CONFIRMED BY: _____

RESIDENT MEDICATION LIST

Resident Name _____

MEDICATION : _____

Strength: _____

Directions: _____

MEDICATION : _____

Strength: _____

Directions: _____

MEDICATION : _____

Strength: _____

Directions: _____

MEDICATION : _____

Strength: _____

Directions: _____

MEDICATION : _____

Strength: _____

Direction: _____

MEDICATION: _____

Strength: _____

Direction: _____

DO NOT REMOVE SHEET FROM BOOK
Gemeinschaft Home Drug Screening Form

Resident: _____ **Number:** _____

Date	Screen Done	Urine neg. / pos.	Alcohol neg. / pos.	Full name of Tester (print full name legibly)	Code
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	
___/___/___	4 Panel BUP K2/Spice PCP	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> BAC: _____	Resident Signature: _____	

• 4 panel screens for THC/OPI/COC/MET

Codes: I (new resident intake)
Q (to fulfill resident's quota)

TV (return from transitional visit)
RT (retest) S (suspected use)

Gemeinschaft Home MONTHLY PROGRESS REPORT

MONTH:

Resident's Name:

Case Manager: Jumar Peterson

Admission Date: / /

Case Status: Active Case Inactive Case --- **Discharge Date:** / /

Client Status: CRP Self-pay

Phase I – Orientation

Phase II – Work

Phase III – Transition

Chemical Dependency Screens for this period: # Urinalysis and Alcosensor Screens:2

of positive results: 0

Indicate date(s) and results for any positive screens:0

Employment: Unemployed Employed Full-Time Part-Time

Employer and type of job:

Client Progress Ratings: N/A (resident in program 5 days or less)

	<u>Poor</u>	<u>Fair</u>	<u>Avg.</u>	<u>Good</u>	<u>Exc.</u>	<u>N/A</u>
Knowledge of chemical abuse and dependency:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognizes personal consequences of chemical use:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptance vs. denial of problem:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity level / participation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Level of motivation and demonstrated responsibility:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open & sharing vs. closed & guarded emotional expression:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate use & receipt of confrontation / positive feedback:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall expressive stance (self-discipline, self-image):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude toward & sincerity of program involvement:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates positive behavior change / issues resolution:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developing & using positive socialization / leisure skills:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use of support systems (NA / AA, church, other):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Development of long-term relapse prevention / recidivism plan:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Resident's Name:

Month:

General Compliance Level:

- Positive, demonstrates leadership qualities
- Satisfactory compliance with rules and regulations
- On behavior contract to redirect behavior
- Disciplinary staffing recently held / to be held
- Noncompliant, possible discharge recommended

Overall Participation and Progress:

- Shows significant positive movement and growth
- Works hard to redirect behavior with steady but significant progress
- Conforms and accepts structure with some behavior change
- Resists behavior change, limited therapeutic goals

Discharge Notification: Client is expected to complete the Program on / / N/A – Inactive Case

Preliminary assessment is that he/she will be discharged as expected,

and will need additional assistance from referral sources in the following areas (see next section)

- NA / AA Mental Health YMCA Educational / Vocational Services Housing
- Other:

Comments: (required for low ratings, positive chemical dependency screens, requests for assistance, and post-discharge plans, if applicable):

Case Manager: Jumar Peterson

Date: - -

Signature: Jumar Peterson (electronic signature)

Facility Information:

Executive Director: Sharon Glick

Agency: Gemeinschaft Home

Address: 1423 Mt. Clinton Pike

Harrisonburg, VA 22802

NEGATIVE POSITIVE OBSERVATION

Resident Name: _____	TIME: _____	AM PM
_____	DATE: ____ / ____ / ____	
Description of Incident: _____ _____ _____ _____ _____ _____		
Reporting Party: _____		VALID INVALID <i>(circle one)</i>
Date Communicated to Resident: ____ / ____ / ____		
Recommended Learning Experience(s): _____ _____ _____		
Learning Experience(s): _____ _____ _____		
To Be Completed By: ____ / ____ / ____		
This behavior report has been reviewed and learning experience(s) approved by a staff member: _____ (signature) ____ / ____ / ____ (date)		
Date Communicated to Resident: ____ / ____ / ____	Reporting House Rep: _____	
Learning Experience Completed ____ / ____ / ____	Witnessing Party: _____	

Gemeinschaft Home Property Damage Report

Date of Incident:	Time of incident:	Location/Rm #:
Estimated repair time:	Estimated material cost:	Total repair cost:
What property was damaged? (be specific-attach photos as needed)		
Who caused the damage?		
How was the damaged caused? (be specific-attach add'l documentation as needed)		
Who will pay for the cost of repairs?		
Who will do the actual repairs?		

Form completed by:

Name	Date
------	------

*If injuries occurred, please complete a Serious Incident Report

*If a resident caused the damage, please forward copies of this form to the Program Director for corrective action, and to the Financial Manager for billing as needed.

VIRGINIA DEPARTMENT OF CORRECTIONS
RESIDENTIAL PROGRAM TERMINATION REPORT

Participant:
Residential Program: Gemeinschaft Home

DOC #:

Pre Release Host Institution:

Post Release Probation and Parole District/DRP:

Begin Date:

Termination Date:

Drug Tests: Negative Positive

If Positive, substances(s):

Other Evidence of Use: None

Observation to Date:	Excellent	Good	Fair	Poor	Improved	Unchanged
Participation:	___	___	___	___	___	___
Attitude:	___	___	___	___	___	___
Motivation/Effort:	___	___	___	___	___	___
Awareness of Problem:	___	___	___	___	___	___
Progress to Date:	___	___	___	___	___	___

Interventions / Learning Experiences / Behavior Contracts: None.

Reason for Termination:

Signed: Richard H. Yowell

Program Staff Title: Program Manager

Date:

Distribution: Community Corrections Unit
Program File

Revised: 7/1/07

VIRGINIA DEPARTMENT OF CORRECTIONS

Residential Program Discharge Summary

Participant:

DOC #: _____

Admission Date: ____/____/____

Discharge Date: ____/____/2

Home Address: 1

City: _____

State: _____

Zip: _____

Telephone: _____

D.O.B.: ____/____/____

SSN: _____

Place of Employment: _____

Supervising Probation and Parole District/DRP: _____

Participation: Excellent, Good, Fair, Poor, Other _____

Attitude: Positive, Cooperative, Resistant, Negative, Other _____

Motivation/Effort: Exceptions, Above Average, Average, Below Average, None Shown _____

Awareness of Problem: Full Acceptance of Responsibility, Good, Accepting, Blaming, Minimizing, Denial, Other _____

Progress Noted: Excellent, Good, Moderate, Limited, Poor, Unclear, Other _____

Prognosis: Good, Fair, Guarded, Poor, Other _____

Evidence of AOD Use: _____

AA/NA Meeting Participation: _____

Aftercare Recommendations:

Random/Regular drug testing Aftercare outpatient SA Tx AA/NA Inpatient Tx Home Group Sponsor
Community Service Family/Parenting Education Anger Management Medical Follow-up
Dual Dx outpatient SA Peer Support Other (comment below)

Criminogenic Factors Identified: s

Triggers Identified: _____

Comments: .

Program: Gemeinschaft Home

CRP Self-Pay Self-Pay TTC

Richi Yowell
Program Staff

Sharron Glick
Supervisor

____/____/____
Date

Distribution: Program File, Probation and Parole Officer

Gemeinschaft Resident Exit Interview

1. If you can do it all over again, what would you do differently?

2. Name at least 5 things you can take away from this program as you leave?

1. _____
2. _____
3. _____
4. _____
5. _____

3. Traps & Triggers...

a. What are some situations that you can perceive that may be a trap or trigger for you as you exit this program?

- i. _____
-
-
-

4. **Planning: failing to plan, is planning to fail...**

a. What's your plan of success after leaving the program? If you deal with substance abuse, what are your plans to stay clean? Will you attend group meetings? Go to church? What are you going to do stay free?

Be honest... does this have success written on it?

SAMPLE

GEMEINSCHAFT HOME
COUNSELOR CONTACT NOTES

Resident Name: Doe, John

5/12/15	R. arrived at Gemeinschaft home, Intake complete. Urine Screen And Breathalyzer- R. was screened for Intake; Negative
5/12/15	Group- Resident attended PM meeting. Topic: Staying on Track-Maintaining Stability Urine Screen And Breathalyzer- R. was screened for Quota both negative (-).
5/13/15	Group- Resident attended PM meeting. Guest Speaker-Bonnie Libassi
5/14/15	Group- Resident attended AM meeting. Guest Speaker-John Butler Counseling/Contact – Told R. that counselor at prison anticipated problems. R. has a history of facility infractions...confrontations and conflicts with other inmates. Told R. that such behavior would not be tolerated here and would likely result in a PV. R. understood. Said he intends to put those ways behind him. Got to know a bit about R.'s background and current state of mind. Positive first impression, with guarded concerns. Will monitor. RY
5/14/15	Group- Resident attended PM meeting. Topic: Gratitude-The Art of Receiving
5/17/15	Group- Resident attended D-Meeting.
WE 5/17/15	RM- Resident went on <u>Job Search</u> 0 Times, <u>Pass Time</u> 2 Times and <u>Program Business</u> 0 Times
5/18/15	Group- Resident attended AM meeting. Topic: What Creates Change? Urine Screen And Breathalyzer- R. was screened for Quota both negative (-). Case Plan/Counseling – R. reports the following personal goals: <ol style="list-style-type: none"> 1. Home plan development 2. Employment 3. Reconnecting w/family (daughter). 4. Manage anger and be more patient. Discussed these goals at length w/R.
5/18/15	Group- Resident attended PM meeting. Topic: Commitment to Continuous Learning
5/19/15	Group- Resident attended AM meeting. "A New Beginning: Adjusting to Life on the Outside"
5/19/15	Group- Resident attended PM meeting. Topic: Coping With Adversity
5/20/15	Group- Resident attended AM meeting. Topic: Where do I want to go in life?
5/20/15	Group- Resident attended PM meeting. Topic: Relapse Prevention-Cross Addictions
5/21/15	Group- Resident attended AM meeting. Guest Speaker-John Butler
5/24/15	Group- Resident attended D-Meeting.
5/25/15	Group- Resident attended AM meeting. Topic: Self-Awareness- Where Do I Come From?
5/25/15	Group- Resident attended PM meeting. Topic: Relationships-The Art of Forgiving
WE	RM- Resident went on <u>Job Search</u> 0 Times, <u>Pass Time</u> 2 Times and <u>Program</u>

5/25/15	<u>Business</u> 0 Times
5/26/15	<u>Group-</u> Resident attended AM meeting. Topic: Who Am I? (My Identity) Be The Man
5/26/15	<u>Group-</u> Resident attended PM meeting. Topic: The States of Change
5/27/15	<u>Group-</u> Resident attended AM meeting. Topic: Making Good Decisions
5/28/15	<u>Group-</u> Resident attended PM meeting. Topic: How Do I Get Where I'm Going? (Setting Goals)
5/28/15	<u>Group-</u> Resident attended AM meeting. Topic: Reasons for Relapse
WE 5/31/15	<u>RM-</u> Resident went on <u>Job Search</u> 1 Times, <u>Pass Time</u> 2 Times and <u>Program Business</u> 1 Times
6/2/15	<u>Group-</u> Resident attended PM meeting. Topic: Respect for self and others. <u>Case Plan/Counseling</u> – R. is amenable to date. Attends groups. Actively participates. Does chores without prompting. Getting along with other residents. Not working yet. No dirty US's. Concerned about home plan. Made initial contact with daughter after long pull of incarceration. R. nervous about the future of this relationship. Daughter is somewhat standoffish, as one might expect. Encouraged R. not to crowd her but to give her space...maybe only 1 contact per week for a while. R. acknowledged. R. admits to struggling with a range of emotions but is also determined to succeed. Praised R. for his honesty and for struggling valiantly to date. RY.
6/3/15	<u>Group-</u> Resident attended AM meeting. Topic: Resistance to change: minimizing, rationalizing, justifying, and blaming
6/3/15	<u>Group-</u> Resident attended PM meeting. Topic: Health of Spirit (believing in yourself)
6/4/15	<u>Group-</u> Resident attended AM meeting. Guest Speaker-John Butler
WE 6/7/15	<u>RM-</u> Resident went on <u>Job Search</u> 0 Times, <u>Pass Time</u> 1 Times and <u>Program Business</u> 1 Times
6/9/15	<u>Observation-</u> R. has been doing extremely well while in the program. R. has always been respectful to staff and other residents. R. has been willing to go above and beyond what is required of him even assuming the position as assistant house leader. R. has been working odd jobs and volunteering. R. commented that "he loves being here" It is staff observation that R. needs the space to process and determine who he is as well as processing his life experiences. JP
WE 6/14/15	<u>RM-</u> Resident went on <u>Job Search</u> 2 Times, <u>Pass Time</u> 2 Times and <u>Program Business</u> 1 Times
6/18/15	<u>Urine Screen And Breathalyzer-</u> R. was screened for Quota blew .014 on Breathalyzer and negative on Urine Screen. Resident went out on pass and went to a restaurant. Said he wanted to feel like a man and have a beer. R. reflective and remorseful. RY
	<u>Sancton:</u> R. was placed on Grounds for 21 days and removed from house leadership as a result of his positive alcohol screening. RY
6/21/15	<u>RM-</u> Resident went on <u>Job Search</u> 1 Times, <u>Pass Time</u> 0 Times and <u>Program</u>

	Business 0 Times
6/26/15	<p>Observation- R. expressed remorse over his actions and although removed for house leadership he continues to help out in the house. JG</p> <p>Case Review/Counseling – Met R. this date to review Case Plan and talk more about recent relapse. R. communicated stress and frustration, and that decision to drink was “spur of the moment”. It just crept up on him. R. still not employed but was taking house duties and leadership seriously until relapse. R. bitter but understanding about being removed from leadership. R. reports positive contact with daughter (smiled) and remains hopeful. R. still not sure of home plan. Praised R. for his “matter of fact” approach to recent adversities. Encouraged R. to be a house resource/leader even though he no longer has the actual title. RY.</p>
7/5/15	Urine Screen And Breathalyzer- R was screened for Quota both negative(-).
WE 7/12/15	RM- Resident went on <u>Job Search 0 Times</u> , <u>Pass Time 2 Times</u> and <u>Program Business 0 Times</u>
WE 7/19/15	RM- Resident went on <u>Job Search 0 Times</u> , <u>Pass Time 1 Times</u> and <u>Program Business 1 Times</u>
WE 7/26/15	RM- Resident went on <u>Job Search 0 Times</u> , <u>Pass Time 2 Times</u> and <u>Program Business 0 Times</u>
7/28/15	Counseling/Contact/Sanction- Resident is not employed but was seen on the back porch hanging out when he should’ve been in PM group. Was warned by another staff member about same issue yesterday. R. placed on grounds until Monday 8/3. RY
WE 8/2/15	RM- Resident went on <u>Job Search 0 Times</u> , <u>Pass Time 0 Times</u> and <u>Program Business 1 Times</u>
8/7/15	Case Review/Counseling - R. is doing well. R. was taken off of grounds and is actively participating in groups. R is having anxiety about transitioning out of the program. He feels that 90-days is not long enough for him. He feels that he still has some growing and self-discovery to do. Exploring options. Referral made to CSB. Intake pending. RY
8/8/15	Urine Screen And Breathalyzer- R. was screened for Quota; Negative
8/15/15	Note: Resident remains in good standing with program. R. working and making positive preparations for life after the GH program. RY