

DEPARTMENT OF VETERANS AFFAIRS VA Gulf Coast Veterans Health Care System 400 Veterans Avenue Biloxi, MS 39531

Dear Veteran:

It is important that you read this letter thoroughly and carefully.

Thank you for your military service and interest in our Medical Center's Psychosocial Residential Rehabilitation Treatment Program (PRRTP) Post Traumatic Stress Disorder (PTSD) track. Our PRRTP-PTSD Track is approximately a twenty-bed program that is eight-weeks in length. It is a highly-structured and intensive residential treatment program designed to help eligible veterans who are having psychological and social problems associated with military-related trauma experienced during active military service. Because of limited time and resources, **your reason for admission will be our focus of treatment: problems associated with post-traumatic stress.**

Our PRRTP-PTSD Track is generally reserved for veterans who require more intensive care than can be provided in an outpatient setting. A need for more intensive care is most effectively determined by an evaluation accomplished over a period of time by outpatient PTSD treatment providers.

Your application process for admission to our PRRTP-PTSD Track should thus **begin** by you contacting your nearest Vet Center, a VA outpatient PTSD Clinical Team (PCT), or a VA or community-based Mental Health Clinic. Treatment providers at these facilities can evaluate your treatment needs and provide early-on care.

Your outpatient PTSD treatment provider can also help you apply for admission to our program. Completed applications should be sent to our facility at the address provided on the Veteran Admission Form Checklist. When received, applications are examined for completeness. Complete applications that provide needed information are reviewed by the PRRTP-PSTD Track admission committee. The committee reviews the applications for appropriateness, including both a need for more intensive treatment and the ability to participate and benefit from our program. Veterans who are accepted by the committee will be contacted by a PRRTP Social Worker with a scheduled admission date and information that will help them present at that time.

Please review your application forms carefully. We do not consider applications that are sent to us that have missing documents or other information. We hold them pending receipt of all the missing information.

The "Veteran Admission Form Checklist" has been included in this application packet and outlines all of the documents needed for admission consideration. Additionally, we have included a Program Guide in this material that may serve to answer some questions you have about the program.

Completed application forms expedite evaluation and admission and help us provide a veteran with the best care. If you have any questions or need additional information, please call Marilyn Fairley, our Program Support Assistant, at toll-free at 1-800-296-8872 ext. 5396 or (228) 523-5396. Thank you.

Sincerely,

Stephanie S. Dutton, Psy.D. PRRTP PTSD Psychologist

May 08, Version 02

VA Gulf Coast Veterans Health Care System Psychosocial Residential Rehabilitation Treatment Program Post Traumatic Stress Disorder Track

Veteran Admission Form Checklist

The following is a list of all forms and necessary information that are to be completed and returned in order to be considered for admission:

"Clinical Referral Form" to be completed by Mental Health Specialist, such as a Doctor, Psychologist, Social Worker, or Vet Center Counselor.
<u>History & Physical</u> completed by a Primary Care Physician. History & Physical should be completed with 30 days of receipt of application. The veteran or the veteran's mental health provider should set up an appointment with the veteran's PCP.
Urine Drug Screen documented in the Medical Chart. The veteran's mental health provider or PCP should set up an appointment with the Lab to have a UDS completed. Positive results do not mean an automatic denial of admission. On the contrary, they assist staff in determining the best course of treatment.
"Veteran Application Questionnaire" to be completed by the applying veteran.
"Pre-Admission Self Medication Agreement" signed by the applying veteran.
"Treatment Contract" signed by the applying veteran.
A copy of the applying veteran's "Statement of Active Military Service (DD-214)" documenting war-zone assignment for veterans who are not already registered for eligibility within the VA Gulf Coast Veterans Health Care System.

Applications must be complete with all documentation in order to be considered for admission. Once application forms have been completed please send packets to the address below.

Mail your **completed** application forms to:

VA Gulf Coast Veterans Health Care System Attn: PSA (Marilyn Fairley), PRRTP-PTSD Track (116B) 400 Veterans Avenue Biloxi, MS 39531

VA Gulf Coast Veterans Health Care System, Biloxi

PSYCHOSOCIAL RESIDENTIAL REHABILITATION TREATMENT PROGRAM POST TRAUMATIC STRESS DISORDER TRACK

ADMISSION CRITERIA

- 1. The veteran's current problems are primarily due to Post Traumatic Stress resulting from <u>combat-related trauma</u> experiences.
 - Veteran's with military-related, non-combat trauma will be considered based on availability of services and appropriateness of treatment.
 - Veterans with a primary diagnosis of Military Sexual Trauma will best be served at VA treatment programs that focus on these specific issues. Such programs are available in the VA. Please speak with your mental health provider for such referrals.

2. The veteran:

- Is eligible for VA services;
- Has a military-related PTSD diagnosis, as categorized in the current Diagnostic and Statistical Manual of Mental Disorders, with supporting history documented on record;
- Has been engaged in outpatient treatment for a minimum of three months, in a group setting, preferably specific to PTSD, and this level of care has been beneficial but not sufficient;
- Has been referred to the program by his/her Mental Health provider;
- Is motivated to participate in an eight-week PTSD residential rehabilitation treatment program;
- Is not psychotic, suicidal or assaultive and does not have any other psychiatric disorder that would limit his/her ability to fully participate in treatment;
- Medical conditions are stable and vet has no psychiatric or medical conditions that impair participating and benefiting from psychosocial treatment;
- Is knowledgeable of and compliant with prescribed medications, and is able to correctly and safely self-administer them as ordered and is totally independent in self-care skills;
- Is capable of living on an open unit with very minimal supervision;
- Is able to self preserve in case of an emergency;

- Agrees not to abuse alcohol, prescription, or illicit drugs when entering the program;
- Submits a completed application packet;
- Has no legal charges or court proceedings pending (veteran may be on probation or parole status but will need to notify and receive approval from probation officer to travel to Biloxi VA Medical Center from out of State and to enter the eight-week PRRTP- PTSD Track). Convicted/Registered Sex Offenders are not accepted to the program due to proximity to schools and childcare centers;
- Has not been in a residential or inpatient PTSD treatment program within the past two years;
- Agrees to attend regular outpatient follow-up treatment for a minimum of six months after discharge.
- 3. Prior to beginning the program, the veteran must have an aftercare housing plan with a stable living situation to be discharged to upon completion of the 8-week treatment. This program is <u>not a homeless treatment program</u> and veterans will be unable to remain in the Residential facility following completion of treatment.
- 4. Veterans recommended for admission to our program are responsible for their own transportation to and from this Medical Center. At the time of admission, each veteran must have pre-arranged return transportation and, as appropriate to travel planning, have either a return ticket in hand or maintain sufficient funds to purchase one.

Department of Veterans Affairs

VA Gulf Coast Veterans Health Care System 400 Veterans Blvd. Biloxi, MS 39531

PSYCHOSOCIAL RESIDENTIAL REHABILITATION TREATMENT PROGRAM POST TRAUMATIC STRESS DISORDER TRACK

CLINICAL REFERRAL QUESTIONNAIRE

The following information is required when referring veterans to the Psychosocial Residential Rehabilitation Treatment Program- PTSD Track at the Biloxi GCVHCS.

Please Note:

This referral information needs to be completed by a Mental Health Specialist such as a Psychiatrist, Psychologist, Psychology Resident, Social Worker, or Vet Center Counselor.

Please attach any additional supporting notes that you believe will be helpful.

1. Veteran's Identifying Data:	Date:	SSN:		
Name:				
2. Is the veteran's application comp	plete? Y	es No		
3. How long has this veteran been	in treatment wi	th you?		
4. Does he/she have any medical p	roblems/specia	l needs/disability?		
5. List diagnoses veteran has (if an	y) in addition t	o PTSD		
6. Please verify that the veteran me	eets admission	criteria.		
a. Veteran's current problems a PTSD resulting from comb			Yes _	No
b. Has significant symptoms of	FPTSD from co	ombat-related trauma.	Yes _	No
c. Is veteran psychotic. A suici	de or homicide	risk.	Yes _	No
d. Has pending legal problems.			Yes _	No
e. Veteran has been convicted/r	egistered as a s	ex offender.	Yes _	No
f. Is veteran willing to remain a Intensive PTSD program.	lcohol/drug fre	e while in the	Yes _	No
g. Is veteran taking any prescrib If yes, what medication(s): What is it prescribed for:			Yes _	No

h. Does veteran have any medical or cog which might preclude participation	-	YesNo
i. Is veteran willing/able to engage in group treatment.	intensive	YesNo
j. Is veteran receptive to feedback and changes in self.	willing to make	YesNo
7. Current and provisional diagnoses:		
Axis I:		
Axis II:		
If no Axis II diagnosis, do Impairing traits? If yes, please list them:	•	
Axis III:		
Axis IV:		
Axis V: (current GAF)	(highest past ye	ar GAF)
8. Has the veteran's Primary Care Provide and medically cleared veteran for	admission:	YesNo
9. Please include any additional informatiteam:		
10. Referring source data: (please print)		
a. Referring person:		
b. Agency or program:		
Address:		
City:	State: Zip:	
11. Referring source signature:		
Signature		Date

Mail to: VA Gulf Coast Veterans Health Care System Attn: PSA, PRRTP-PTSD Track (116B) 400 Veterans Avenue Biloxi, MS 39531

Pre-Admission Self Medication Agreement

- 1. I agree to take full responsibility for my medicine while in the PRRTP.
- 2. I agree to bring all of my medications, including over-the-counter medications and herbal supplements, to the PRRTP to be reviewed by the PRRTP physician or nurse practitioner.
- 3. I will not take any medications not approved by the PRRTP.
- 4. I agree to have all of my medications filled prior to admission and have adequate refills for the entire 8-week program.
- 5. I will take my medications as ordered and will ask the pharmacist, physician, or nurse practitioner if I have questions regarding my medications.
- 6. I will keep my medications locked in my locker at all times and be responsible for the key.
- 7. If I do not want to take a medication, I will discuss it with the PRRTP physician or nurse practitioner before I stop taking it.
- 8. I agree not to share my medications with anyone.
- 9. I know the name, purpose, dosage and dosing times of all my current medications.

Veteran's Signature	
Date	_

VA Gulf Coast Veterans Health Care System Psychosocial Residential Rehabilitation Treatment Program (PRRTP) Post Traumatic Stress Disorder (PTSD) Track

Veteran Application Questionnaire

DIRECTIONS: To be completed by the veteran. Please **complete** the following questionnaire giving all the information requested. <u>If any part of this questionnaire is left blank, we can not process</u> this application.

If you have any questions regarding this questionnaire, call toll-free 1-800-296-8872 or (228) 523-5396.

A. BIOGRAPHICS:	DATE:			
NAME:		RACE:	-	
SOCIAL SECURITY #		_ RELIGION:		
DATE OF BIRTH:		AGE:		
PRESENT ADDRESS:		CITY:		
COUNTY:	STATE:	ZIP	CODE:	
HOW LONG HAVE YOU LIV	/ED HERE?			
PRESENT TELEPHONE # &	AREA CODE:			
Name, address & phone number	er of person who will alway	s know where yo	u are:	
B. SOCIAL HISTORY:				
1. Current marital status: _	How many times	Children		
2. Current living arrangement	ents: (Please circle) W/Self Home		gnificant Other	W/Friends
C: PSYCHOLOGICAL TRE	EATMENT:			
1. Are you currently in the	rapy? No Yes	Where?		
With whom?		How lo	ong?	
Have you been t	reated for a mental health	problem other tha	n PTSD? If yes	, please
list				
2. How long have you been	n alcohol/drug free?			

3. List of medications you are currently taking (please feel free to attach an additional she needed):	eet if
4. Do you have any medical problems or special needs, we should know about?	
NoYes If yes, please state:	
5. Please list your goals for the PRRTP- PTSD Track.	
6. In order to achieve these goals, I am willing to engage in the intensive PRRTP- PTSD Tr	rack to
make the necessary changes in myself.	
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 D. EMPLOYMENT HISTORY: 1. Current employment status: a. Full time Part time Self employed 	
Place of employment	
Description of Work	
Length of time employed	
b. Unemployed : Last worked:	
Do you have a service connected disability? No Yes	
If yes, what is it for? What percentage	%
E. LEGAL PROBLEMS:	
1. Are you currently: on probationYes No awaiting a court appearanceYesNo awaiting sentencingYesNo facing chargesYesNo 2. Are you a convicted/registered sex offender? No Yes	

F. MILITARY HISTORY:

Branch of Service:	· · · · · · · · · · · · · · · · · · ·	Dates of Active Duty:
		Yes Please describe:
Is your trauma combat related? having difficulty in completing provider):	No this section	Yes Please describe your trauma below. (If you arn, please seek assistance from you mental health care
2		
3		

Combat time	Combat unit	MOS
Month/Year		
4. If you were injured in combat, pleas	se describe:	
I have read and the Program Guide, i of the PRRTP-PTSD Track.	ncluding all of the F	Rules, Regulations and Services
I agree to abide by all the rules and reg	gulations outlined by t	the program guide.
If I do not understand something out understanding from the PRRTP-PTSD		•
I understand that the staff of the PRR thus do not discuss or provide informat		• •
I further understand that if I have a disability claim or compensation, I need or wait until I return home after dischar	ed to get it resolved p	
Applicant Name (Please Print)		
Applicant Signature		Date

Psychosocial Residential Rehabilitation Treatment Program (PRRTP) Post Traumatic Stress Disorder (PTSD) Track

Treatment Contract

The staff of the PRRTP-PTSD Track includes individuals who have expressed a desire to work with veterans in an intense, sometimes emotionally painful situation. It is usually a desire based on a special interest in veterans and past, positive experiences with them. The staff is aware of the sacrifices veterans have made, and seek to provide treatment opportunities appropriate to that sacrifice.

Our mission is to provide a safe place in which healing can begin and which makes the most of available resources. With that, the PRRTP-PTSD Track staff endorses the following treatment quidelines:

guidelines:
* Veteran's initials in blank indicate understanding of the guideline and willingness to comply
1. Veterans should recognize that simple presence in the program will not result in improvement of PTSD symptoms. They need to be committed to change in their attitudes, perceptions, and ways of coping with emotional problems and life stressors.
2. Honest sharing of experiences, feelings and ideas as well as openness to different opinions is necessary for success in our program. Therefore, confidentially of any information shared in the program must be maintained.
3. Information may be released without veteran's consent if/when a serious threat toward self or other(s) is made. This is also the case should involvement in child or elder abuse be revealed.
4. Participation in scheduled treatment activities and assignments are not optional. Unexcused absences from any treatment activity or non-compliance with assignments will require intervention by the treatment team. Chronic medical problems will need to be addressed prior to admission and must not interfere with treatment. Medical appointments, lab-work, and tests are not to be scheduled during group or treatment times.
5. Use of non-prescription drugs and alcohol is incompatible with treatment. Observed urine screens will be given upon admission and after passes. Random urine screens and breathalyzers may be performed during the program. Refusal to give a urine specimen or be breathalyzed will be treated as an admission of substance use. A positive finding on any of these screens may result in discharge from the program.
6. Honesty, sharing and growth can only occur in a safe place. Having weapons, physical violence, verbal abuse and threats of violence against another veteran or staff will result in discharge from the program. VA Police also reserve the right to give tickets for such offenses.
7. Wearing of fatigues is prohibited.
8. No passes will be given until after <u>3-weeks</u> of initial treatment is completed and passes are at the discretion of the treatment coordinator. Passes <u>must</u> have a therapeutic design and <u>must</u> be approved by the treatment coordinator. Sign-ins and sign-outs must be done for each pass.
9. Individuals accepted into this program are required to abide by all Veterans Affairs policies and regulations governing behavior and conduct as well as unit policies. This program is not a homeless treatment program and veterans will be unable to remain in the Residential facility following completion of the 8-week treatment program.
I have read the Program Description, Treatment Contract and agree to abide by the guidelines set forth.

Date

Veteran's signature

May 08, Version 02

VA Gulf Coast Veterans Health Care System, Biloxi

PSYCHOSOCIAL RESIDENTIAL REHABILITATION TREATMENT PROGRAM POST TRAUMATIC STRESS DISORDER TRACK

PROGRAM GUIDE

Veterans participating in the Psychosocial Residential Rehabilitation Treatment Program (PRRTP) PTSD Track will be residing on the PRRTP unit. This Unit has a Resident Handbook which will be given to you at the time of admission and it is required that you read and understand it. However, we have highlighted some of the residential requirements here.

RULES, REGULATIONS AND SERVICES:

ALCOHOL/DRUGS: No alcohol or drugs are permitted on the premises. The Gulf Coast VA has a zero tolerance policy concerning the introduction of alcohol or drugs on VA property. Therapy is a part of every moment you are here. In order to fully participate and benefit from this program you must be substance free. The use of any non-prescribed drug, consumption of any alcoholic beverage either on or off station while in the program will be grounds for discharge. The possession, provision of or sale of alcohol or drugs is prohibited and will be referred to the proper authorities and will also constitute grounds for discharge.

A urinalysis will be done upon admission and randomly during program participation, especially upon return from pass and when the community or staff has concern about a veteran's possible use. An observed specimen is to be submitted within two hours of request. Refusal to comply with this rule is treated as an admission of use and is a discharge offense.

ALCOHOL ANONYMOUS: Residents in recovery will have access to Alcoholics Anonymous and Narcotics Anonymous while participating in the program.

ATTENDANCE AND PARTICIPATION: Psychological testing, meetings, classes, group therapy sessions, Memorial services, recreational activities, exercise activities and resocialization activities are important. All are scheduled into your Treatment Program for their usefulness in overcoming PTSD symptoms. Full treatment means both attending, and participating in all program activities.

AUTOMOBILES AND OTHER PRIVATELY OWNED VEHICLES: Automobiles are permitted during your stay. All vehicles should be parked in the designated area.

CANTEEN: Canteen hours are 7:00 am to 1:00 p.m. (Monday-Friday). The Retail Store hours are 7:00am to 3:30pm. The canteen and retail store are closed weekends and Federal holidays.

CELLULAR PHONES/BEEPERS/PAGERS: Must be turned off during the hours of 8:00 a.m. – 4:00 p.m. and during evening group times.

CHURCH SERVICES: Religious services are conducted in the chapel on station. Hours are posted on the bulletin board on the Residential unit.

COMMUNITY/PATIENT ADVISORY COUNCIL COMMITEE: Patient Advisory Council meetings and Community Groups are designed to give you a measure of control over your environment. The goal is to help you become fully self-sufficient as quickly as possible. For this reason, both attendance and participation in these meetings is of the greatest importance.

COMPENSATION AND PENSION CLAIMS: Our program is treatment focused and issues related to VA disability claim or compensation will not be discussed while in the program. These issues need to be resolved prior to admission to the program, or you will need to wait until you return home after discharge.

CONSENTS: Written consent is necessary prior to the release of confidential personal information, the use of photographs, for surgical procedures, etc.

CURFEW/LIGHTS OUT: All residents must be on the unit by 10:00 p.m. Development of improved sleep patterns is an important part of treatment. Residents are to be in pajamas prior to retiring and in bed with television off and overhead room lights out by 11:00 p.m.

DEHUMANIZATION: One treatment goal is to re-enter the broader community. This requires practicing mutual respect and developing the concept of equality. Remember, your rights end where another person's begins. Certain behaviors inhibit this growth process and will not be allowed. These behaviors include but are not limited to:

Name Calling
Intimidating Speech or Gestures
Use of Racial or Sexual Slurs
Persistent Profanity
Hostile or Degrading Statements or Remarks
Threats or violence directed against persons or property

DESTRUCTIVE/IMPULSIVE BEHAVIOR: Maintaining an environment where both residents and staff are safe from physical harm is a top priority. Each resident is responsible for their own conduct on the unit. **Acts of violence and threats cannot be allowed and will result in discharge.** An act of violence or assault refers to behavior where a resident either attempts to do or does physical harm to persons or properties. Such behavior will result in discharge and, depending on the circumstances, referral to the proper authorities. Although we expect to deal with feelings of deep desperation and anger, our unit is not equipped philosophically nor environmentally to manage suicide/homicide risks.

DRESS CODE: Physical appearance is a clue to psychological well being; therefore, it is expected that you will be presentable at all times. Do not wear any kind of military fatigues. All alarms on watches are to be turned off during groups. No sunglasses or hats are to be worn in group, except for a medical condition. If you wear shorts, they must be mid-thigh length, no shorter. Clothing will not be permitted that promotes drug, alcohol, or casino gambling. Wearing apparel that promotes negative racial relations (i.e., swastikas, Rebel flags, or gang-related information) will not be tolerated.

FAMILY INVOLVEMENT: Our treatment approach involves family participation as part of your recovery. Your loved ones have been greatly affected by your behavior as they coped with your anger, fears, depression and isolation. PRRTP-PTSD staff will contact family members to determine ways in which family members may have a role in your recovery. Problems have arisen with communication, relationships, responsibilities and roles. Counseling is available to your family and significant others. Visitation, which does not interfere with scheduled programming, is strongly supported. Refer to **Visitation**.

GAMBLING: Gambling is not permitted on station.

GROUP ABSENCE AND TARDINESS: In emergency situations when absence or tardiness cannot be avoided, it is the **veteran's responsibility** to inform the leader of the reason for absence or tardiness. The group leader will decide whether this will be treated as an excused or unexcused absence. If a resident is asked to leave a group because of disruptive behavior, it will be considered an unexcused absence. The Treatment Team will deal with unexcused absences and late arrivals to groups and activities. Roll is taken in each group.

GROUP THERAPY: Group therapy is the core treatment method. It combines a healthy amount of group support while allowing confrontation of issues as needed. Trust is an essential element, but it grows slowly as we get to know each other. Groups will be used to achieve many different treatment objectives, including those of recreational therapy. It is the resident's responsibility to be on time for all groups.

HOUSEKEEPING: You are expected to have your bed made, and your area neat and clean by 7:00 a.m. every morning except on weekends when you may wait until 10:00 a.m. It is your responsibility to keep the entire unit neat and clean. Personal clothing and items are to be kept locked in your lockers. You may display personal items and add touches to the decoration of your room, which are not offensive to others and consistent with the philosophy of the program.

LAUNDRY: There are washers and dryers available free of charge. You are expected to keep the area clean.

LOCKERS AND KEYS: You are responsible for keeping all your personal items, medications and valuables that you chose to keep on the unit locked in your assigned locker. A key will be issued to you upon admission.

LOCKED DOORS: Our doors are locked after 10:00 p.m. on weekdays and on weekends.

MAIL: Mail is usually delivered to the unit by 10:00 a.m. You may check at the PRRTP Operations Office station for mail after 11:00 a.m.

MEALS: Meals are served in the dining room at the following times:

Breakfast ----- 7:00 a.m. - 7:45 a.m. Lunch ----- 12:00 p.m. - 12:45 p.m. Dinner 5:00 p.m. - 5:45 p.m.

A dietitian is available for nutrition counseling. It is the resident's responsibility to be on time for meals.

MEDICAL/PHYSICAL PROBLEMS: The PRRTP-PTSD Track is geared toward the improvement and resolution of psychiatric problems. The concentrated, compressed schedule is a demanding and rigorous one, requiring that you be able to get around on your own, and be fully able to participate. **While minor medical concerns can be handled, major problems will have to be addressed either before or after the program.**

MEDICATION: Prior to being admitted to our program you will be required to have all of your medications filled and adequate refills for the entire 8-week program. At the time of admission a physician will need to review all of your medications, including any over-the-counter medications and herbal supplements. Additionally, you will be required to take full responsibility for keeping and taking your medicines. If any additional medications are needed following your physical at the time of admission, these will be prescribed to you. Our philosophy is to use the absolute minimum medication necessary to insure that you are alert and able to deal with program and personal issues. Exceptions will be determined by the treatment team. Work done here will often result in tension, anxiety and discomfort; however, we are committed to using alternative ways to approach this challenge. In this case, the best meds are less meds.

PASS POLICY: Passes are earned privileges, which are granted for therapeutic reasons. Eligibility for the overnight pass begins after your first 21 days of treatment. The two kinds of passes are day and overnight pass. While day passes can be granted for periods up to 10:00 p.m., they are not granted during scheduled programming. Overnight passes will not begin until after your last class on Friday, with a plan of return on Sunday evening. Complications in treatment or noncompliance with treatment may result in the denial of pass requests. Emergency passes will be dealt with on an individual basis by the Treatment Team.

Pass procedure entails that you personally: (1) get a pass form signed by your PTSD Track Case Manager, (2) if approved, get pass signed by your PRRTP Case Manager, (3) turn in pass to the PRRTP Operations office by Wednesday at 1:00 p.m., (4) at the time of departure, report to the Operations office, turn in your badge, pick up your pass slip and sign out, (5) sign in at the Operations desk upon return.

Special Holiday passes can be granted in accordance with hospital policy and at the discretion of the Treatment Team.

PATIENT'S LIBRARY: The Patient's Library is located on the 3rd Floor of Bldg. 19 in the Residents' living quarters and is open at all times.

PERSONAL HYGIENE: All residents are to respect their fellow group members and staff by maintaining a high quality of body cleanliness. Please bring all necessary hygiene supplies (i.e. soap, deodorant, toothpaste, washing powder, etc...) with you.

PERSONAL JOURNAL: Each resident is given a journal upon entering the program. This journal is to be used for your autobiography, group assignments, and a daily account of your thoughts, feelings, and experiences, creative writing and generally as a repository for your past and a treasure chest for your future.

PETTY OFFENSES: Station policy for petty offenses other than some parking violations requires the issuance of a U.S. Court Violation Notice by VA Police. Violation notices usually result in a fine. Disposition of a violation notice can be accomplished by contacting VA Police.

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PROGRAM SCHEDULE: The activities in this program are geared toward your recovery; therefore, your participation is absolutely necessary. While you will be informed of optional activities, **all others are required**. Please refer to **ATTENDANCE AND PARTICIPATION**. The unit schedule is located in the program folder issued to you upon admission.

RAZORS: Cartridge type razors such as Techmatic, Trac II, etc., are allowed. Electric shavers must be approved by Engineering Service. For information on procedure, inquire at the Operations Office. All straight edge, double edge and injector razors are prohibited.

SAFETY: Safety is a major concern to all of us. On admission to the unit you will be shown the location of all exits from the unit including fire escapes. You will also be shown the location of fire extinguishers. Cooperation in maintaining a safe environment is a responsibility we all share.

SICK CONTRACTS: Sick contracts are not acceptable. Sick contracts involve collusion between residents to keep secrets to prevent consequences for behavior inconsistent with treatment goals. Honesty, openness and acceptance of responsibility for behavior are keys to improvement and recovery. When you and a fellow resident(s) enter a contract to keep secrets, you engage in behavior designed to delay your progress and continue maladaptive behavior patterns, which can be emotionally damaging. To insure a healthy community, sick contracts are not acceptable.

SIGN OUT: Any time you leave the station, you must sign out at the Operations office and sign in upon returning.

SLEEP PATTERNS: Throughout the years, many veterans have developed erratic sleep habits, which incorporate daytime sleep and nighttime wakefulness. Inadequate rest contributes to anxiety, fatigue, irritability and inattentiveness. To gain maximum benefits from this program and to function well in the usual daily work environment, a major goal here is to develop more healthy sleep patterns. The task is to change old habits.

To participate fully, you need to be well rested and alert. The program is scheduled for nighttime sleep; therefore, staff will assist you with the adjustment to this pattern through relaxation therapy and stimulus control.

SMOKING: Smoking is not permitted in any building on this VA Medical Center. Smoking in any building may result in a fine and **subsequent discharge** from the program. Designated smoking areas are available and you will be shown the locations of such areas upon admission.

TELEPHONE: There is a residents' telephone is located in the Visitor's Lounge. In keeping with our community respect for one another, calls are not to exceed five (5) minutes. Program activities will not be interrupted for personal telephone calls. Messages will be taken whenever possible. The telephone number is (228) 523-5284. Residents have telephones in their rooms as well.

TREATMENT TEAM: The staff working with you in the resolution of PTSD related problems are your treatment team. Program priorities and policy are determined by the treatment team, which generally consists of a psychologist, a social worker, a chaplain, a recreational therapist, and other hospital staff as required.

UNAUTHORIZED ABSENCE: Unauthorized absence (UA) results in discharge. To avoid UA status, you must have a pass, sign out at the Operations office and sign back in on time upon returning from pass. Also to avoid UA, you must be present for the 11:00 p.m. bedcheck and the bedchecks that follow throughout the night.

VISITATION: A major emphasis of treatment is to facilitate reconnection with and maintenance of a healthy relationship network with family, friends and significant others. Visitors who have been using substances as drugs or alcohol and whose behavior is disruptive will not be welcome. **Visitors cannot visit in your room, the hall leading to the sleeping quarters or the dayroom**. Family visitation is strongly encouraged during weekends. Program activities will not be interrupted for visitation.

WEAPONS: All weapons, firearms, knives, including pocket knives, are strictly prohibited in accordance with Federal Regulations. **Possession will result in discharge, referral to the proper authorities and denial of readmission to the unit.**