



Caring for

Community

# NRI Community Services, Inc

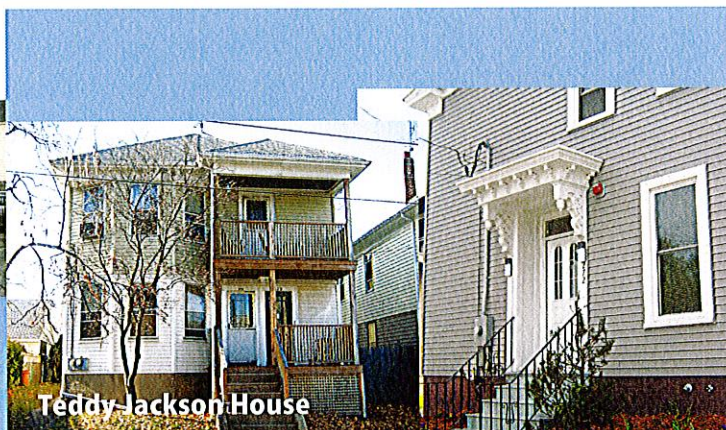
*A Non-Profit Provider of Mental Health & Substance Abuse Treatment*

## RECOVERY HOUSING Resident Handbook

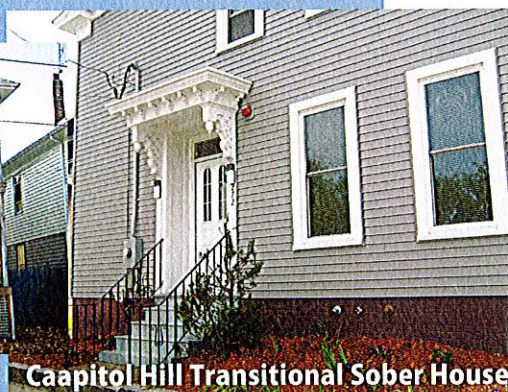
Updated May, 2011



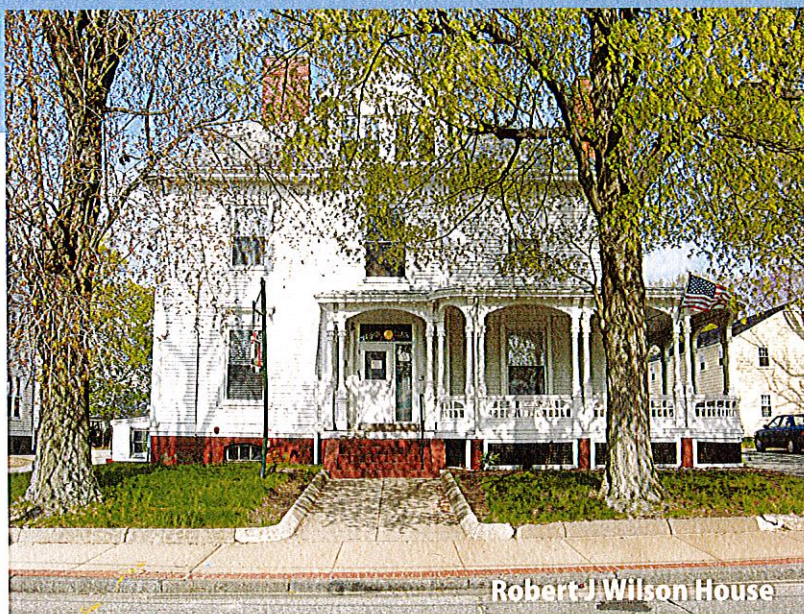
Mabel Anderson House



Teddy Jackson House



Caapitol Hill Transitional Sober House



Robert J. Wilson House



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## **Important Names and Numbers**

### **Theodore “Teddy” Jackson House**

173 Newall Avenue  
Pawtucket, RI 02860  
(401) 728-7957 – 1<sup>st</sup> Floor  
(401) 728-9527 – 2<sup>nd</sup> Floor

### **NRI Community Services**

55 John A. Cummings Way  
Woonsocket, RI 02895  
(401) 235-7000  
(401) 235-7120 (Emergency Services)  
(401) 235-7121 (Intake)

### **Robert J. Wilson House**

80 Summit Street  
Pawtucket, RI 02860  
(401) 235-7433

### **AA Central Service**

(401) 438-8860

### **NA Central Service**

(401) 461-1110

### **SSTAR Detox**

(401) 294-6160  
1-800- 747-6237

### **Memorial Hospital of Rhode Island**

111 Brewster Street  
Pawtucket, RI 02860  
(401)-729-2000

If you experience a medical emergency please call 911 or proceed to the nearest emergency room. For non medical emergencies contact the Robert J. Wilson House.

## **NRI Community Services Staff Contact Information**

### **Mabel Anderson House Staff Liaison**

Renee Lincoln  
(404) 235-7433

### **Wilson Apartment Staff Liaison**

Renee Lincoln  
(404) 235-7433

### **Theodore Jackson House Staff Liaison**

Jason Pyne  
(401) 477-6081  
(401) 235-7433

### **Capitol Hill House Staff Liaison**

Jason Pyne  
(401) 477-6081  
(401) 235-7433

### **Program Director**

Judy Bolzani  
(401) 235-7065

### **Nurse**

Barbara Dauber  
(401) 235-7435

### **Human Rights Officer**

Karen Rathbun  
(401) 235-7452

### **Recovery Housing Advocate/Ombudsman**

Ian Knowles, Executive Director  
RICARES  
(401) 521-5759, ext. 14

## **Welcome**

Welcome to recovery housing that is owned and operated by NRI Community Services (NRICS). Your involvement represents an important step in your recovery from substance abuse and in your commitment to continued change and personal growth.

This handbook contains information which will help you to gain an understanding of the expectations of living in NRICS' recovery housing. If you have any further questions about the services we offer, please speak with the liaison assigned to your recovery house. In addition to being given a copy of the handbook and house rules, they will also be posted in a visible area at all recovery house locations.

We wish you the best as you begin a new phase in your recovery journey.

## **Mission Statement**

The mission of recovery housing is twofold; to provide safe, affordable housing to men in early recovery, and to provide on-going support and assistance as they reintegrate into the community particularly in the areas of living, learning, and working.

## **Special Communication Needs**

Some residents seeking recovery housing services may have special communication needs. We will make a concerted effort to help you with any special needs that you may have related to culture, lifestyle, handicapping conditions and language.

If you have **any** special needs, please speak with the liaison assigned to your recovery house.

## **Admission Criteria**

In order to be admitted to recovery housing, you must meet one or more of the following criteria:

1. You must be in active recovery from substance or alcohol abuse.
2. You must be clean and sober for at least 30 days at the time of admission.
3. You must have the ability to pay rent on a weekly or monthly basis (depending on the recovery house)

**Note:** If you are applying for Capitol Hill House then you must also be a homeless veteran who is willing to receive services from the Providence VA Medical Center.

## **Your Right as a Resident**

As a resident of NRICS' sober housing you have certain rights. You have the right to be treated with dignity and respect from staff and fellow residents. You have the right to live in a safe setting free from potential hazards.

In addition you have the right ...

- To receive a copy of this handbook, including the Occupancy Agreement and House Rules.
- To expect all aspects of your stay in recovery housing to be provided in a confidential manner according to all applicable NRICS regulations.



- To be encouraged and assisted throughout your stay to understand and exercise your rights as a resident without fear of restraint, interference, discrimination, or reprisal.
- To initiate a complaint by contacting the Recovery House Liaison, the liaison's supervisor, or the Program Director.

## **Resident Responsibilities**

As a resident of recovery housing, I will accept the following responsibilities...

- I understand that in order for me to benefit from my stay it is important that I abide by all house rules. These will be outlined further in the handbook.
- I understand that it is my responsibility to attend all meetings on time and to respect the house curfews. In the event that I may be late for a meeting I will notify the house liaison. In the event I may be late for curfew I will call the Robert J. Wilson House to notify the covering staff.
- I understand that I must be free of all mind altering substances while living in recovery housing.
- I will provide accurate information about my financial status.
- I will work in partnership with my liaison if an assessment is made that I need further services such as individual, family, and group counseling.

## **Drug Free Policy**

Your presence in recovery housing indicates your willingness and ability to maintain abstinence from alcohol and other drugs. Random and fixed supervised urinalysis drug screens and breathalyzer tests will be required throughout your stay in recovery housing. If it is determined that you have used alcohol or other drugs while in residence, arrangements will be made to help you get into a detoxification facility if deemed necessary. Under some circumstances, if a bed is available, attempts will be made to assist you to enter treatment at the Robert J. Wilson House or other residential program, or in an intensive outpatient program. In these instances there is no guarantee your bed will be held for you at the recovery house. Relapsing is grounds for dismissal at all recovery housing locations.

## **Medication and Storage**

All prescribed medication must first be approved by the program psychiatrist and/or program RN. Benzodiazepines and narcotics even if legally prescribed will not be allowed in recovery housing. Suboxone and take home Methadone may be allowed on the premises with permission from the program RN. These medications must have a double locking system (for example, they must be in a lock box located in a locked cabinet in your bedroom).

## **Safety**

Upon admission you will be shown where to meet in case of emergency and you need to evacuate the building. The recovery liaison will make sure you have the self preservation skills to evacuate the building in accordance with NRICS standards. The following meeting locations are designated for each recovery house:

Mabel Anderson: Across the street from the Robert J. Wilson House  
 Wilson Apartment: Across the street from the Robert J. Wilson House  
 Jackson House: Across the street near the wall  
 Capitol Hill: Across the street in the left side of the Dunkin Donuts parking lot

The safety of all residents is a high priority. There is absolutely no smoking anywhere in the house. Anyone determined to be smoking in the house will be discharged even if it is the first offense. Small appliances such as toaster ovens and plate warmers are not allowed in any house. The Staff liaison will routinely check the house for anything that may pose a safety risk.

You are encouraged to keep staff informed of your whereabouts and a telephone number where you can be reached in the event of an emergency and you need to be contacted. You will also be asked to provide staff with an Emergency Contact name and telephone number.

## **Rent and Security Deposits**

The rent structure for your specific recovery house is outlined in the addendum section at the end of this handbook. All fees have been disclosed to you prior to admission. You are required to purchase your own food. Cable and all other utilities are included in the rent. Laundry facilities are available on site at all locations at no additional cost to you. Upon admission you will be required to pay a security deposit that will be refunded to you under the following conditions:

1. You have provided a minimum of two weeks' notice of your intent to move out.
2. You have turned in your keys.
3. You have left the premises in good order with no damages.

If you are administratively discharged for any reason, any rent paid in advance, as well as your security deposit, will not be refunded to you.

## **Maintenance**

Realty Maintenance Services, Inc. is the contracted property management company for all of the Recovery Houses. All maintenance issues are to be reported to the Wilson House Staff (235-7033) who will contact the on call maintenance worker. A service order log is kept to ensure maintenance requests are filled in a timely manner.

## **Meaningful Activities**

All residents must be engaged in structured activities while they live in NRICS' recovery housing. This may take many forms including but not limited to employment, volunteering, and education. The staff liaison can assist you in identifying activities that are appropriate for persons in early recovery.

## **Guests**

Residents are allowed to have guests visit them in the recovery houses. In an effort to ensure privacy and a home like environment, please adhere to the following guidelines:

- Please respect the privacy of your fellow residents by limiting the number of visits. You are encouraged to visit friends and significant others who support your recovery at their homes when appropriate.
- When expecting a visitor, please provide other residents with advance notice.
- All guests must leave by 10pm (Sunday – Thursday) and by 12am (Friday and Saturday).
- There are no overnight guests allowed at any of the recovery housing locations.



- No one under 18 years old is allowed at the recovery houses.

After 30 days in the residence, you will be allowed to have a maximum of two (2) overnight visits each week. You must inform the staff liaison when you plan to be out of the house for an overnight visit.

## **Discharge Criteria**

Reasons for discharge from recovery housing may include one or more of the following:

- You have obtained permanent housing
- It has been determined that you have used alcohol or other drugs.
- It has been determined that you need a referral to a more intensive level of care (e.g. detoxification, IOP, or Residential).
- You have not made timely rent payments or negotiated a new payment plan.
- You have refused to follow through with treatment recommendations..
- You no longer wish to reside in the recovery house.
- You have demonstrated aggressive, violent, intimidating, or threatening behavior.
- You have stolen from other residents.
- You have entered another resident's room without him being present.
- You have smoked in the house.
- You have violated House rules.
- You have not demonstrated the ability to adhere to safety guidelines and/or emergency evacuation procedures.
- You have shared medication with other residents.

## **Concern and Complaint Resolution Procedure**

You have the right to file a complaint if you feel you have been treated unfairly. You may contact your staff liaison, the Program Director, or the Human Rights Officer, all of whom are employees of NRI Community Services. The numbers have been provided to you. You will be asked to put your complaint in writing so that proper follow up can occur. You may also contact the Recovery House Ombudsman whose name and telephone number have also been provided to you. If you have been administratively discharged and file a complaint, you will not be allowed to remain at the recovery house while your complaint is being investigated.

## **Additional Services**

NRI Community Services provides many programs and opportunities that may be of help to you or a family member either now or in the future. Some of these services may include:

- Outpatient mental health counseling
- Outpatient substance abuse counseling
- Residential substance abuse treatment
- Vocational Services
- Wellness groups
- Alive peer support program



**NRI COMMUNITY SERVICES  
APPLICATION FOR SOBER HOUSING**

- ☐ CAPITOL HILL TRANSITIONAL HOUSE  
☐ THEODORE 'TEDDY' JACKSON HOUSE  
☐ MABEL ANDERSON HOUSE  
☐ WILSON APARTMENT

Amended 7/13/11

**Print Name:** \_\_\_\_\_

**Current Address:**

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

**Telephone Number:** Home: \_\_\_\_\_ Work: \_\_\_\_\_  
Cell: \_\_\_\_\_

**D.O.B:** \_\_\_\_\_ **Social Security #:** \_\_\_\_\_

**Marital Status:**     ☐ Single     ☐ Married     ☐ Separated     ☐ Divorced

1. **Date of last Residential Treatment Program:** \_\_\_\_\_

2. **Date of Last Drink?** (   /   /   )     **Date of last Drug?** (   /   /   )

3. **Do you attend AA?**     ☐ Yes     ☐ No     **# Groups per week:** \_\_\_\_\_

4. **Do you attend NA?**     ☐ Yes     ☐ No     **# Groups per week:** \_\_\_\_\_

5. **Home Group:** \_\_\_\_\_ **Date of Last Meeting:** \_\_\_\_\_

6. **Sponsor Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

7. **List your medical doctor name and phone number:**

8. **List all medical conditions:** \_\_\_\_\_

9. **Do you take prescription medication?**     ☐ Yes     ☐ No

(If "yes" list) \_\_\_\_\_

**Reminder: We will not release the following financial and employment information but need to know it to calculate your rent. Proof of income will be required.**

10. **Are you now employed?**     ☐ Yes     ☐ No

**If yes: Employer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_

**Number of hours per week:** \_\_\_\_\_

11. What is your monthly income currently? \$ \_\_\_\_\_  
(4 pay stubs will be required)
12. Are you now getting some form of public assistance (i.e. Bridge Fund, SSI, SSDI, TDI)? (Award letter will need to be provided)    ☐ Yes                      ☐ No
- Please check all that apply:
- |   |   |
|---|---|
| <input type="checkbox"/> SSI    Amount _____  | <input type="checkbox"/> GPA/Bridge    Amount _____ |
| <input type="checkbox"/> SSDI    Amount _____ | <input type="checkbox"/> TANF                       |
| <input type="checkbox"/> TDI    Amount _____  | <input type="checkbox"/> Food Stamps                |
| <input type="checkbox"/> Other _____          |   |
13. If you do not have a job, are you interested in working?    ☐ Yes    ☐ No
14. If you are currently not working or deemed disabled, identify activities that you will participate in to help you develop a structured daily schedule:
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
15. List a name, address and telephone number of two people to be contacted in case of an accident or other emergency:
- |                |                |
|----------------|----------------|
| Name: _____    | Name: _____    |
| Phone #: _____ | Phone #: _____ |
| Address: _____ | Address: _____ |
| _____          | _____          |

I have read the items above and understand that if accepted into Sober Housing through NRI Community Services, I agree to the terms in that item including the waiver of any land-lord-tenant rights I might have with respect to residency. I understand that I fully subject myself to the rules of the house. Rents will not be refunded if I am required to leave. The nature of sober housing requires expulsion, without notice or refund of rent, of any resident that has relapsed with alcohol or any other drugs. Disruptive behavior or nonpayment of rent may lead to immediate eviction. I will abide by all laws of the State of Rhode Island.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
NRI Community Services Staff Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
NRI Community Services Staff Printed Name



# Recovery Housing

## House Rules

(Updated May, 2011)

1. You may not possess or use alcohol or other non-prescribed drugs. All medication must first be approved by the program psychiatrist and RN. Benzodiazepines and narcotic medication even if legally prescribed will not be allowed. Suboxone and take home Methadone may be allowed on the premises with permission from the program manager. These medications must have a double locking system (for example, they must be in a lock box located in a locked cabinet in your bedroom)
2. Per state law there is no smoking in the house. If you choose to smoke, you must smoke outside. Anyone found to be smoking in the house will be discharged.
3. You must pay your rent on time. Monthly rent is due by the 5<sup>th</sup> of every month. Weekly rent is due by Sunday. If staff are at the sober house you may give it to them; otherwise, you are expected to bring it to Wilson House by these due dates.
4. You are expected to report any relapses to your staff liaison. Your housing placement may be saved if you need to enter detox, an IOP, or residential treatment. We encourage you to report any substance use in the house so that we may help your peers with their relapse. Decisions to readmit someone to Wilson House is at the discretion of the management team.
5. Participation in a minimum of two toxicology screens per week is mandatory. For at least your first 30 days in the house, you will be required to participate in three tox screens per week. Staff will give you the schedule so that you may plan your work accordingly. Failure to complete required screens will result in immediate dismissal. NRI Community Services staff has oversight of this residence. House residents will also be asked to give a urine sample or a Breathalyzer test to evaluate for drugs or alcohol at random intervals. Refusal to provide a tox screen will be considered a positive screen and may result in dismissal from house. Anyone caught having urine stored will be immediately discharged.
6. You are required to attend a minimum of (3) self help groups per week. Proof of attendance at the meetings will be required.
7. House is furnished with living room & bedroom furniture and the kitchen is equipped with appliances and cooking supplies. These are available for your comfort and use while at the house. All of the furnishings belong to the property and may not be taken with you upon leaving. You are not allowed to keep any personal belongings in the common areas unless approved by the staff liaison.
8. Storage at the house is minimal. You are not allowed to store furniture at the house.
9. Pattern of neighbor complaints/disruptions will result in immediate dismissal.
10. Absolutely no aggressive, threatening or intimidating behaviors will be tolerated.
11. You must be considerate and respectful of others at all times.

12. Stealing will not be tolerated. Police involvement may be necessary if this occurs. Please respect other people's belongings including their food.
13. You may not enter another resident's room without their permission and without them being present.
14. Curfew at all sites is 12:00 a.m. on Sunday – Thursday and 1am on Fridays and Saturdays. All guests must also leave by these times. There are no overnight guests permitted at any time. Please be respectful of your housemates and do not have visitors every day. We will allow you some discretion; however, if visitors become too frequent then a visiting schedule will need to be developed. Please keep visits to four hour time periods as a courtesy to your housemates. Visitors are not allowed in the house when the person being visited is not at home. No visitor under the age of 18 is allowed in the house at any time. No visitors are allowed during toxicology screens and during House meetings.
15. You are allowed up to two nights of outside overnight visits per week, with pre-approval from Staff Liaison. You may not spend consecutive overnights outside of the House unless they are planned in advance and pre-approved by the Staff Liaison, notified at House meeting.
16. All personal and house business is considered to be strictly confidential to ensure a safe and nurturing environment.
17. You must attend the weekly House meeting. If your work schedule does not allow you to attend the meeting, then you will need to find alternative housing.
18. You must complete your details/chores as scheduled.
19. You must do your own dishes immediately after each meal.
20. You are expected to complete details/chores. Detail list will be discussed at the House meeting.
21. There is a bulletin board provided in each room to hang personal decorative items. Drilling holes on the walls is not allowed.
22. Cable service is connected in the living rooms and in the bedrooms at no additional cost to you. Any additional cable lines, phone line, air conditioner units, and any other electrical appliances need to be approved by property manager. Please speak with your staff liaison. Internet services are not available at any house. There is an additional \$25 per month charge for air conditioners.
23. You will be allowed to keep a vehicle on site providing you show proof of license, registration, and insurance.
24. You must attend all scheduled treatment appointments including medical, psychiatric, lab work etc. and follow medical orders.
25. If your residency is terminated, whether you initiated leaving or were administratively discharged, you must collect your possessions within 7 days or they will be discarded. Two staff will pack up your belongings and bring them to Wilson House. You must call Wilson House at 235-7433 to make an appointment to get your belongings.



- 26. If you are administratively discharged, neither your rent nor your security deposit will be refunded.
- 27. Your security deposit will be refunded to you if you provide 2 week’s notice of your intent to move out, you leave the house in good order, and you return your keys.
- 28. No residents of Wilson House are allowed in your room at any time.
- 29. Random room searches will be conducted as needed.

I have read, understand and agree to abide by all rules set forth by NRI Community Services.

\_\_\_\_\_  
House Resident Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
NRI Community Services Staff Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
NRI Community Services Staff Printed Name

## NRI COMMUNITY SERVICES

### Occupancy Agreement

- ☐ Capitol Hill Transitional Sober House
  - ☐ Theodore “Teddy” Jackson House
  - ☐ Mabel Anderson House
  - ☐ Wilson Apartment
- 

- I understand that I am **NOT** a tenant.
- I understand that my rights are not covered under the Rhode Island “Landlord Tenant Act”.
- My residence is by the approval of NRI Community Services and subject to my following House rules.
- My security deposit of \$100 is due upon move in. The security deposit will be refunded if I leave the apartment in satisfactory condition, if I do not owe any back rent, and if I give a minimum of two weeks’ notice of my move out.
- I understand that if I am living at Capitol Hill or Jackson House, my residence is considered transitional and available for a maximum period of 2 years.
- Monthly rent is due by the 5<sup>th</sup> business day of each month or by Sunday if making weekly payments.

#### **Rent is as follows:**

Mabel Anderson - \$110 per week

Wilson Apartment - \$125 per week

Jackson House - \$214 per month or 30% of your income whichever is greater.

Capitol Hill – 30% of your income

#### **For sober housing residents who have an ATR voucher (Access To Recovery) only:**

- If I have income along with the voucher, the security deposit is due upon move in.
- If I have an ATR voucher and have no income upon move in, then I must pay the security deposit when I become employed.
- I must pay the difference of what the ATR voucher does not cover for rent.
- I must have income at the end of the ATR voucher in order to continue residing in sober housing.



I agree that if I am found to have violated this agreement or House rules, I may be asked to forfeit my residence in recovery housing. If I do forfeit my residence, I may be removed and barred from sober housing by NRI Community Services staff and/or the police may be called.

I agree that I have received, read and understand a copy of the House Rules.

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House Resident Signature

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Date

---

NRI Community Services Staff Signature

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Date

---

NRI Community Services Staff Printed Name

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Date