



RESIDENT APPLICATION
LENNON RECOVERY HOUSE PROGRAM

Mail application to: 2211 Church Rd. Rte. 243
Rustico, PE C0A 1N0

Email application to: program@lennonhouse.ca

Fax application to: 902-963-4081

Inquiries please call: 902-963-4029

Website: www.lennonhouse.ca

ADMISSION CRITERIA

To be accepted as a resident, the following criteria must be met:

- Proof of double vaccination for Covid 19 is required.
- The prospective resident must be 18 years old or older at the time of the first intake interview.
- The prospective resident must be willing to provide a release of information for the staff to speak to the prospective resident's physician and others involved in their circle of care.
- It is of utmost importance that the medications and mental health of the prospective resident are stabilized.
- The prospective resident must be able to communicate in English.
- Must be physically and emotionally able to participate in classroom learning and to engage in leisure activities in the community. If they have a learning disability and are unable to read, their Peer Support Staff will assist them.
- Physically be able to walk up and down stairs and to complete household chores.
- Be willing to live in a communal setting, and able to get along with other residents, men and women, from diverse backgrounds and cultures.
- Must not have a physical or mental illness that requires a level of support that cannot be accommodated by Lennon House. Must be capable of own personal care.
- Be committed to achieving recovery in an abstinence-based program.
- Must be committed to recovery which can consist of 3 months, 6 months, 9 months and up to 1 year as a resident at Lennon House.
- Must be willing to provide a urine sample/breathalyzer test when requested.
- All prescribed medications must be provided by the local pharmacy, including over the counter medications.

INTAKE PROCESS

All prospective residents must first complete an application form. The Director and House Manager will review all applications and assess the prospective residents' suitability to Lennon House. Additional documentation may be necessary. A needs assessment will then be scheduled.

The timeline between the application and the needs assessment is contingent upon the availability of beds and the number of people on the 'wait list'.

When the needs assessment has been completed, the applicant will be called to be advised of acceptance status. All prospective residents must be clean and sober prior to their admission to Lennon House and medications and mental health must be stable.

Admission to Lennon House will occur Monday to Friday and all efforts will be made to not have admissions on the weekends or statutory holidays.

When a prospective resident has been accepted, the Director will assign a room to the resident, and will inform the staff immediately when a resident has been accepted into the program, when that resident will be arriving and provide a summary of their needs.

It needs to be understood that Lennon House is considered a "safe place" and as such no visitors are permitted to drop in to Lennon House at any time. Arrangements can be made with the House Manager to schedule visitors on weekends, special occasions and events.

PROGRAM OVERVIEW

Phase 1: Orientation/Adjustment (First 4 weeks)

Orientation allows both Lennon House staff and the new residents an opportunity to get to know one another and the workings of the house. All new residents will have the help of Peer Support Staff to guide and support them through the various programs. During the Orientation Phase, residents will work through the early sessions of Living in Balance and Step Work begins - residents are expected to complete the first 3 steps during this time. Other supports include therapies such as yoga and community support through either AA or NA 12 Step Meetings. Contract workers supplement our core program with life skills and life coaching sessions.

Phase 2: Active Treatment and Community Integration (next 2-6 months)

Residents continue working through the evidence-based Living in Balance Core and Recovery programs. The Living in Balance Core Program consists of 12 sessions that provide a solid foundation by addressing issues commonly faced in the early stages of recovery. The Living in Balance Recovery Management Sessions consists of 25 sessions that offer in depth education on focused topics. These topics include self-help and Twelve Step programs, physical issues, social and family issues, sexual abuse and compulsive sexual behaviours, grief and loss, money management, nutrition and exercise, medication-assisted treatment, chronic pain and opioids, strategies for older adults, and advanced relapse prevention. Working through the 12 Steps also continues; steps 4-5- 6 are expected to be completed.

Residents work on rebuilding family connections and preparing for transitioning back into their community throughout their stay. This starts with building recovery supports and developing community connections, may include working on their education, and moves into searching for employment and housing in the later months. Aftercare and relapse prevention are components of this phase.

Phase 3: Planned Departure (6-12 months)

Residents continue to work through remaining steps 7 - 12 during this time. As they reach the end of their stay at Lennon House, a plan for their departure will be put in place. They will have already been working on community integration, but staff will work with them to ensure that all the details of their departure are worked out. If all rules and regulations and expectations are being met, residents may be eligible to bring their car for transitional purposes. Discuss this possibility with the House Manager when the time approaches.

There will be a graduation ceremony to recognize and celebrate your great achievement! Upon graduation from Lennon House, graduates will be recognized as alumni and will be encouraged to keep contact with us and be a testimony of their recovery experience for others.

Co-Occurring Disorders

The Living in Balance Co-occurring Disorders Sessions consists of 10 sessions that focus on topics relevant to those individuals with co-occurring disorders. These sessions can be used as supplements to the program components described above or inserted to address the individual need of the resident. These Sessions include topics such as treatment, phases of dual recovery, and the effects of substance use on mental health, relapse prevention and more.

Supplemental Therapies and Activities

Life Coaching and Life Skills are incorporated in the daily/weekly resident's schedule facilitated by peer support staff. Topics such as budgeting, resume building, cooking, networking, gratitude, etc. will be covered in Life Skills programming and will be reinforced with guest speakers or mini workshops. Yoga sessions are facilitated daily by one of our staff. A Music therapist comes once a week. Art Therapy will be incorporated by engaging local artists that have volunteered to help.

RESIDENT RULES & REGULATIONS

The following rules are designed to provide structure and discipline—necessary ingredients in a successful recovery program. Lennon House will provide you with an environment, which is orderly and safe—one where you are respected and where you show others respect.

Lennon House follows a “Zero Tolerance Policy” for alcohol, drugs and gambling. Residents in possession of or under the influence of alcohol or non-prescribed drugs will be immediately dismissed.

The following rules and regulations are non-negotiable; violation will result in disciplinary action and/or dismissal:

1. Upon arrival, any medications the resident has with them will be turned in at intake. From thereon, all medications for residents shall only be taken under staff supervision from provided med rolls.
2. Lennon House receives government funding to cover the cost of a resident’s stay. It is to be understood that if you are on Social Assistance, your worker will be notified of your admission to Lennon House.
3. All Residents will participate in required drug screening. Rooms will be searched randomly.
4. There is to be no violent physical contact between residents.
5. There is to be no sexual contact between residents.
6. Lennon House is a non-smoking establishment. Smoking is only permitted in the outdoor designated area.
7. It is to be understood that cell phone usage will be limited, as well as computer usage. You will be directed to use one of the house phones to make your calls.
8. Residents will be respectful in speech and conduct.
9. It is mandatory for all residents to attend all programs and therapies as well as meetings.

“Each person with the right supports, programs and services can fully recover and manage their addictions by using a life-long recovery model and be able to be a contributing member of society.

- Lennon House Rehabilitation Philosophy

PROGRAM APPLICATION

Please be honest with your answers. All information is kept strictly confidential. Some of the questions in this application form are used to help the centre collect data for statistical purposes, and we never use the applicant's name.

Personal Information:

Name _____ Gender: Male Female Other
 Phone # _____ May we leave a message? Yes ____ No ____
 Do you have an email address _____
 Address _____
 How long have you lived here? _____
 Previous address and how long you lived there? _____

 DOB _____ Birthplace _____ Marital Status _____
 Children (how many & ages) _____

 Next of Kin _____ Relationship to you _____
 Next of Kin Phone # _____ Address _____
 Are you pregnant? If yes, what trimester are you in? _____
 Family physician (if you have one): _____ Health Card: _____
 Have you received 1st and 2nd Covid vaccinations: _____

General Application

1. Have you been detoxed? Yes ____ No ____ If yes, when? _____
2. What is your drug of choice? _____ When is the last time you used? _____
3. Do you smoke? Yes ____ No ____
4. Do you have any allergies? Yes ____ No ____ If so, please list: _____

5. Have you ever been a resident at a recovery home? Yes ____ No ____
 - If yes, when was that and how long did you stay? _____
 - Name of recovery home: _____
 - Was your departure planned or unplanned? Planned ____ Unplanned ____
6. Are you employed? Y ____ N ____
 - If yes, where are you working and for how long? _____
 - If no, what is your source of income? _____
7. What is the highest grade you completed in school? _____
 - What community was your school located? _____
 - Did you attend college, university or other work training? Y ____ N ____
 - If yes, when and where was that? _____
 - Did you earn a certificate, diploma or degree? Y ____ N ____
 - If yes, please pecify _____

8. What is your addiction and how long has it been active? _____

9. Have you ever been on methadone? Y ___ N ___ If yes, when was that and for how long?

10. Have you ever had a problem with gambling? Y ___ N ___ If yes, please explain what type of gambling is a problem for you: _____

11. Have you ever attended AA/NA? Y ___ N ___ If yes, when was the last time you attended a meeting? _____

- Do you have a sponsor? _____
- Do you have concerns about attending these fellowship meetings? Y ___ N ___
- If no, what are your concerns about 12 Step programs? _____

12. Are you involved with Mental Health and Addiction Services? Y ___ N ___

- Have you ever had counseling with Mental Health and Addiction Services? Y ___ N ___
- Who was your counselor? _____

13. Do you have a criminal record? Y ___ N ___ If yes, please provide as much detail as possible.
Lennon House may request a criminal record check prior to acceptance to verify your criminal history so please be honest. We will not hold your past against you as we understand that criminality is often part of the cycle of addiction.

14. Do you have any current charges in which you have not yet been sentenced? Y ___ N ___

- If yes, what are they? _____

- Is there a court date? _____

15. Is there someone in the community that may want to harm you? Y ___ N ___

16. What does a typical day look like for you when you **are** using?

17. What does a typical day look like for you when you **are not** using?

18. Do you think you have problems with your self-esteem? Y ___ N ___

If yes, how long have you had self-esteem issues and what do you think caused this?

19. Have you ever attempted suicide? Y ___ N ___

If yes, how many times and how many admissions to the hospital and length of stay:

20. Have you ever or do you currently engage in self-harming behaviors such as cutting, burning, or pulling out your eyelashes? Y ___ N ___ If yes, what are your behaviours?

21. Have you ever consumed mouth wash, hand sanitizer, solvents or inhalants? Y ___ N ___

If yes, please explain the circumstances in which this occurred? _____

22. Have you ever had to be placed in a safe room because you were not able to calm yourself down?

Y ___ N ___ If yes, please explain: _____

23. Do you have a mental illness? Y ___ N ___ If yes, please explain: _____

▪ Have you ever been diagnosed with a personality disorder? Y ___ N ___

▪ Who was the person who gave you the diagnosis? _____

24. Do you have a physical illness? Y ___ N ___ If yes, please explain: _____

25. Have you ever been diagnosed with cancer? Yes _____ No _____

26. Have you ever been tested for HIV? Yes ___ No ___
If yes, when was your last test? _____
27. Have you ever been tested for Hepatitis? Yes ___ No ___
If yes, when was your last test? _____
28. Have you ever had a sexually transmitted infection? Yes ___ No ___
If yes, did you receive treatment? Yes ___ No ___
29. Are you currently at risk for a sexually transmitted infection? Yes ___ No ___
30. When was the last time that you had the following diagnostic testing?
 - Routine blood work _____
 - Urinalysis _____
 - Blood pressure _____
 - Pap test _____
 - Mammogram _____
31. When is the last time that you had a dental examination? _____
32. When is the last time that you had an eye examination? _____
33. When is the last time that you had your hearing checked? _____
34. What medications are you taking and what are they prescribed for?

 - Do you have coverage for medications? _____
 - Please list any over the counter medications that you take:

35. Do you have a social worker? Yes ___ No ___ If yes, Name: _____
36. Do you receive a financial living allowance? Yes ___ No ___ By Direct Deposit ___ by Mail ___

Thank you for completing this application to Lennon House. You will be contacted to come to Lennon House for a need assessment appointment to determine if you are accepted to the program. Please ensure that all contact information is current so we are able to reach you for an appointment.

Applicant Signature: _____ Date: _____