First Step Farm of WNC, Inc. – Screening & Admission Policy

The following is a summary of the Screening & Admissions Standards (Policy Directive .0312) of the First Step Farm of WNC, Inc. (FSF):

Referrals must be made by treatment programs licensed and/or supported by the North Carolina Department of Health and Human Services (NC DHHS). Clients *must* have <u>successfully completed</u> an approved treatment program *within the past twelve months*, and have demonstrated a period of sobriety of at least 4 weeks prior to admission to FSF. **Referral of clients still in treatment should be received at least one week prior to discharge from that facility, to allow adequate time to review the application and conduct the screening process to assess the applicant's appropriateness and eligibility for our program.

The referring agency or individual *must* provide all *completed* referral forms (i.e. Client Referral Data Form, Referral Source Screening Form, <u>and</u> the Physician's Statement) at the time of referral, indicating individual's readiness or suitability for unrestricted strenuous farm labor. Upon receipt of the completed referral forms, the candidate will be contacted by a FSF staff person for a telephone interview. (This interview will provide an overview of the program to the individual, and acquire additional information necessary to determine the person's willingness, appropriateness, and compatibility to our program.) Clients must demonstrate a willingness to engage in our program, and must agree to remain at FSF for a minimum period of 90 days, however we are a 12 month program.

Prospective residents should have no problems precluding admission and participation in the FSF program, to include:

- No highly restrictive dietary requirements
- No physical condition (medical/surgical) preventing the ability to do strenuous work
- No prescribed medications (mood or mind-altering) which are not already approved by FSF (see Approved Medications List)
- Have no psychiatric or behavioral problems which may manifest in unstable or violent behaviors, posing hazards to themselves or others (including Axis I diagnosis of Bipolar Disorder, Schizophrenia, or any Axis II Diagnosis).
- Not have developmental disabilities (must possess sufficient cognitive skills to participate in group and work-therapy)
- Not be under the influence of unauthorized mind-altering substances at the time of admission
- No legal problems which would preclude full engagement in the program or prevent completion of a 90-day stay (scheduled court dates, arraignments, scheduled jail time, etc.)

FSF is presently not permitted to admit residents who have completed treatment programs other than those designated by the NC DHHS, Division of MH/DD/SAS. This policy insures fulfilling our primary contract governed by the NC DHHS.

Currently the FSF "Waiting List" at each facility is maintained by the completing the following:

- FSF will complete an Assessment by consultation with the prospective resident's primary counselor (counselor should have Physician's Statement in hand at contact time), and a personal interview with the future resident (if possible), to determine suitability for admission
- Following the personal interview, the Assessment is staffed and if accepted, the consumer is placed on the waiting list by Program Director
- The future resident must call in each Monday between the hours of 8:00 AM and 5:00 PM to remain on the Waiting List. Failure to call will result in removal from the List.
- Anyone who refuses admission, or requests a later date will have to wait 90 days before their name can be placed on waiting list again.
- Anyone who uses drugs and alcohol following treatment discharge will have their name removed from the Waiting List. After an interval of 90 days (with proof of clean UDS and of Outpatient or Inpatient Treatment) they may again apply for admission.

-These measures are not designed to be restrictive, but to allow FSF to serve the Mental Health Agencies and their consumers in the most practical and orderly manner, and minimize waiting list delays.

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