**PRRC Orientation Guide**

**PRRC ORIENTATION RULES & EXPECTATIONS**

Housekeeping:

* **Absences:** Notify front desk or your provider if you are unable to attend appointments or if you are running late.
* **Restrooms** are located just outside of here; women’s is by drinking fountain; men’s is just before the staff office hallway
* **Emergency exits:** In case of evacuation, go out front door and down steps or use the ramp in the Winter Garden. There are several fire extinguishers located throughout the PRRC. There is one located down the Staff Office Hallway on the north wall and another located on the south wall in the hallway between Classrooms B and C. There is an AED defibrillator located just outside Classroom A.
* **Food/Drinks:** This is newly remodeled bldg., so they say no food or drinks. Ok to bring beverage as long as it has a lid or cap of some sort to prevent spills.
* **Sleeping:** We know that these classes are early, but please maintain a responsibility for keeping yourself awake during the classes. If you’re sleepy, go ahead and stand, get a drink of water, or use the restroom to help keep yourself awake
* **Cellphones:** turn off/vibrate and put away. Take calls in Winter Garden or long hallway area away from classroom doors. Please do not spend time in class reading articles/Facebook or texting. If that becomes an issue, we may just ask you to leave the class.

**Description of program**: how PRRC is different from other process-oriented groups—transitional learning center, similar to college campus model, classroom-based programming, interactive classes, individualized planning and class choices.

**PRRC Team:** We operate as a team: 3 psychologists, 2 social workers, 1 Peer Support Specialist, a program support assistant, and variety of SW and psychology interns. PRRC Alumni serve in capacity as Peer Supports. They are additional members of our PRRC team, and they are persons in recovery from mental illness who serve as a peer models and educational/supportive resource for veterans in the program.

**Talking:** Please take turns speaking in class. No talking over one another. If you’re talkative, please be mindful of topic at hand. We may redirect you to ensure we get through the class lesson. Can also pass if you don’t want to share.

* + PRRC mission (e.g., to provide psychoeducation; to assist with development of self-defined goals for leading more meaningful lives, skills-training, and use of natural/community resources)

**Attendance:** PRRC enrollment is voluntary; however, regular attendance and class participation are expected as part of commitment to learning and recovery process

* No-show (unexcused absence) policy: 3 or more no-shows are grounds for discharge from the program.
* Be on time: if more than 20 minutes late, please do not disrupt the classroom.
* Recovery Plans: during the next month following your orientation you will meet with primary PRRC provider to complete Individual Recovery Plan and sign up for classes
* Regular attendance (i.e., present and on time for majority of scheduled appointments)

**PRRC expectations:**

* Respect for others and PRRC environment (includes not threatening or abusing people, property, or resources—**also refers to abuse of travel pay which is considered a federal crime and VA is monitoring/taking very seriously**)
* No disruptive/violent/illegal behavior (includes carrying weapons, attending sessions while under the influence of alcohol/drugs, chronic sleeping)
* Confidentiality (some exceptions include risk of harm to self or others, child/elder abuse or exploitation; court ordered subpoenas)

**Classes currently being offered:**

* + Community Connections Workshop
  + Dual Diagnosis
  + FACE Stigma
  + Illness Management and Recovery (IMR)
  + Let’s Talk
  + Mindfulness
  + Money $marts
  + Living with Purpose
  + Peer Empowerment
  + Positive-Self
  + Relationships
  + Recovery Newsletter
  + Social Skills Training (SST)
  + STAIR
  + Stress & Coping
  + TECH
  + Unique Experiences
  + Wellness Recovery Action Plan (WRAP)
  + Whole Health
* *Advance Directives: both physical and mental health (see separate handouts for these)*
* *Strengths-based program, and goals-oriented*
* *Difference between individual therapy and recovery coaching*
* *10 Recovery Components*
* **Self-Direction**. Consumers determine their own path of recovery with their autonomy, independence, and control of resources.
* **Individualized and Person-Centered**. There are multiple pathways to recovery based on an individual’s unique strengths as well as his or her needs, preferences, experiences, and cultural background.
* **Empowerment**. Consumers have the authority to participate in all decisions that will affect their lives, and they are educated and supported in this process.
* **Holistic**. Recovery encompasses an individual’s whole life, including mind, body, spirit, and community. Recovery embraces all aspects of life, including housing, social networks, employment, education, mental health and health care treatment, and family supports.
* **Non-Linear**. Recovery is not a step-by step process, but one based on continual growth, occasional setbacks, and learning from experience.
* **Strengths-Based**. Recovery focuses on valuing and building on the multiple capacities, resiliencies, talents, coping abilities, and inherent worth of individuals. The process of recovery moves forward through interaction with others in supportive, trust-based relationships.
* **Peer Support**. Mutual support plays an invaluable role in recovery. Consumers encourage and engage others in recovery and provide each other with a sense of belonging.
* **Respect**. Eliminating discrimination and stigma are crucial in achieving recovery. Self-acceptance and regaining belief in oneself are particularly vital.
* **Responsibility**. Consumers have a personal responsibility for their own self-care and journeys of recovery. Consumers identify coping strategies and healing processes to promote their own wellness.
* **Hope**. Hope is the catalyst of the recovery process and provides the essential and motivating message of a positive future. Peers, families, friends, providers, and others can help foster hope.