**St. Monica’s**

**Client Manual**



## Administrative Offices 120 Wedgewood Drive

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Administrative Office Hours: Monday-Friday 8:00 a.m. – 4:30 p.m.

Front Office Hours: Monday, Tuesday, and Thursday 8:00 a.m. – 4:00 p.m.

Wednesday and Friday 8:00a.m. – 2:00p.m

**WELCOME TO St. Monica’s!**

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**\*\*COMPLETE THE CLIENT SIGNATURE PAGE AND SUMBIT TO STAFF\*\* (Final Page of this**

**Manual)**

**WELCOME!**

St. Monica’s was established in 1964. The program was started as an outreach of the Episcopal Diocese of Nebraska and is governed by a Board of Trustees. St. Monica’s is licensed by the State Department of Health and certified by the State Division of Alcohol and Drug Abuse and is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF).

St. Monica’s offers gender-specific treatment for women and their families in programs that are committed to providing women a safe and supportive environment to heal from addiction and mental health issues that is trauma sensitive. While at St. Monica’s, women learn new coping skills and develop a lifestyle based on abstinence from alcohol and drug use. Treatment includes psychological, medical, spiritual, and social components, and addresses a number of other complex issues that many women bring with them into our programs.

St. Monica’s staff and directors work together as a team and are committed to working with each woman, child and family. Our goal is to help you along your personal journey of healing in recovery.

St. Monica's programs are holistically oriented, created to help individuals heal themselves physically, emotionally and spiritually.

***We are pleased that you have given St. Monica’s the opportunity to be a part of your healing journey of recovery.***

### AGENCY MISSION

***St. Monica’s empowers women to achieve life changing recovery through proven treatment and critical support services.***

**AGENCY PHILOSOPHY**

#### We at St. Monica’s believe:

* all women have strengths as well as needs
* women are best served when interventions are based on strengths, goals, and dreams
* women are more likely to expand and develop skills and abilities when they build on existing strengths
* women have unique needs in treatment and recovery
* effective therapeutic working relationships only occur in the context of respectful behavior

#### At St. Monica’s our programs strive to:

* incorporate spirituality into treatment
* operate with gender competency that is non-judgmental
* acknowledge the personal courage of each woman
* honor the racial, ethnic, cultural, sexual orientation, marital status and capabilities of every women
* provide each woman an opportunity to develop a healthy lifestyle
* provide services that are trauma informed
* identify with each woman specific issues important to her recovery and change process
* ensure the personal safety of all program participants
* encourage personal growth through choice and empowerment

#### St. Monica’s has a commitment to provide programs of the highest quality that:

* are culturally competent
* provide services in a way that promotes each woman’s ability to control her own life
* assist women in their healing journey with facilitation and support
* assist each woman in identifying her own strengths and needs, helping her generalize her strengths from one area of functioning to another
* emphasize each woman’s responsibility for meeting her needs and solving her own problems
* assist women with co-existing mental health concerns to understand and work with the issues
* aid each woman to identify relapse triggers and develop new patterns of coping with specific pressures and problems she will encounter
* encourage each woman to participate in self-help activities or groups
* trust the internal knowing of every woman and offer support and guidance to gain confidence in her ability to trust herself and her decisions for a healthy life

### TREATMENT TEAMS AND FUNCTION (Meet the staff!)

Your potential treatment team is described below. The team communicates constantly through various means to ensure the needs of each individual client are met.

The functions of each position are as follows:

**Clinical Director(s)** The Clinical Directors are responsible for ensuring high quality, gender competent programming. They supervise the Program Counselors and provide oversight to each program.

**Clinical Manager (s)** The Clinical managers support the Clinical director and counselors with daily programing and crisis as they arise.

**Program Counselor** The counselor is responsible for treatment planning, family therapy, and oversight of case management for the majority of clients. They conduct groups/classes and provide the drug and alcohol individual counseling for the program.

**Program Coordinator** The Program Coordinator (PC) is responsible for coordinating the smooth running of the residence, ordering supplies, oversees maintenance of chores and rooms, ensures cleanliness of house, assists with problem solving and case management with the clients. She facilitates the House Meeting and supervises the mentors of the program.

**D.A.R.T Team** The Direction and Recovery Team refers the clients for clinical and non-clinical concerns to the appropriate St. Monica’s personnel or will assist the client themselves. The D.A.R.T. team is available for certain scheduled hours during programming Monday – Friday at 120 WW (upstairs). Examples of reasons the clients may use the D.A.R.T. team member: questions about passes, appointments needed, emergency situation/crisis, experiencing strong cravings to use, questions about visits, etc.

**Nurse Practitioner** The NP provides on-going psychiatric medication management and takes individual appointments. The NP is responsible for assessing the appropriateness of all medications for primary clients. Secondary clients are encouraged to seek an outside provider in their community.

**Nurse Manager** The Nurse Manager is responsible for oversight of triage for clients, and the Nurse Practitioner’s (NP) orders. The Nurse Manager assists the clients with accessing medical care, intake nursing assessments, education and information in conjunction with their diagnosis and treatment. In addition, the Nurse Manager provides oversight and coordination of the medical team.

**Nurse** The Nurse is responsible for providing triage, completing intake nursing assessments, and for initiating the Nurse Practitioner’s (NP) orders. The nurse assists the clients with accessing medical care, education and information in conjunction with their diagnosis and treatment.

**Therapeutic Mentors** These staff members provide 24-hour coverage of the residence. They document behaviors and internalization of recovery concepts. They listen to you and support you in implementing your decision making skills. Mentors assist in carrying out your treatment plan and provide role modeling.

**Community Support Coordinator/Case Manager** This service will be incorporated into your program. The Community Support Coordinator/Case Manager will be responsible for assisting you with community support/resources needs (i.e.: housing, Health and Human Services, etc.) as needed.

**Peer Specialist** will provide support all throughout your treatment experience. The Peer Specialist will assist with those on the waitlist for services with processes and preparations for entering a treatment program. The Peer Specialist provides groups and individual sessions designed to reduce anxiety and to provide coping skills.

**Student Interns** will be used at St. Monica’s when appropriate. These positions may be in any of the positions above or others created. A Student Intern is usually from a local university or college studying education, health, substance abuse or mental health. They will always work under the supervision of a permanent staff in a similar or higher position.

### GENERAL STAFF RESPONSIBILITIES AND CONTACTS

The following list of responsibilities has been developed to ensure fair and quality programs for all residents:

1. The Staff of St. Monica’s will strive to make sure that all clients are treated fairly and feel safe and secure.
2. All clinical staff members attend a weekly staff meeting for the purpose of considering:
	* Special requests presented to staff by you
	* Newly admitted clients and their individual case conceptualizations
	* Residential problems and potential solutions
	* Client discharge plans
	* Individual client progress and treatment plan reviews
3. All staff members will assist you in carrying out your treatment plan(s).
4. All staff members will enforce House Rules and Policies.
5. In the absence of the Clinical Director(s), a member of the clinical staff will be designated as the person who is responsible for the clinical operation of the facility and its program.
6. There is 24-hour staff coverage in the residences provided by Therapeutic Mentors and clinical staff. There is a clinical person available on call via phone 24 hours a day.
7. In the event staff become aware of an issue of child abuse or neglect, staff are required by law to report all instances directly to the Nebraska Child Protective Services.

**Staff/Program contact information:**

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| --- | --- |
| Chief Executive Officer | (402) 441-3767 |
| Director of Human Resources | (402) 441-3765 X 105 |
| Deputy Director  | (402) 441-3768 X 104 |
| Peer Specialist | (402) 434-2814 |
| Admissions Coordinator | (402) 441-3756 |
| Coordinator of Peer services  | (402) 413-0327 X213 |
| Clinical Director  | (402) 413-0327 X210 |
| Community Support Case Manager | (402) 413-0327 X 221 |
| Outpatient Counselor | (402) 413-0327 X 302 |
| Clinical Nurse | (402) 413-0327 X 216 |
| Nurse Manager | (402) 413-0327 X 217 |
| Administrative Office (Wedgewood Main Office) | (402) 441-3768 |
| Toll-free number | (866) 836-2667 |

There are many other people who work behind the scenes at St. Monica’s to help keep our buildings and programs running smoothly. We have a full staff of program counselors and therapeutic mentors who work at each residence, and a number of other staff members who all work together to help make this experience a positive one for you. Program specific staff numbers are located in the corresponding program section.

### Services offered by St. Monica’s include:

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| **Program** | Description |
| **Short Term Residential** | Eight week intensive residential substance abuse and dually diagnosed, trauma informed treatment program for women. Program includes individualized treatment plan; individual and group counseling; psych-educational group; trauma and mental health counseling; psychological assessments; parenting education for women with children, family education and/or counseling as needed, as well as 24-hour staff coverage. Additionally,identified women are provided services related to domestic violence. |
| **Therapeutic Community** | Comprehensive trauma informed residential treatment program for chemically dependent or dually diagnosed women. Therapeutic community model with three phases: Orientation, Employment/Recovery, Community Reintegration, & Relapse Prevention/Aftercare. Program includes individualized treatment plan; individual and group counseling; psych-educational groups; trauma & mental health counseling; psychological assessments; parenting education for women with children, familyeducation &/or counseling as needed, as well as 24-hour staff coverage. Additionally, identified women are provided services related to domestic violence. |
| **Project Mother and Child** | Comprehensive trauma informed residential treatment program for chemically dependent or dually diagnosed pregnant women, and women with children. Therapeutic community model with three phases that women complete: Orientation/Evaluation/ Assessment, Employment/Recovery, Community Re-integration and Relapse Prevention/Aftercare. Program includes: individualized treatment plan; individual and group therapy; psych- educational groups; trauma and mental health counseling; children’s developmental testing; psychological assessments; parenting education for women with children, family education and/or counseling as needed, as well as 24-hour staff coverage. Additionally, identified women are provided services related to domesticviolence. Parent-Child Psychotherapy is also available as appropriate. |
| **Outpatient Individual Substance Abuse or Mental Health Counseling** | Individual counseling for women with a mental health diagnosis and/or substance abuse diagnosis. Counseling will 1) assist with education pertaining to personal mental health and/or substance abuse issues; 2) help develop appropriate problem solving skills, 3) maintain self-sufficiency while continuing to live in the community. Counseling is offeredby scheduled appointment. Three hours of programming are included with groups such as group therapy, DBT and relapse prevention with individual counseling sessions. |
| **Next Step**  | Transitional Living a 1 month to 6 month step-down/transitional home for women completing treatment services needing a safe, sober, affordable living arrangement while transitioning from residential treatment into independent living in the community. |
| **Community Support** | Case management type services for outpatient clients who are waiting for residentialservices and/or clients that are transitioning from residential treatment to community |

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|  | and/or outpatient services. This program is designed to provide contact and support formaintenance, sobriety, and self-sufficiency in community living situations. |
| **Women are Sacred**  | Comprehensive trauma informed residential treatment program for chemically dependent or dually diagnosed pregnant women, and women with children. Therapeutic community model with three phases that women complete: Orientation/Evaluation/ Assessment, Employment/Recovery, Community Re-integration and Relapse Prevention/Aftercare. Program includes: individualized treatment plan; individual and group therapy; psych- educational groups; trauma and mental health counseling; children’s developmental testing; psychological assessments; parenting education for women with children, family education and/or counseling as needed, as well as 24-hour staff coverage. Additionally, identified women are provided services related to domesticviolence. Parent-Child Psychotherapy is also available as appropriate. All services are delivered from Native American perspective.  |

**PROGRAM COMPONENTS**

The following is a summary of some of the programming offered at various times. This list does not include every group that is offered and may change periodically. Your counselor will work with you to determine what your preferences are and develop a schedule with you.

**Individual Counseling**: You will have a weekly scheduled individual session with your primary counselor. This session is typically 50 minutes in length. There is a staff person available to talk with you at any time, and a clinical person is available 24 hours a day for emergencies.

**Group Therapy**: There will be opportunities to present treatment assignments and to share other parts of your healing process with your peers. All therapy groups are facilitated by a counselor. During the group therapies there will be time to process feelings and to share honest feedback with each other. This is a required group in your residential treatment experience.

**Medical Consultation**: Psychiatric services are available through a Nurse Practitioner (specializing in mental health), and a consulting psychiatrist. Referrals are also made to local women’s health agencies, clinics and private practitioners when needed. In addition, triage is offered twice weekly for assessment and referrals for medical services.

**Exercise**: Making regular exercise a part of your life is an important aspect of your recovery process. There are yoga, meditation, and exercise classes/exercise videos available. Clients are encouraged to take walks and to do daily exercise.

**Nutrition/Menu Planning**: All residents (secondary programs) meet weekly for Meal Planning where menus are planned for the upcoming week. Nutrition, food preparation and food purchasing are discussed, and the weekly grocery list is filled out at this time.

**House Meeting**: All residents meet with staff to discuss house issues, report maintenance problems and to plan a potential weekend outing. Programming announcements and any other areas of house management are also discussed at this meeting, which is supervised by a staff member.

**Self-Help Meetings**: Residents are required to attend 2-3 AA/NA meetings in the community each week.

#### *Please note:* not all classes/program components are available at all times or to all programs; visit with your counselor if you have questions.

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| **Group Name or program****component** | **Description** |
| **12 Step Class** | This group is designed to help participants understand and begin working on the 12 step program of recovery. St. Monica’s uses *A Woman’s Way Through the 12 Steps* which was written especially for women and has an accompanying workbook for individual step work. At times, participants may be asked to share their step workthe others during this group. |

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| **A Woman’s Journal** | This program developed by Stephanie Covington involves looking at issues that may affect sobriety.Participants take an in depth look at themselves, their family, sexuality and spirituality. |
| **Reflections** | This is a time that is offered at the end of the day to give clients an opportunity to work on assignments andhomework in a quiet place. |
| **Celebrations** | “Celebrations” is a group in which all of the clients on site participate. It is a time when accomplishments are discussed and the hard work done in treatment is celebrated. Examples include any “Aha” moments, forward movement on treatment plan issues, and individualized happenings that staff and/or peers want to recognize.Sobriety birthdays are also acknowledged and celebrated. |
| **DBT (Dialectical Behavior Therapy)** | This class teaches the clients to learn how to regulate their emotions, learn interpersonal skills, and increase their distress tolerance skills. The basis of this class is to use the wise mind, which is the combination ofacknowledging the emotion and balancing it with the reasonable mind. |
| **Co-Occurring Issues** | A class that is designed to help clients work through substance abuse and mental health issues. When these two issues are combined, as in the case of most women, it is important to know and understand how theyinteract with each other and healthy ways to deal with both of them. |
| **Domestic Violence Education** | This class is designed to help women learn the warning signs of abuse and violence in relationships and help develop a safety plan if necessary. This class is for anyone who has suffered violence of any kind in any kindof relationship. |
| **Grief & Loss Group** | This group is designed to help participants talk about any kind of grief (loss) issue they may be struggling with. The usually topics are death of a loved one, grief over the loss of their drug, loss of relationships, friends, etc. It is a process group, although at times there may be an assignment to write a letter to whatevertheir loss to help them release it. |
| **Nutrition Group** | Throughout an 8-week treatment cycle, clients learn a wide variety of different parts of nutrition including: appropriate serving sizes; different food items that belong to each food group; and portion control. We teach how to read a nutrition facts label, and the important areas to focus on when reading a nutrition label. We also focus on smoking and nutrition, and nutrition, exercise and addiction. Nutrition and addiction focuses on foodsthat we can consume to help rebuild damaged tissues that have occurred from drug and alcohol use. |
| **Exercise Group** | Exercise group occurs several times each week. Most often, we take a 1 hour walk throughout the beautiful residential areas surrounding St. Monica's. We also also enjoy exercising on the WII indoors on days theweather is not tolerable. |
| **Expressive Art** | This is an art therapy group that allows the clients to express themselves through artwork and creativity. |
| **Strengths Finder Group** | Using the information obtained by the Gallup StrengthFinder assessment, this groups help clients tounderstand their strengths and how they are used by each individual. |
| **Group Therapy** | Group therapy is held every day in most programs. It is the place where clients discuss issues, receivefeedback from peers and work through some deeper issues in a safe place. It helps to strengthen the group through bonding and peer interaction. |
| **Medical Aspects** | Explores substance abuse/dependency through the eyes of a trained medical professional. Participants will learn what street drugs can do to the body, how they affect every part of a woman inside and out, and ways that can help reverse this damage including abstinence. The effects of trauma on the physical body are also discussed and explored. Women’s health, including reproductive and sexual health, mental health, and manyother physical health perspectives are discussed using a range of media resources and up-to-date medical/health information. |
| **Mindfulness/Yoga** | Meditation is led by a facilitator or guided music. The aspects of meditation and mindfulness are also integrated in many other groups, such as coping and containment, DBT, and expressive therapies to increasemindfulness and consciousness to enhance the healing process. |
| **Nurturing Parent** | This group is for Families in Substance Abuse Treatment and Recovery is for parents who have experienced substance abuse, mental illness and trauma. Nurturing Families specifically addresses the impact of these experiences on parents and children, with the primary focus on skill building and coping strategies to support parents in recovery. Participation in Nurturing Families, through discussion, activities and providing information, can be the beginning of restoring what has been lost in the parent-child relationship, as well as a time for parents to re-establish the strength of their connections to their children, so that parents and childrencan heal together. |
| **Coping and Smoking Cessation** | This group offers various educational components to help clients learn new “tools” to use on their path to recovery. Topics and group activities vary, and include some of the following: learning relaxation techniques,understanding resentments, learning forgiveness, identifying healthy support systems and participating in therapeutic art projects. |
| **Relationships** | This group is designed to help clients learn about healthy relationships. Participants will discuss birth control,healthy diet, medical and other issues that are important for healthy relationships. |
| **Relapse Prevention** | This class, using a specially designed program for women, helps participants learn their personal triggers torelapse. It is important in healing that we learn how to read our bodies to prevent relapse and how to stabilize |

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|  | post trauma and other mental health symptoms. |
| **Seeking Safety** | This class is an evidence based practice designed to help clients abstain safely from substances while dealing with trauma issues. It also helps reduce PTSD (post traumatic stress disorder) symptoms. Among other things, participants will learn positive coping skills to help work through difficult times safely whilemaintaining sobriety. Participants also learn to be more compassionate with themselves. |
| **Spirituality** | This group introduces the clients to a variety of spiritual concepts and belief systems. The processes of griefand forgiveness are also discussed and explored. |
| **Family Issues** | This class helps clients identify the dynamics and communication issues within their families. It is educational in nature, but also a processing group to promote more awareness and insight into family roles and childhoodtrauma issues. |
| **Meal Planning** | Secondary residential program clients (TC & PMC) plan their meals and cooking schedule for the following week with a staff member. St. Monica’s clients plan and cook their own meals as a part of life skills training. This group provides the opportunity to expand planning, cooking, shopping and other skills. |
| **House Meeting** | This group is for the residential programs only. Issues regarding the house are discussed, including assigningchores, client concerns and the general operation of the house. |
| **Ways of Thinking** | This group is a cognitive therapy group exploring the effect of common thought distortions on behavioral patterns, relapse potential, mental health, and interpersonal relationships. It is designed to help clients recognize and challenge their individual thinking errors. |
| **Relapse Prevention/Life skills** | These skills are designed to teach relapse prevention to clients. We also work on life skills such as job seeking skills, setting boundaries, self care, and other skills needed to live clean and sober in the community. |
| **Life Skills** | Life Skills education focuses on our client’s needs, challenges, and steps to take to continue with a life of sobriety, mental health, and future goals. We address the challenges the clients will face once they leave treatment, such as creating a Safety Plan, identifying triggers, self-care, identifying effective coping skills, and stress management. We also address issues that the clients will experience such as resume composition, mock interviewing, opening and maintaining savings and/or checking accounts, and how to identify possibleresources for educational and vocational goals. These skills are taught throughout treatment at various times. |
| **Family Ed. Group** | This group focuses on educating families on addiction and coping with it. They learn the effects of addiction on the family and the individual and how they can help themselves and their loved ones through recovery. In the first part of the group, you and your families or supportive friends learn about the effects of addiction on the family, how family members can help clients in a healthy way, communication,boundaries and addictive process |
| **Family Therapy** | Family Therapy engages family members and supportive friends by providing weekly family sessions. Also included are parent-child and couple’s sessions. This service offers assistance with boundaries, communication, unresolved issues, trust issues, help with conflict as well as assistance in decreasingunhealthy patterns of interactions and increasing positive interactions. |
| **Case Management Group** | Case management includes life skills such as: seeking employment; interview skills; filling out a job application; resumes and cover letters; appropriate dress, etc.; budgeting; improving credit; communityresources; assistance with housing; and nutrition to name a few. |
| **Recovery Skills** | An opportunity to learn new information about the recovery process. This group covers anything from the basics of what recovery means, what an AA meeting is, to more complicated issues like how to handle being 13th stepped by a man in recovery. This group is facilitated by our peer support specialist who will not only share her knowledge with the women but will also share her own personal stories of her recovery journey andallow women to ask questions about areas that have been difficult or confusing for them on their recovery path. |
| **Orientation to Anxiety Reduction** | A class where clients are taught evidenced based coping skills to help them with their anxiety and the anxieties that may present when entering. Clients are not only taught these techniques but they are given the opportunity and guidance to practice using them together. After these skills have been taught in a groupthose who continue to struggle with anxiety or may need more coaching will be given the opportunity for one on one practice sessions. |
| **Circle of Security** | The Circle of Security is a relationship based early intervention program designed to enhance attachment security between parents and children. Decades of university-based research have confirmed that secure children exhibit increased empathy, greater self-esteem, better relationships with parents and peers, enhanced school readiness, and an increased capacity to handle emotions more effectively when comparedwith children who are not secure. This group is counselor referred. |

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| **EMDR (Eye Movement Desensitization and Reprocessing)** | EMDR (Eye Movement Desensitization and Reprocessing) is a psychotherapy that enables people to heal from the symptoms and emotional distress that are the result of disturbing life experiences. By using EMDR therapy people can experience the benefits of psychotherapy that once took years to make a difference. It is widely assumed that severe emotional pain requires a long time to heal. EMDR therapy shows that the mind can in fact heal from psychological trauma much as the body recovers from physical trauma. EMDR therapy demonstrates that a similar sequence of events occurs with mental processes. The brain’s information processing system naturally moves toward mental health Using the detailed protocols and procedures learnedin EMDR therapy training sessions, clinicians help clients activate their natural healing processes. This therapy is counselor referred and is not for everyone receiving services in St. Monica’s programs. |
| **Body Mindfulness Group** | The group demonstrates the relationship between body and mind by teaching exercises to help focus and increase awareness and reduce symptoms and anxiety in the body. |

**Individual Treatment Plan:**

Each client will work closely with their counselor to develop their Individual Treatment Plan. The treatment plan is a compilation of goals and objectives for treatment. The treatment plan empowers you to accomplish your goals while receiving services at St. Monica’s. The treatment plan will include all aspects of your treatment experience including: parenting (if appropriate); children’s services; medical; family; financial responsibility; case management; and discharge planning to name a few. The treatment plan will include your strengths, abilities, preferences and challenge areas/needs. This treatment plan will be reviewed and updated on a regular, frequent basis with your counselor and will always include your input. The Individual Treatment Plan may also be referred to as a Treatment Plan or Individual Service Plan.

Discharge planning begins at admission. Discharge needs and preferences are assessed upon intake and incorporated into your Individual Treatment Plan. Discharge plans are reviewed weekly and updated as needed.

#### Graduation/Discharge Definitions:

* + **Treatment Complete**

Satisfactory progress has been made towards recovery, specifically in meeting goals and objectives as identified in the Individual Treatment Plan.

#### Maximum Therapeutic Benefit

At times, clinical staff may feel that a client is unable to make further progress in her recovery. Staff may not feel that a client is ready to graduate, but that they have been given all of the tools that we have to offer them. In this case, they may be discharged “maximum therapeutic benefit”.

#### Discharge – Treatment Incomplete

Clients may be discharged treatment incomplete for three reasons.

1. The client leaves **ACA** (Against Clinical Advice) and chooses not to return.
2. The client is asked to leave the program (Terminated by Facility) because it is deemed that the client is not appropriate for that level of care; due to inappropriate behaviors; or for non-compliance with rules. If you are terminated by facility, you will be provided written notice of discharge including clear reason(s) for discharge. A Client Discharge Appeal form will also be provided if you should so choose to appeal the decision to discharge.
3. The client is discharged (Administrative Discharge) for non-participation (client chooses to decline additional treatment), change in funding, or failure to attend (this usually applies to outpatient services such as Outpatient or Community Support).

### CONSENT FOR TREATMENT:

***You will sign an electronic acknowledgement of receipt of the following Informed Consent for Treatment during your admission appointment:***

**Informed Consent for Treatment Form**

Substance abuse treatment is a structured progression of individual counseling sessions, group therapy, family therapy, and psycho-educational sessions that provide an individual the opportunity to become better equipped to pursue healthy and productive lives for themselves. During your treatment experience you will be expected to follow the daily schedule provided, participate fully in individual and groups sessions. You may also ask for family therapy to work through parenting or family issues. The specific expectations will be discussed with you at the beginning of your stay as you develop an individualized service plan with your counselor/therapist.

I have received a review of the process of treatment by my counselor and know that if I have questions at any time, my counselor will discuss them with me.

Information regarding treatment:

1. Benefits of treatment and counseling may include learning new ways to work through stressors or problems, exploring current issues and past issues as they relate to current problems, assistance in the learning and growing process, and improved satisfaction with life.
2. Risks of treatment and counseling may be new levels of awareness that may cause temporary distress as past problems are examined and current problems are explored. If this type of problem occurs, I understand St. Monica’s is qualified and willing to provide appropriate counseling. In some cases, symptoms resolve without intervention. Some people find involvement in support groups or use of self-help books useful.
3. The potential duration of your participation in St. Monica’s services could be up to eight months, but will be evaluated and based on individual need.
4. Be aware that your involvement in this program is strictly voluntary.
5. You have the right to leave the program at anytime during your stay without any problems. You can revoke your consent to participate if you choose to.
6. Your participation in the program is strictly confidential; all reasonable precautions will be taken to protect your identity, including restricted access to sensitive information, client information, locked cabinets, etc.
	* Information discussed in treatment is confidential and will not be shared without my written permission except under the following conditions:
		+ If I pose a serious physical danger to another person or myself.
		+ If I commit a crime at any St. Monica’s properties
		+ In cases of medical emergency where proper medical treatment would rely on viewing my confidential information
		+ Reporting of communicable diseases in accordance with State Law
		+ If I disclose that another person or I abused (physically, emotionally, or sexually) or neglected a child, elderly person, a person who is incompetent, or a person who is disabled.
		+ If my records are court ordered in accordance to 42 CFR part 2.
7. In the event we need to contact you for program evaluation or in the event of injury we ask that you provide a phone number to reach you.

**\*\*\*COMPLETE THE SIGNATURE PAGE AT THE END OF THIS MANUAL\*\*\***

Most insurance companies require information to justify treatment need and require information from the therapist before they will pay for treatment. In such cases, we will discuss the options and share with you any information released to the insurance company. If you learn, at any time during your treatment, that information may be requested by a third party (lawyers, parents, and insurance), it will be helpful if you discuss this information with us as soon as possible.

The law also permits you to waive the privilege of confidentiality. You may request that some confidential information be discussed with another person (physician, spouse/partner, children, and parents), by signing a release of information form stating the specific information you want shared and to the specific individual you want it shared with.

Feedback and Satisfaction-We periodically gather information from former clients about how treatment has gone. One way we gather this information is by requesting you complete a brief questionnaire after you have left services, about the current situation of your life. All surveys for program evaluation will be anonymous and confidential.

I understand that as a client, I have the following responsibilities:

1. Attend treatment sessions on a consistent basis as determined by myself and my counselor.
2. Complete assignments that need to be carried out independently between group and individual sessions such as; 12 Step work packets, self assessment worksheets, or anger management worksheets.
3. Communicate any concerns, questions about my treatment to my counselor.
4. Consider completing confidential surveys regarding my treatment experience.
5. Attend AA/NA meetings as discussed with my counselor.

### GENERAL EXPECTATIONS AND GUIDELINES AT ADMINISTRATION

In order to provide the best treatment experience for all of our clients, we ask that each client respect these guidelines. While you may have additional expectations and guidelines for your own specific program, these are to be followed when you are attending groups in the main hallways or in the lower level of the administration buildings (120 and 105 Wedgewood Dr.).

* You are expected to be on time for all your scheduled groups and individual sessions. If you are late to a scheduled group, you may be asked for a note from your counselor or other staff person. When you are in a group session, we ask that you not leave until the session is over unless you have a note from your counselor or other staff person. Being in your scheduled groups will help you make the most of your treatment experience.
* Outpatient and secondary clients are discouraged from bringing cell phones beyond the outside entrance to the building. You may not take cell phones into the hallways or the group rooms. If you bring a phone with you, please leave it with the receptionist (make sure it has been turned off; the receptionist will not answer any client phone for any reason) while you are participating in groups. STR clients are not to have access to cell phones. STR clients are to refer to their specific guidelines in the STR section of the client manual regarding cell phones.
* You will be given a pass code to unlock the door to the inner hallways and group rooms from the lobby, in order to keep unwanted visitors out of the main hallways, offices and group rooms for safety purposes. In order to maintain a secure facility, this code must be kept confidential.
* You are expected to sign in and out each time you enter or leave the building. (You do not have to sign out if you are just going outside for a short break.) If you leave for an appointment, you are

required to sign the appropriate log. This is required by law; in the event of a fire or natural disaster, St. Monica’s needs to know who is in the building in order to evacuate everyone.

* We ask that you be quiet in the halls and respect our counselors and staff who have offices and workspaces in these buildings. Staff will respect the same rules in order to meet *your* need for quiet in the group rooms as well.
* Unless you have a group session downstairs or are accompanied by a staff person, ONLY Short-term Residential (STR) clients are permitted downstairs in the residential area. If you have a group session downstairs, you are only allowed to attend that group.
* You are expected to be courteous and respectful of others at all times. This includes during groups, in the hallways, and outside the building. If you have an issue with someone, we ask that you discuss it with your counselor. It is very likely you may come into contact with some old peers while attending treatment. Working through differences in a healthy manner will be expected at those times.
* If you become angry in a group and feel you need to take a break, you may leave the group for no longer than 10 minutes. You may go to the client kitchen and work on using healthy coping skills to regain control. You are not permitted to roam the halls, or leave the grounds. If you do not return to your group in the time allowed, you will be counted as absent from that group. If you leave the building and do not return, you will be counted as absent for the day.
* Eating in the group rooms or hallways is not allowed unless authorized by a staff person. You may drink water in the group rooms as long as it is in a clear container with a lid. You are expected to keep the group rooms clean and free of trash and clutter.
* There is a client kitchen/lunch room available for lunch for clients attending from other houses and/or outpatient programs during programming hours. It contains a refrigerator, microwave, sink, tables and chairs. Clients are responsible for keeping this area clean, dishes washed, refrigerator cleaned, floor clean and tables wiped off and free of clutter. Trash is to be disposed of properly and there is a recycling bin. STR clients use the kitchen in the residential area of the lower level.
* Clients should not hang out in the hall outside their counselor’s office or in their office unless they have a scheduled appointment. Unless you are experiencing a grave emergency or crisis that cannot wait until your individual session, we ask that you not assume your counselor is available to meet with you. Seek out a peer to talk with or use your coping skills to help get you through your present crisis. If you still need assistance, ask your counselor for an appointment.
* For clients in secondary programs (TC/PMC,WAS), each client needs to have Schedule and Reflection forms signed. It is important to have this done at the *end* of each day and turned in to staff daily. Instructions on how to use the forms are available; please ask if you are having difficulty. These forms are important and prove to courts, case workers, etc., that you have been active and are attending programming.
* You will be in groups with other women from other programs at St. Monica’s. This is a good opportunity to get to know your peers and begin to establish a support system that might be maintained outside of treatment. Remember that discussing anything that you have heard or seen while in treatment may not be repeated outside of treatment. This includes discussing treatment issues about others of any kind in your outside self-help groups. Talking about other people when they are not there is not healing behavior and certainly not keeping confidentiality. **Breaking confidentiality**

####  can be grounds for immediate dismissal from St. Monica’s regardless of what program you are in.

* There will be times when some mothers have their infant children with them in groups. We ask that these children not be passed around to other clients while group is in session; that there be no changing of diapers while in group (this needs to be done while on breaks); and that if the child begins to cry and is disruptive, the mother will leave the group with the child. We make every effort to help eliminate barriers for women seeking treatment and allowing clients to bring infant children with them to treatment is one of the ways we are able to do this. Please respect these guidelines!

### SHHHHH! MINDFULNESS!

St. Monica’s observes 15 minutes of quiet time everyday from 12:30pm – 12:45pm. This is a time for everyone in the facilities (staff, clients, visitors, etc.) to practice quieting the mind. This may be accomplished by turning out the lights, closing your eyes, relaxing your muscles, etc. During this time, calls are not received and talking is not permitted. Do whatever works best for you and does not disrupt others as they practice what works best for them to quiet their minds.

### CONFIDENTIALITY

#### Client Confidentiality:

Confidentiality is extremely important at St. Monica’s. St. Monica’s staff makes every effort to protect your confidentiality. No part of your record will be released without a signed and witnessed consent form. There are legal limits to confidentiality. If we are aware of any of the following, law requires us to report it to the proper authorities:

1. Pursuant to an agreement with a qualified service organization/business associate;
2. For research, audit or evaluations;
3. To report a crime committed on St. Monica’s property or against St. Monica’s personnel;
4. To medical personnel in a medical emergency;
5. To appropriate authorities to report suspected child abuse or neglect;
6. As allowed by a court order;
7. In the event of an emergency, we may be required to release information about you that you may be unable to. Your emergency contact form contains a release that you will sign at the bottom;
8. Threat of harm to self
9. Direct threat of harm to another specific person.

#### House Confidentiality:

* Clients are NEVER permitted to answer the door for your own safety. Staff must answer the door and will accompany any visitors. If staff are not available to answer the door, please do not answer it.
* Please do not ever use a past clients’ name, please refer to them as a past client if you must talk about them.
* Clients are not allowed to solicit goods and/or services using St. Monica’s name.
* Should the police or a probation officer show up at the residence unexpectedly, the staff will not confirm or deny your presence.
* Clients are not allowed to give out the residence location or phone number to people other than approved visitors or appropriate agency professionals.
* Clients will be allowed the opportunity to remain in an isolated area during other clients’ scheduled visits or maintenance visits.
* Clients are not allowed to get any mail out of the mailbox.
* When answering the residential phone, simply say “hello”. Do not say “St. Monica’s” as this violates the clients’ confidentiality. Never say that a client lives there to a stranger. If you are unclear how to answer a person on the phone, refer the call to a staff person. **Never give out the resident number to strangers or meeting group acquaintances.**
* ***Absolutely no information is to be given out to anyone inquiring about a current or former client.*** These callers/visitors should be referred to staff immediately. Federal law protects residents’ confidentiality, and the agency does everything possible to ensure this confidentiality is not breached.

***Breaking confidentiality may be grounds for discharge.***

***You will sign an electronic acknowledgement of receipt of the following Notice of Privacy Practices during your admission appointment:***

**St. Monica’s Behavioral Health Services**

**Notice of Privacy Practices**

**THIS NOTICE DESCRIBES HOW MEDICAL AND DRUG AND ALCOHOL RELATED INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

**General Information**

Information regarding your health care, including payment for health care, is protected by two federal laws; the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), 42 U.S.C. § 1320d et seq., 45 C.F.R. Parts 160 & 164, and the Confidentiality Law, 42 U.S.C. § 290dd-2, 42 C.F.R Part 2. Under these laws, St. Monica’s Behavioral Health Services may not say to a person outside St. Monica’s Behavioral Health Services that you attend any St.

Monica’s program, nor may St. Monica’s disclose any information identifying you as an alcohol or drug abuser, or disclose any other protected information except as permitted by federal law.

St. Monica’s Behavioral Health Services must obtain your written consent before it can disclose information about you for payment purposes. For example, St. Monica’s must obtain your written consent before it can disclose information to your health insurer in order to be paid for services. Generally, you must also sign a written consent before St.

Monica’s can share information for treatment purposes or for health care operations. However, federal law permits St. Monica’s to disclose information without your written permission:

1. Pursuant to an agreement with a qualified service organization/business associate;
2. For research, audit or evaluations;
3. To report a crime committed on St. Monica’s Behavioral Health Services premises or against St. Monica’s personnel;
4. To medical personnel in a medical emergency
5. To appropriate authorities to report suspected child abuse or neglect;
6. As allowed by a court order

For example, St. Monica’s can disclose information without your consent to obtain legal or financial services, or to another medical facility to provide health care to you, as long as there is a qualified service organization/business associate agreement in place.

Before St. Monica’s can use or disclose any information about your health in a manner which is not described above, it must first obtain your specific written consent allowing it to make the disclosure. Any such written consent may be revoked by you in writing.

**Your Rights**

Under HIPAA you have the right to request restrictions on certain uses and disclosures of your health information. St. Monica’s Behavioral Health Services is not required to agree to any restrictions you request, but if it does agree then it is bound by that agreement and may not use or disclose any information which you have restricted except as necessary in a medical emergency.

You have the right to request that we communicate with you by alternative means or at an alternative location. St. Monica’s Behavioral Health Services will accommodate such requests that are reasonable and will not request an explanation from you. Under HIPAA you also have the right to inspect and copy your own health information

maintained by St. Monica’s Behavioral Health Services, except to the extent that the information contains psychotherapy notes or information compiled for use in a civil, criminal or administrative proceeding or in other limited circumstances.

Under HIPAA you also have the right, with some exceptions, to amend health care information maintained in St.

Monica’s Behavioral Health Services records, and to request and receive an accounting of disclosures of your health related information made by St. Monica’s Behavioral Health Services during the six years prior to your request. You also have the right to receive a paper copy of this notice.

 **St. Monica’s Behavioral Health Services Duties**

St. Monica’s Behavioral Health Services is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. St. Monica’s Behavioral Health Services is required by law to abide by the terms of this notice. St. Monica’s Behavioral Health Services reserves the right to change the terms of this notice and to make new notice provisions effective for all protected health information it maintains. In the event that we do change the terms of the notice of our privacy practices, we mail you a revised copy and / or will make available the revised copy on our website – [www.stmonicas.com.](http://www.stmonicas.com/) Current copies of the Notice of Privacy Practices are also available at all St. Monica’s facilities.

**Complaints and Reporting Violations**

You may complain to St. Monica’s Behavioral Health Services and the Secretary of the United States Department of Health and Human Services if you believe that your privacy rights have been violated under HIPAA. To file a

complaint with St. Monica’s Behavioral Health Services, please contact the HIPAA Officer at (402) 441-3756; e-mail your complaint to donna.gardner@stmonicas.com; fax your complaint to (402) 441-3770 attn: HIPAA Officer; or mail your complaint to St. Monica’s Behavioral Health Services c/o HIPAA Officer, 120 Wedgewood Drive, Lincoln, NE 68510. You will not be retaliated against for filing such a complaint.

Violation of the Confidentiality Law by a program is a crime. Suspected violations of the Confidentiality Law may be reported to the U.S. Attorney in the district where the violation occurs.

**Contact**

For more information, contact Donna Gardner, HIPAA Officer, at (402) 441-3756 or donna.gardner@stmonicas.com, or mail inquiries to St. Monica’s Behavioral Health Services, attn: Donna Gardner, 120 Wedgewood Drive, Lincoln, NE 68510.

**Effective Date**

March 22, 2004

#### CLIENT RESPONSIBILITIES

**Client Bedrooms:**

To prevent accidents and avoid insects, please keep your room clean throughout the day. **Please provide your own alarm clock**. Food, candy or drinks (other than water in clear container with a lid) are not allowed in your room. You may eat in your room only if you have approval from your counselor or medical staff due to illness. Hard candy is permitted in rooms for use as a smoking cessation coping skill.

Rooms are checked daily. The expectations for your room are as follows:

* + Beds are made neatly.
	+ Trash is emptied. If applicable, dirty diapers are to be taken outside immediately or put in a diaper genie.
	+ Floor is vacuumed well and toys are picked up and stored neatly in their proper place.
	+ Personal items on shelves neatly and dresser tops are organized and tidy.
	+ Laundry is in a basket or container.
	+ Emergency flashlight is in its designated place and working.
	+ Please be sure all lights, radios, curling irons, etc. are turned off while you are out of your room.

Please keep your room neat and tidy. Bulletin boards are provided for you to decorate in your room. The common areas of the house are for everyone – please pick up after yourself prior to leaving a common area.

The bedrooms and hallways are considered “**quiet areas**”. This means that while in these areas all clients, and their children (if applicable), are asked to be quiet and respectful of the rest of their peers. Playing music softly is allowed.

#### Room Inspections:

For safety purposes, client’s rooms and/or personal belongings may need to be inspected/searched by a staff member to ascertain whether alcohol, drugs, tobacco products, lighters, matches or paraphernalia are in a client’s possession. Any alcohol/drug/nicotine/tobacco related items (including e-cigarettes) found are immediately disposed of by staff after the client has been notified of their discovery and may also result in notification to authorities. Night staff checks each client’s room and the rest of the residence each night. This is for the safety of all.

#### House Meeting:

House meeting is a time for staff and clients to get together and talk about rules, phases and policies. This is an opportunity for your input and provides an outlet for you to discuss your needs.

1. Please come prepared with topics you would like to address.
2. There will be a meeting leader and a note taker.
3. This is not a group therapy time, so discussion during this time should not go into the realm of group topics.
4. You are required to attend House Meeting. If for some reason you are unable to attend (illness, emergencies, etc) you are responsible for reading the notes in the House meeting notebook or designated area. If you miss a House Meeting and are unsure of something that was discussed, ask a peer or staff member who was present.

**Visitors & Guests:** Because your safety is important to us, we have established the following guidelines:

* + If you would like to have a visitor, your counselor or designated staff must approve the visitor prior to the visit.
	+ A visitor may be removed from your list even though they have been previously approved.
	+ Visitors are not allowed to drop by without prior approval.
	+ You must fill out a staffing form and a release of information form for all visits/visitors.
	+ Visitors will be required to show photo identification and are required to sign a HIPAA confidentiality form at their first visit.
	+ Visitors are expected to follow the same rules and regulations of the program that clients follow.
	+ If a visitor appears intoxicated, under the influence of drugs or is belligerent or threatening in any way, they will be asked to leave the premises immediately**.**
	+ Please notify staff if you are going to have a visit from an agency. Some agencies are not permitted to visit due to confidentiality of the other clients.
	+ See specific program Quick Guidelines for visitation times.
	+ All tobacco products are prohibited by visitors, staff, and clients at any and all St. Monica’s facilities.

#### CLIENT FEES

Client fee expectations for participation in St. Monica’s programs are specific to each program. See specific program sections of this manual to determine your financial expectation based on the program you are participating in.

#### EBT Card (Food stamp benefits):

St. Monica's provides room and board for clients in residential substance abuse programs. In order to help cover these costs, clients entering a St. Monica's residential program are expected to turn in their EBT (food stamp benefits) card to St. Monica's staff upon admission. If you do not have a current EBT card, you will be expected to apply for benefits upon admission. A case manager or residential coordinator will assist you in this process. It is illegal (federal regulation) for you to use your EBT benefits while in our residential program. Violation may result in permanent revocation of EBT benefits by the State.

#### HEALTH & SAFETY

**Abuse and Neglect:**

The Nebraska State law requires any person who suspects that a child and/or a vulnerable adult has been physically or sexually abused or neglected, exploited or if there is a suspicion of misappropriation of clients’ property to report it promptly to the Nebraska Department of Health and Human Services.

It is our policy at St. Monica’s to adhere to this law and report any behavior we suspect is abusive or neglectful. This is never an easy call to make and we try to involve the mother (when this involves a child) as much as possible in this process. Because we are required to make the report promptly, we sometimes must make the call without the mother’s involvement. The reporting party should be the staff member or client who witnessed the event. Anyone can report a case and under law is required to report anytime abuse or neglect is suspected.

#### The hotline number is 1-800-652-1999;

**DHHS, Div. of Public Health, Licensure Unit, DD & Behavioral Health Facility Section, PO Box 94986 Lincoln, NE 68509.**

**Agency Visitors:**

Periodically, St. Monica’s will bring visitors and/or vendors (exterminator, maintenance contractors, etc.) into our residences for tours or to perform maintenance services. If possible, you will be notified when this occurs.

#### Emergency Tests and Procedures:

Safety of the clients, children, and staff are of utmost concern at St. Monica’s. Fire extinguishers and first aid kits are located at each facility on multiple floors and you are responsible for knowing where fire extinguishers, exits, and first aid kits are. Exterior doors are to remain locked at all times. Each room has a fire and tornado evacuation plan and flash light for emergencies. Flashlights are part of your daily room check and need to be in their designated place at all times.

Each month, the staff will conduct 3 emergency tests. They will occur on different shifts and you will be notified prior to the test. Tests include fire drills, medical emergencies, power outages, natural disasters, etc.

Participation in all emergency tests/drills is required! See specific program Quick Guidelines for evacuation areas for your specific facility.

* + **Fire alarms**: WHENEVER you hear the fire alarm, you need to treat it as the “real thing”. Please exit through the NEAREST door. You and your children (if appropriate) need to exit as soon as possible. Fire drills are timed and all women and children will be accounted for before re-entering the building, once you are outside, at the designated area. You will then be asked to sign a form indicating you participated in the drill.
	+ **Natural Disasters**: If you are signaled of a natural disaster, please go to staff and follow their directives. For tornado drills, please ensure you and your children (if appropriate) have your shoes on. Please take your pillows and go to the designated tornado shelter immediately.
	+ **Power Outages**: If there is a power outage, please take the flashlight from your room and gather in the living room to wait for staff’s directives.
	+ **Unwanted Visitor**: If there is an unwanted visitor, please go to your room or the safest place in the facility. Staff will advise when it is safe to leave your room or designated safe place.

***Again, these drills are all conducted to maintain the safety of clients and staff. Participation in these safety drills or true emergency procedures is REQUIRED.***

**Candles:**

Candles with flames are not allowed in any of St. Monica’s properties.

#### Pets:

Because we understand the importance of pets, clients’ pets may be allowed to visit St. Monica’s residential facilities, however, due to liability and health and safety issues their *visit must be approved by the Program Coordinator* and the pet must remain outdoors.

St. Monica’s recognizes the benefits of integrating Comfort Dogs in the workplace and our homes to increase happiness, reduce stress, and provide emotional support. Comfort Dogs are owned by the agency. Each Comfort Dog has a specific rule list for staff and clients to follow to ensure consistent care and treatment.

All staff and clients will be expected to review, understand, and implement the specific rules.

#### Smoking:

***In accordance with the Nebraska Clean Indoor Air Act or the Lincoln Smoking Regulation Act, the policy of St. Monica’s is to provide a tobacco-free environment for all clients, staff, contractors and visitors. This policy covers the smoking of any tobacco product, the use of spit tobacco, the use of e-cigarettes, and applies to all clients, staff, contractors and visitors.***

* + ***There will be no use of, or possession of, tobacco products or e-cigarettes, within the facilities or on any property of St. Monica’s, including St. Monica’s vehicles, at any time.***
	+ ***Clients are informed of this policy prior to admission into the program during discussion regarding what belongings will not be allowed in program, at admission during the intake process, through signs posted in company facilities and vehicles, the client manual, and orientation provided by staff.***
	+ ***Cigarettes/tobacco products found at time of admission are confiscated (including matches and lighters). Upon admission you will have an opportunity to have any cigarettes/tobacco products in your possession returned home with family. Any cigarettes/tobacco products found in your possession after admission will be confiscated and destroyed.***
	+ ***You are prohibited from using tobacco products and/or e-cigarettes while a resident of St. Monica’s at any outside functions, meetings, activities and events.***
	+ ***Counselors/Psychiatric Nursing staff will assist you, upon request, by offering education regarding options which may include the nicotine patch and/or medications to help with cravings. Smoking Cessation/Coping Skills Groups are offered for women who want to address their nicotine addiction.***
	+ ***Violations of this policy will be reviewed by the Clinical Director and may result in termination from program.***

**Physical Exam:**

All women entering the residential programs must have a nursing assessment with medical staff of St. Monica’s within the first week of their admission to the program. Staff will assist you in setting up medical appointments/referrals as needed.

#### Drug-Free Environment:

The use or possession of alcohol, licit or illicit drugs or drug paraphernalia on the premises will not be tolerated and may be grounds for dismissal. Clients will be asked to comply with a UA (urine test) or a breathalyzer test to detect the presence of alcohol or drugs. This is done randomly and on a consistent basis. Clients returning to the program from an outing may also be tested on a random basis upon return.

We do our best to keep the residences safe and drug free. We ask your help in keeping us informed if you suspect or become aware of any attempt to use substances in the residence. Any client returning to the facility under the influence of any mood-altering chemical will be transported to Detox until they are stable. Return to the program/residence will be determined after a meeting with the Clinical Team. Each situation will be dealt with on an individual basis by the clinical staff.

#### Medications:

Because St. Monica's is a treatment facility for women who are diagnosed with substance abuse and/or co- existing mental health issues, you were asked to sign an Informed Consent agreeing to discontinue the use of Controlled Substances and Habit Forming Medications at admission to St. Monica's. Examples of some of these medications include but are not limited to:

1. Opiate pain medications
2. Benzodiazepines (xanax, valium, etc.)
3. Sleep meds (Ambien, Lunesta, etc.)
4. Other scheduled/controlled medications as determined by St. Monica’s provider

\*Long-acting ADHD medications are preferred over short-acting ADHD medications (Adderal, Ritalin, etc.). Active prescriptions for ADHD medications will be reviewed during admissions with medical staff and, if needed, appropriate alternative medications will be discussed with St. Monica’s psychiatric provider. St.

Monica’s does not guarantee the continuation or renewal of ADHD medications which were not prescribed and in use during the admission process.

Upon admission, all client medications will be reviewed by St. Monica’s medical staff and any active controlled substances or habit-forming medications, as determined by St. Monica’s, will be subject to discontinuation or weaned as appropriate. You will be scheduled for an appointment with St. Monica’s Psychiatric provider to determine a wean schedule and/or appropriate alternative medication, or your own provider (PCP) will be contacted for a wean order or alternative medication.

Special extenuating circumstances that allow controlled or habit forming meds to be prescribed during treatment by an outside provider will be allowed only with a signed note from the prescribing provider that

no other non-controlled or non-habit-forming medication can be used instead, and/or at the discretion of St. Monica’s APRN/Psychiatrist.

***All medication*** *must be given by a staff member.* This includes pain relief (i.e. aspirin, Tylenol, Ibuprofen, Advil, etc.), over-the-counter cold medications, allergy medications, or any other medication you have in your possession.

Medications will be inspected and monitored by staff. All prescription drugs must be taken as prescribed. Medical changes must be ordered by a medical provider. Refusal to take medications as prescribed will result in a consultation with medical staff to discuss your reasons for refusal and support you in your recovery. In the event that you see a medical provider other than a member of St. Monica’s Medical Team and that provider prescribes a medication for you including over-the-counter medications, you must request that your provider present a written prescription. No prescription will be filled without a written order (even over-the- counter). All prescriptions must be processed by St. Monica’s Nurse Practitioner prior to being filled.

#### Weapons:

Residents are not permitted to bring weapons of any kind onto the premises. This includes guns, knives, chains, mace/pepper spray, etc. or any other object that might be perceived as a weapon. If you have anything of this nature, you are to turn it over to staff immediately. If you are aware of, or suspect any of these items are on the premises, it is your responsibility to report it to staff.

#### PERSONAL ISSUES

**Relationships:**

Due to the significant relapse factors associated with intimate or romantic relationships, St. Monica’s strongly urges that you do not initiate romantic relationships while you are involved in treatment. This is recommended so that you can use your time and energy to focus entirely on you and your recovery program. If you have been in an *established* relationship for a significant amount of time, you may request a visit with the person and work with your counselor to schedule a time.

St. Monica’s has specific guidelines regarding intimate relationships, and they can be discussed at any time with your counselor. If it comes to staff’s attention that you might be pursuing an intimate relationship, it will be discussed between yourself and your counselor. St. Monica’s Recovery Program includes educational groups on relationships, sexuality, and/or family education groups to help you work on these topics while you are here. This helps you to build a better sense of self so that you may build stronger relationships in your recovery.

#### Boundaries/Appearance:

Please be respectful of peer’s physical boundaries. Since many women come into treatment with histories of trauma, it is important to empower yourself with healthy boundaries as part of your recovery. It is a good idea to ask first if you want to give someone a hug. Inappropriate contact will not be tolerated. Inappropriate contact includes: playing with someone else’s hair; sitting on someone’s lap; horseplay, etc.

Please be respectful of yourself, St. Monica’s staff and your peers, and do not dress in sexually revealing clothing either in the residence or out in the community.

While you are at St. Monica’s, we will be assisting you in developing new, healthy behaviors and daily routines. Part of that process involves taking pride in your personal appearance. This will also assist you in building your self-esteem.

* + Each day you are expected to shower/bathe, put on clean clothes and *present yourself as if you are going to work or school.*
	+ The following are not appropriate to wear outside of the house:
		- Pajama pants (lounge pants) or clothes you have slept in
		- Slippers
		- Tops with spaghetti straps and/or strapless tops
		- Low-cut and revealing tops
		- Mini-skirts or short-shorts
		- See through clothing
	+ Undergarments are required at all times (when not in your room)

If you need clothing we may be able to assist you. Please talk to staff for assistance.

#### Tattoo and Piercings:

Due to the complexity and nature of recovery, there are certain things that St. Monica’s asks you not to participate in while you are a resident in our programs i.e., body piercing and/or tattooing. This action has a tendency to mimic addictive behaviors. We also ask that you do not sell plasma or take part in any paid experiments while you are in residence.

#### Borrowing:

Borrowing of any kind (money, clothing, vehicles or any other personal items) is discouraged at St. Monica’s. If you choose to loan/borrow you are assuming the responsibility for a potential loss. St. Monica’s is not responsible for any lost or stolen items.

#### Supplies and Personal Belongings:

**St. Monica’s does not accept responsibility for distributing or safeguarding client funds.** Any funds you bring into the program or acquire while in the program are your responsibility. We do have vending machines that take dollar bills or change. You may be approved to bring your own snacks; soda, etc. (please limit these items). When you leave a St. Monica’s program, you have 5 days to collect any personal belongings left behind. After 5 days, these belongings will be donated. If you designate someone else to pick up your belongings for you, you must notify us prior to sending them and provide the name of the individual that will be recovering your belongings. St. Monica’s is not responsible for any personal items brought in to treatment or items left behind.

**Radios are allowed. All other electronic devices must be approved by your Residential Manager.** Radios should not be heard outside of your room. Please ensure the music you listen to is appropriate. Staff will confiscate music that is inappropriate due to its content of bad language, drug or alcohol use or violence. Music will be returned to you upon discharge. We strongly encourage you to evaluate the music you are listening to for appropriateness for a recovering lifestyle.

Any items, **clothing, or decor that depicts violence, drug or alcohol use**, or drug paraphernalia or condemnation of any gender, culture, religion or sexual orientation is not permitted. You will be asked to remove these articles from the residence. Guns, knives, chains, or any other item that may be perceived as weapons, are not allowed. You also may not keep any of these items in your car.

**Toys** that can be considered violent (guns, swords, knives, etc.) will not be allowed. Any items that are deemed inappropriate will be removed by staff unless you can find an alternate placement.

For safety reasons, St. Monica’s **prohibits the use of hot steam vaporizers** in all St. Monica’s facilities. If you have a medical reason/order for use of a hot steam vaporizer, alternate options will be discussed on an individual basis.

**Cleanliness:** In order to keep a clean, safe environment, the following guidelines have been established:

1. **Hair dye** is not allowed in the residences.
2. Sanitary pads and tampons must be wrapped and placed in the garbage can. DO NOT flush these items.
3. Showers must be sprayed with bleach disinfectant after each use.
	* Blood spills need to be cleaned with a bleach solution that consists of a ¼ cup of bleach to one gallon of water.

If you are in need of personal items such as soap, shampoo, tampons or sanitary napkins, razors, toothbrush/toothpaste, lotion, or any other personal item, please ask a staff person. We try to maintain a supply of these items, and they are available for client use if they are available.

#### Linens:

St. Monica’s provides bedding and towels to clients admitted to the residential programs. These items are kept in your room and returned to the mentor office upon discharge.

Each bed has a blanket and/or a comforter and a pillow for client use. Additional pillows will be provided if approved by Medical.

### CLIENT CONDUCT AND GUIDELINES

**System of Enhanced Learning** is a process for teaching and helping you to achieve insight about yourself, your behaviors and the consequences of behaviors. The following are examples of Enhanced Learning techniques that St. Monica’s applies:

1. **Verbal Coaching:** A verbal is a time that staff or peers use to help a client understand a new process. This process may be specific to the program or a life skill that is new for them. A verbal coaching is meant to do just that… coach. For example, you may not understand why it is important to wash your hands before holding your child. By staff doing a verbal coaching, we can share about the health and safety concerns of cleanliness.
2. **Written Coaching:** A written coaching is time for staff to sit down with you and help you understand underlying factors in behaviors. A written coaching is meant to help you see the reasons behind your actions and to help you with a plan for safer behaviors.

#### Natural and Logical Consequences:

Periodically, a client may be given a consequence. This may become necessary when a client is not complying with policy(s) and/or procedure(s) of the program, or, has made unhealthy choices in an area and needs therapeutic intervention (a written behavioral or early discharge contract) to support/change behaviors. Natural and logical consequences are usually the result of poor choices made during treatment. Sometimes clients may choose a consequence that helps them make new recovery oriented decisions.

***St. Monica’s does not utilize either seclusion or restraint in our programs.***

***Staff and clients are to be treated with respect at all times***. Concern for the needs of others is a necessity for all people. Verbal, physical, or emotional abuse of staff or residents is not acceptable, will not be tolerated,

And will be grounds for immediate dismissal from the program. Examples of verbal/physical violence include hitting, pushing, spanking, yelling, and/or threatening.

In consideration of others, a low noise level is expected during early morning hours and evening hours. Televisions, radios, and voices should be kept at a low volume during these “quiet hours”. If you are asked by a client or staff person to be quieter, please comply with their request. Please be respectful of others’ space.

As with any home environment, conflict may arise. If you are having difficulty with a particular client, you are encouraged to try and resolve the situation yourself by talking to that person(s) appropriately. If you feel the situation is still not resolved or you are having difficulty talking to the person(s), staff will be available to assist you. It is important that you try to resolve the situation yourself as it helps to teach you valuable life skills and assertiveness techniques. Clients are discouraged from secret keeping and you are asked not to participate in any secrets among clients.

Staff asks your cooperation in reporting any behaviors that do not comply with house rules and guidelines. This includes inappropriate behavior outside the residences such as at meetings or any other activity in which the clients participate. We ask also that you discuss it with the individual(s) first and try to reach a resolution, before you come to staff. Remember, secrets kept are a downfall for people in recovery. The truth is always the healing choice.

### ALUMNI

At times, St. Monica’s holds special alumni meetings or holiday gatherings. If you would like to participate in the alumni activities upon your discharge from a program, please make sure that the administrative office has your current address so you can be informed about these gatherings and any new developments in the alumni program. We are always excited to hear any suggestions you might have as an alumni of St. Monica’s. Please keep in touch with St. Monica’s and let us know how you are doing. The Alumni groups are led by our Peer Specialist.

Former residents like to visit the houses and staff at times after they have graduated and moved out. These visits are pre-approved by a counselor at a designated visiting time.

### CLIENT RIGHTS and RESPONSIBILITIES

As a client at St. Monica’s, you are entitled to certain rights and privileges. You have been provided a copy of the Client Rights and Responsibilities and an explanation of these rights. In addition, they are posted in every program. If you have any questions about any of these rights and responsibilities, please do not hesitate to ask.

### ST. MONICA’S CLIENT RIGHTS

St. Monica’s staff must ensure that the basic and fundamental legal and human rights of each client are not violated. These rights include but are not limited to:

1. The client has the right to considerate and respectful care, and at all times the client will be treated with dignity and respect.
2. The client shall be served without regard to and with respect for age, race, color, national origin, sexual orientation, spiritual beliefs, economic status, disability, marital status, transportation status, ability to pay, or inability to read, write, or speak English.
3. The client shall not be deprived of any civil, personal, or political rights by the agency without due process of law.
4. The client shall have the right to communicate freely with her attorney and private physician and have her clinical record made available to these individuals upon her written request.
5. The client has the right to the access of information pertinent to the person served in sufficient time to facilitate the person's decision making.
6. The client has a right to access or referral to legal entities for appropriate representation, self-help support services, and advocacy support services: adherence to research guidelines and ethics when persons served are involved. If applicable; and investigation and resolution of alleged infringement of rights.
7. The client shall have an orientation to the program and her treatment, including staff procedures and responsibilities, client responsibilities and fees for services. Fees are assessed according to client’s ability to pay and are discussed with client by Admissions Coordinator. Duties and expectations of each are clarified.
8. Clients are entitled to a physically safe environment, free from hazards, including communicable disease.
9. Any concern that a client or legally responsible person has concerning the services provided by St. Monica’s should be specified by completing a *Client Interest and Concern Form* and/or a *Client Grievance Form*. (This will not result in retaliation or barriers to service.) Assistance completing the form(s) will be provided as needed/requested. For additional information or questions, contact the Clinical Director.
10. Clients have the right to receive caring and safe services free from physical, sexual, psychological, and financial abuse as well as neglect, harassment, and physical punishment, humiliating, threatening, retaliating, or exploiting actions. St. Monica’s prohibits the use of seclusion and restraint.
11. If a client is discharged from a program, she will be provided a written notice of discharge that will include a clear explanation of why she is being discharged from services. The client has the right to submit a Client Discharge Appeal to appeal the decision to discharge.
12. The client has the right to retain and use approved personal possessions. The client shall be responsible for her own property and for its removal after she leaves the agency within 5 days.
13. Every client can reasonably expect to obtain from the clinician, complete and current information concerning her diagnosis and recommended treatment, in language the client can reasonably be expected to understand. In instances where it is not medically advisable to give such information to the client, the information may be available to an appropriate person in the client’s behalf.

1. The client has the right to reasonable privacy and private space for personal belongings. The need for reasonable privacy during visits and therapeutic intervention will be accommodated, as deemed appropriate by St. Monica’s staff.
2. The client shall have right of access to her own concurrent clinical record unless restricted by law. This means that the client can view her clinical file only in the presence of a clinician.
3. The client will be notified in advance when visitors will be in the facility so that the client can take any necessary arrangements to protect her privacy. If possible, visitors to the facility will be scheduled during office hours.
4. The client shall be allowed to communicate with all persons by sealed mail, and phone conversation. Any limitations on these privileges are noted in the client manual.
5. The client shall not be denied treatment solely because she has withdrawn from treatment against staff advice on a prior occasion, or because she has relapsed after earlier treatment. Additionally, the client will be free from arbitrary discharge or transfer from any of St. Monica’s programs.
6. The client shall be allowed to engage or refuse to engage in religious worship and political activity.
7. The client has the right to know the names and professional status of staff members responsible for her care.
8. Clients shall have the right to expect reasonable continuity of care in referrals.
9. The client has the right to participate in planning her recovery program, including family involvement, discharge planning, and aftercare planning. The client will be given an *Informed Consent for Treatment* form to assist in understanding and expectations regarding treatment.
10. The client has informed consent or refusal or expression of choice regarding concurrent services and composition of the services delivery team.
11. The client has the right to expect that information contained in her clinical record will not be released without written consent, as specified in the June 9, 1987 Federal Register. A signed consent to release information form will be maintained in the client’s record.
12. The client has the right to expect that all information collected by the agency for the purpose of evaluation outcome research will not include any personal identifying information and will not be released without written consent.
13. The client has access to crisis intervention services.
14. If the client demonstrates the need for special treatment or interventions involving other treatment disciplines that are not offered by St. Monica’s, the client’s counselor will make appropriate referrals.
15. The client has the right to examine the results of the most recent survey of the facility conducted by representatives of Nebraska Health and Human Services.

**CLIENT RESPONSIBILITIES**

1. You are responsible for contributing and participating in the planning of your care and service.
2. You are responsible for treating St. Monica’s staff and your peers with respect.
3. You are responsible for honoring the confidentiality and privacy of all others.
4. You have the responsibility to be honest about matters relating to you as a client and to report any changes that are pertinent to your care (i.e. changes in address, legal matters, changes in income, medications, physicians, or other services).
5. You have the responsibility to refrain from discriminating against staff or peers and from using language or behavior in a manner that would imply prejudice or discrimination.
6. You have the responsibility to notify staff if you feel your rights are being violated.
7. You have the responsibility to follow the grievance procedure in making any complaint and to report to St. Monica’s Corporate Compliance Officer any actions taken against you by a staff because of that complaint.
8. You have the responsibility to follow St. Monica’s guidelines and procedures affecting your care and conduct.

###  ST. MONICA’S GRIEVANCE POLICY/PROCEDURE

St. Monica’s has a formal procedure for reviewing and responding to client concerns and grievances.

* + In most cases, when problems arise, solutions can be reached informally between clients and staff. However, if you have made attempts to reach a solution informally and none has been reached, you may take additional steps toward resolution.
	+ The next step would be to use a Client Interest and Concern Form. Any St. Monica’s staff can provide the form for you and assist you in completing if you so desire. You are encouraged to use this process within 7 days of the problematic event. Upon completion of this form you will be provided an envelope to submit the form to the Clinical Director. The concern will be reviewed by the Clinical Director who will respond to you within 3-5 working days of receipt of the form with a plan for resolution.
	+ If, after completing this step you do not feel the issue has been resolved, you may complete the Client Grievance Form which is also available from staff. This form is then to be presented to the Clinical Director or another member of the Leadership Team (Chief Executive Officer), if you do not feel the situation was resolved satisfactorily.

Nebraska State law requires any person who suspects that a child and/or adult has been physically or sexually abused or neglected, exploited or if there is a suspicion of misappropriation of clients’ property to report it promptly to the Nebraska Department of Health and Human Services.

#### The hotline number is 1-800-652-1999;

**DHHS, Div. of Public Health, Licensure Unit, DD & Behavioral Health Facility Section, PO Box 94986 Lincoln, NE 68509.**

**CLIENT INPUT/FEEDBACK**

There may be times while you are in St. Monica’s programs that you will be asked to talk with an objective staff person regarding the quality of services you are receiving or have received and your satisfaction with these services. We collect this information so that we may better serve our clients and your input is valuable and appreciated. This may come in the form of Town Hall meetings where you sit as a group and talk or it may come in the form of a written survey that you are asked to fill out. When you leave our programs, you will be asked to fill out a Discharge Evaluation as well and we ask that you maintain contact with us after

you leave so that we can send you follow-up surveys. All of this information, regardless of how it is collected, is kept anonymous and you do not have to sign your name if you do not wish to do so.

***In closing, we hope that your treatment at St. Monica's will be a life enhancing experience. Staff are dedicated in the field of human service and are here because they really do care about women, their families and their recovery process. If you have any questions concerning your program, please ask your counselor and/or other available staff and we will do our best to answer and resolve your questions as soon as possible. We are here to help you gain the tools for a successful recovery and hope you take advantage of the resources offered.***

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**St. Monica’s Short-term Residential Program (STR)**

**INTRODUCTION**

St. Monica's Short-term Residential program is a holistically oriented program created to help individuals heal themselves physically, emotionally and spiritually. The programming day includes opportunities to assist you in healing your physical body and learning relaxation techniques. The 8 week program emphasizes empowerment and providing opportunities for you to make good choices. The Short-term Residential program allows women to explore a variety of options in their healing process and gives them education in the following areas: healthy relationships, sexuality, anger management, healthy communication, nutrition, spirituality, dual disorders, mental health issues, step work, relapse prevention, trauma informed and sensitive groups to help cope with activators and grief, in addition to groups helping with life management skills. You will also have regularly scheduled group therapy and weekly individual sessions with your counselor. Community resources are also utilized to enhance the program such as AA/NA meetings and recreational outings. The program is designed for women to find their own identity in their healing process and their own connection with their Higher Power to create a solid foundation for their recovery program.

We will do what we can to make you comfortable in your new home. Other residents may be able to answer many of your questions and you will be assigned a “Big Sister” upon your arrival to help with your adjustment.

#### STR Staff phone numbers:

STR Counselors: (402) 413-0327 X 235

(402) 413-0327 X 705

(402) 413-0327 X 212

STR Program Coordinator (402) 413-0327 X 706

STR Mentor Office (402) 413-0327 X 701

STR Case Manager (402) 413-0327 X 201

Clinical Director (402) 413-0327 X 210

(See STR Quick Guidelines for a specific listing of program staff)

### ORIENTATION WEEK

Orientation week is designed to help you learn more about the program and is a settling in period of time where you will have more structure than later in your treatment process. It gives the staff an opportunity to get to know you and learn how we can best meet your needs as a client in our program. Staff will be gathering information regarding your substance use, your medical history, your social and family history, and any other information that will help us to provide the most comprehensive treatment care for you. Information gathered during this phase is used, with your input, to create your Individualized Treatment Plan designed to meet your individual needs and preferences. This will serve as an agreement between you and your counselor and will include problems, goals, objectives, your responsibilities and expectations as well as interventions developed to meet your specific needs.

#### Some important guidelines to remember while you are in Orientation:

* + - Orientation is meant to be a time to focus on yourself and your beginning recovery, so outside contact may be limited during this week.
		- Minimal telephone calls, outings, or visits except with children under 18 will happen during orientation. If you have young children, extra telephone calls to them and visitation may be arranged with by the Parenting Peer Support.
		- After completion of your orientation groups (usually by the second week) you will be asked to complete an orientation quiz about the rules and requirements of the STR program. You will then be given the opportunity to volunteer to be a Big Sister to newly admitted clients into the STR program.

### ACTIVE TREATMENT

After Orientation you will move into the next part of your treatment where you are working with your counselor to continue to develop your Individual Treatment Plan, designed to fit your individual treatment needs. Your Individual Treatment Plan continues to serve as an agreement between you and your counselor and will include problems, goals, objectives, and interventions developed to meet your specific needs and preferences. It is expected that you will meet the objectives on your treatment plan while you are participating in the program. You are also expected to participate in all scheduled programming, including outside 12-step meetings, outings, and other scheduled extra-curricular activities weekly.

During your treatment in short term residential you will be doing emotionally intensive work as you address relapse prevention strategies, explore relapse cycles, address co-occurring mental health issues, and begin to resolve and stabilize underlying traumas and grief. As you continue this recovery process, it is also important to look at transitioning out of residential treatment and back to your outside life. Discharge planning may include re-unifying with your family, establishing new housing or secondary care to further transfer your treatment goals into your lifestyle. You will have case management assistance to help you with these areas. It is very important to establish a healthy support system for your recovery process after residential treatment and this will be addressed as part of your ongoing treatment/discharge plan.

### PROGRAM INFORMATION AND EXPECTATIONS

To make a consistent, supportive and empowering environment, there are certain guidelines and policies of the residence that you are asked to follow. Everyone is expected to follow these guidelines, unless they have been exempted by the clinical staff for some reason. Please read the following carefully so you can familiarize yourself with these policies and guidelines.

#### Expectations regarding client fees for Short-term Residential Program (STR):

Expectation: You will be expected to make a payment at least monthly.

Consequence: If payment is not made each month, your counselor will be notified and this may be addressed as part of your treatment plan.

#### Participation:

All residents are expected to take an active role in the groups and activities. You will fill out your weekly programming schedule of groups each week for the following week during house meeting. Your primary counselor can help you in choosing the groups most beneficial to your recovery process.

***You are responsible for being on time to meetings, groups, and individual sessions*.** Each day you will sign in. You need to be accountable for your time and to be present at each scheduled group throughout the day. You are not allowed to be in the residence during daytime program hours or to be in the halls or outside during scheduled group times. We want to be able to provide the best care

possible so that you can get the most from the program, so please be respectful and accountable to the group schedule. An actual daily schedule will be provided to you by your clinical team.

Additionally, one individual counseling session per week is scheduled with your counselor. It is ***your*** responsibility to meet with your counselor as scheduled. Family educational group is available one evening per week and on Saturday afternoons and family individual sessions are scheduled, as needed and agreed upon with your counselor.

#### Required Attendance:

***You are expected to attend all regularly scheduled groups and program activities to receive the most benefit unless you have received permission to miss by your counselor and by the group leader.*** At times, we do special activities and you are asked to attend these. Staff will give you advance notice of these times so that you may plan around them.

### RESIDENTIAL GUIDELINES

#### Meals & Bedtime:

Every person in St. Monica’s residential programs is expected to eat balanced, nutritional meals, which include breakfast. Proper nutrition is important to your recovery. Meal times are schedule for a specific time each day. See STR Quick Guidelines for specific times.

Our kitchens are open for your use at specific times as indicated in the STR Quick Guidelines. Food is provided for you. The following are specifics regarding meal times, meal preparation, etc:

* + - Gloves and hair nets must be worn during meal prep and clean up.
		- During breakfast a goal for the day is said and during dinner a positive for the day is shared.
		- You may be excused from the table by the cook 15 minutes after a meal is begun.
		- Please be courteous and respectful about your peer’s cooking.
		- The menu is to be followed as planned.
		- You will have a rotation in your kitchen for cooking and are expected to participate.

#### Smoking:

St. Monica’s is tobacco free at all facilities – all tobacco products are prohibited by clients, staff and visitors. See page 21 for additional information.

#### Telephone:

Cell phones are not allowed in Short Term Residential (STR). This is to help you focus on your time here and to heal. You deserve this time. Telephone time of 15 minutes per day during the week and 2 15 minute calls during the weekends are provided for you to make calls to family and friends. Business related needs can be arranged with your case manager or a DART team member. Calls need to be made outside your regular phone time and can be arranged with your counselor by filling out a phone permission slip. These permission slips can be found on the information board outside of the STR office. Emergency calls from family members can be received (see staff for phone number of your respective location). Friends and family may call the residence line during your phone time. You are the only one who can answer the residence line during your phone time and you will need to give family and friends the number.

#### Visitation:

All visitors over the age of 18, must complete the screening process prior to being approved to visit. Please see your STR Quick Guidelines for the screening process. Visitors are allowed in approved locations, see Quick Guidelines. You may talk to your significant other on the phone and visitation

may commence as arranged with your counselor after they have attended Family Ed Group. Any alternations to this general rule can be discussed with counselor. See STR Quick Guidelines for specific days/times for visits. Again, please work with your Parenting Peer Support to plan children visits. Only staff can let visitors into the building and check them in for the visiting time. Individuals actively participating in Family Therapy and/or Family Group may have an opportunity for a pass off campus with family or family members that are involved in family sessions or groups. Significant others may be approved for a visit by your counselor after they have attended Family Ed Group. Please speak with your counselor regarding this process.

#### Television and Radio:

St. Monica’s believes and research proves that negative messages from music, television and movies influence all of us in a negative way and that positive and uplifting messages influence us all in a positive way. Based on this research St. Monica’s does restrict the type of music, television and movies that can be listened to and viewed. Violence, profanity and messages glorifying alcohol and drug use are not allowed. Our goal is provide you with a nurturing and safe environment for healing. See STR Quick Guidelines for specific television viewing hours. Radios are allowed in the kitchen during cooking time and bedrooms at anytime. Please remember to keep the volume at a respectable level for your roommate and others in the building.

#### Laundry:

A sign-up sheet is used during group meetings for you to schedule a time to use the laundry room. If you need to change your time this can be discussed during group meetings. If the laundry room is not in use, you can ask the mentor if you can use it. Laundry soap is provided for you. Please remember to clean out lint shoot each time you use the dryer and remove your clothes promptly from the machines when they are done. Further instructions on using the laundry are in the laundry rooms. If there are still clothes in the machine, do not remove them. Ask a mentor for assistance.

#### Time Away From the House:

Short-term Residential maintains a sign-in/sign-out book. This is to inform staff of your whereabouts at all times, and *you are asked to use this system every time you leave the residence for* ***any*** *reason*. Staff also uses the sign-in/sign-out book in case of an emergency when residents need to be evacuated from the residence. It is designed to provide an accurate account of who is in the residence and who is not at any given time. You are asked to log:

* 1. The time that you leave
	2. Where you are going. (Please be specific.)
	3. If possible, where you can be reached (a telephone number or address)
	4. What time you expect to return
	5. The actual time you returned
	6. Only you can sign yourself in and out of the house. Don’t ask anyone else to do it for you.

#### House Duties:

Daily chores will be assigned each week. The STR/Kitchen clean up duties will be determined during meal planning.

#### Trash/Garbage:

You are asked to empty all trash in your rooms on a daily basis. Kitchen and bathroom trash must be emptied daily or more often as needed throughout the day. Personal trash and bathroom trash are not to be added to kitchen trash. Recycling is encouraged and is picked up on Tuesdays at 120 Wedgewood.

#### Program Graduation:

Once you have successfully completed your program, you will participate in a graduation ceremony and receive your certificate of completion and a medallion. Family and friends are invited and encouraged to attend your graduation celebration.

#### CONTINUING CARE

You and your counselor will make a continuing care plan that will address your individualized treatment needs. If you will be transferring to another level of care within St. Monica’s you will need to make an appointment with the admissions department to be admitted into this level of care and make financial arrangements to take care of your bill. Your continuing care plan may include secondary care at the Therapeutic Community programs; Outpatient counseling and/or Community Support.

If you live in an area outside of Lincoln, your counselor and/or case manager will help you set up your positive support network in your hometown. This network will include regular meetings, substance abuse counselor, and other support resources in your community. The Peer Specialist may also continue to be a support resource for information or guidance.

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**St. Monica’s Project Mother & Child Program (PMC)**

**and**

**\*\*Women are Sacred (WAS)**

**INTRODUCTION**

Project Mother and Child (PMC) and Women are Sacred (WAS) services include substance abuse and mental health treatment, parenting education and support, and domestic violence education for mothers who have their children living with them. PMC opened in 1994 and can provide services for women and their children in a therapeutic program, built on holistic healing. \*\*WAS opened in the summer of 2021 and provides services for women and their families from a Native American perspective.

PMC and WAS are considered secondary long-term treatment for women who want to address issues that led them to substances and kept them using. Your treatment/parenting plans will address all areas of your life. The length of stay for this residential treatment program is on average, 6 months. It provides 30+ hours of therapeutic programming per week that may include, but is not limited to, the types of services indicated in the General Section (page 8).

#### PMC Staff phone numbers

PMC Counselor (402) 413-0327 X 300

PMC Program Coordinator (402) 413-0327 X 112

Clinical Director (402) 413-0327 X 210

See PMC Quick Guidelines for a listing of current primary program staff names

**WAS Staff phone numbers**

WAS counselor (402) 441-3768 X235

WAS Program Coordinator ( 402) 441-3768 X401

Clinical Director ( 402) 413-0327X210

See WAS Quick Guidelines for a listing of current primary program staff names

### PROGRAM INFORMATION AND EXPECTATIONS

#### Expectations regarding client fees for Project Mother & Child (PMC):

Expectation: You will be expected to make a payment weekly.

Consequence: If payment is not made weekly, your counselor will be notified and this will be addressed as part of your treatment plan.

#### ResCare:

Clients living at a secondary program at St. Monica’s may be asked to participate in the ResCare program through HHS in order to maintain their benefits. If required to obtain ResCare hours, you will work with your counselor to set up a schedule to allow for volunteering, school and/or job seeking, while still attending important groups. It is your responsibility to get all of the necessary paperwork in to your ResCare worker; staff will assist you if you need it. Failure to follow your ResCare plan may lead to the suspension of all of your HHS benefits, including Medicaid, ADC and Food stamps. It is your responsibility to get to and from your volunteering. Staff will not transport you; however, St. Monica’s may provide a bus pass for you to use.

#### Client phone:

* + - * The client phone is available for use between certain hours (see PMC Quick Guidelines).
			* You are permitted to be on the phone for 15 minutes after which you need to wait 15 minutes before making another call. There are other families in the residence that may be expecting calls.
			* You may **NOT** answer the phone before the answering machine picks up the call and the caller starts talking. The answering machine is used to screen **all** incoming calls.
			* Never answer the phone for another client. Some clients have had abusers try to track them by stating they were someone else. Everyone must answer their own phone calls.
			* The phone may not be taken outside.
			* No phone calls are permitted during meals, snacks, family activity time, or programming (such as House Meeting).
			* Please do not dial 411 for directory assistance. Please use the phone book.

**Cell phones:** Contact with family/friends is important, however, we want clients to be able to focus on recovery and parenting. To assist, please follow the guidelines below:

* + - * There is to be no loaning or borrowing of cell phones.
			* Cell phones must be approved by staff before they can be used by clients within the program.
			* They are not allowed during house activities such as meetings, programming, Family Time, meals, family chore time, etc.
			* Cell phones need to be turned off while at the administration building.
			* Cell phones need to be turned in Mon-Thurs 11:00p.m. and Fri-Sat- 12:00a.m to the mentor and will be stored in the mentor office.

***Remember - Phone use is a privilege that may be revoked if abused.***

**Television:**

We want to provide a family atmosphere that promotes health; therefore, we have established guidelines for television viewing hours. (See PMC Quick Guidelines).

Only shows/movies suitable for children are permitted while children are in the room no matter how old the children are. Emphasis should be placed on news shows and educational programs such as Barney, Sesame Street, Dora, etc. Programs including drug/alcohol content, violence, criminal behaviors are not allowed i.e.: *That 70’s Show, Cops, Americas Most Wanted, The Family Guy, etc*. R-rated movies are not permitted.

**Participation:** All residents are expected to take an active role in the programs. A schedule of all activities will be given to you upon admission. If you do not receive a schedule, please talk with your counselor or a staff member, and they will make sure that you receive one.

Because each component of our program makes the entire experience beneficial, *your attendance is mandatory*. Permission to miss a group is granted by the group leader and your primary counselor. (If you choose to miss a group without obtaining permission, you and your counselor will discuss the resulting potential consequences of your non-participation). It is your responsibility to complete any missed assignments before the next group.

*You are responsible for being on time to meetings, groups, and individual sessions*. We want to provide the best care possible so that you can get the most from the program, and it is very important that staff and resident time is used wisely.

**Big Sister:** As a newcomer to the residential program, you will be assigned a Big Sister. This person will be made available to you to help familiarize you with the program policies and procedures. They will assist you until you feel more comfortable with the program and residence. You are encouraged to utilize this system and ask any questions you might have as they come up. It is always best to ask if you are uncertain about anything. If your mentor is unavailable, you can ask another resident or a staff person if you have questions. At some point in your successful recovery program, you may be asked to be a Big Sister for another resident.

**Room Assignments:** Residents are responsible for making certain that their space is kept clean and tidy *at all times*. This includes having beds made neatly, clothes put away and/or hung up, dirty laundry kept in proper containers, dressers (the tops) neat and uncluttered and floors neat and picked up. Residents may not rearrange the furniture in the rooms unless you have received permission from a clinical staff person. The agency also asks that you not put nails in the walls without permission or deface the room in any way.

Residents are charged for any property of St. Monica’s that is taken from the premises without specific permission from your primary counselor or the director. Each person in the residential programs is granted the use of: 2 sheets, 1 pillow and pillowcase, 2 bath towels, and 2 washcloths. Each bed has a blanket and/or a comforter for resident use. Extra blankets and/or pillows are supplied if they are available.

If you are in need of personal items such as soap, shampoo, tampons or sanitary napkins, razors, toothbrush/toothpaste, lotion, or any other personal item, please ask a staff person. We try to maintain a supply of these items, and they are available for resident use if they are on hand.

**House Duties:** As part of the residential program you will be asked to help keep the house and surrounding areas neat and clean. Individual chores are assigned for on-going cleaning needs and duty rosters are posted on a weekly basis. We also ask you to be mindful that garbage is stored properly outside.

A ***Chore Description*** handout is available at this program. These handouts contain the expectations of the agency for chores assigned and how they need to be carried out. It describes what is expected for each residence on a *daily* and *weekly* basis, so it is important that you read this thoroughly to familiarize yourself with its contents. If you are experiencing difficulty in understanding or meeting the expectations listed in the House Duty Description handout, please talk with a staff person as soon as possible. Spring and fall cleaning will be assigned twice per year. You are asked to empty all trash in your rooms on a daily basis. Kitchen and bathroom trash may need to be emptied more than once during the day.

**Laundry Facilities:** The house is equipped with a washer and a dryer for residents’ laundry needs. St. Monica’s provides general laundering supplies (laundry soap, washer and dryer, iron and ironing board). However, any special detergent, fabric softener, stain remover, etc. must be purchased by the resident needing or wanting them. *You are asked to be considerate of others when doing laundry and remember that there are many people using the machines. Never leave your laundry unattended or left lying around the laundry area.*

**Morning Wake-up:** Residents are asked to be out of bed, dressed with shoes, have their beds properly made, rooms neat and tidy, and clothes picked up and put away by the times indicated on PMC Quick Guidelines. (This *may* be extended on weekends. Please avoid wearing nightclothes in the common areas of the house (1st floors). If you are sick you must contact your counselor. You may be asked to consult the medical staff or a physician. You may not go to outside meetings for the day/evening, unless you have received permission from a clinical staff person. Residents (including children) may not be barefoot due to Health Department regulations.

#### Smoking

St. Monica’s is tobacco free at all facilities – all tobacco products are prohibited by clients, staff and visitors. See page 21 for additional information.

**Personal Vehicles:** You are permitted to have your own vehicle with you at the residences providing you can prove you possess a valid driver’s license, proof of insurance and proper car license and registration. There are designated parking areas for client vehicles. Clients are asked not to park in the driveways or on the street unless asked to do so by staff. Driving your personal vehicle is a privilege you will need to earn, and staff can revoke this privilege if they deem that your behavior is not responsible.

**Testing:** St. Monica’s requires random UA’s at various times.

### PASSES AND VISITS

#### Pass Requests:

Pass request must be submitted each week for the following week. Pass decisions will be made weekly by the PMC team and will be posted.

#### Visitors:

* Children under 12 may have overnight visits with their mothers as well. Fill out a pass request for this. Make sure that you let the person cooking know when your children are visiting to ensure that there is enough food.
* If you wish to invite your visitor or a past peer for dinner please get approval from the staff present and the cook.

See General Section for additional information regarding visitors (page 19) and PMC Quick Guidelines for visitation times.

#### PMC Schedule:

See PMC Quick Guidelines for a complete schedule of activities, meal times, etc. Your programming schedule will be provided to you by your counselor each week if applicable.

**MEAL PROCEDURES** One of PMC’s goals is to help establish a healthy, structured routine. Structure helps children know they are safe and loved. The following guidelines will assist with this goal:

* During breakfast a goal for the day is said and during dinner a positive for the day is shared
* You and your children are expected to be on time for all meals every day.
* Process for the Meal Time is as follows.
	+ 1) Everyone is called for dinner.
	+ 2) Everyone arrives at the dinner table and sits down at relatively the same time.
	+ 3) Younger children may be placed in high chairs or booster chairs and given a small toy (taken away when food is served) or cracker to keep them occupied during the time that everyone else is sitting down, the prayer is being said and food is being passed
	+ 4) As food is passed, mothers dish their children's plates before they dish their own plate and then food is passed.
* We do not expect you to eat if you aren’t hungry. We do expect you and your children to sit down at meal and snack times, participate in the conversation.
* The cook will include peanut butter and bread with meals so if children try and don’t like what’s being served they may eat a peanut butter sandwich (unless allergic). Alternate meals will not be provided nor will “late” meals be served.

See PMC Quick Guidelines for a schedule of mealtimes.

### HEALTH & SAFETY

#### Client/Child Illness

If you or your children have a fever of above 99.9 degrees, you are required to be on a sick day which must be verified by staff. Clients with symptoms such as: headaches, cramps, side effects from medications, nausea, colds, etc. are to attend programming and talk with the Nurse Practitioner.

* Reasons for sick day include: fever, vomiting, diarrhea (with additional symptoms or more than once within couple of hours), pink eye, head lice, and ringworm and must be verified by staff.
* Meals will be brought to you by the cook of the day.
* You will need to find someone to do your daily chores.
* While on sick day you are not allowed to attend meetings, pass requests, shopping or any other outing.
* You or your child must stay in your room during this time and are not able to be in the common areas until 24 hours after the fever has broke. You or your child will need to stay on sick day until 24 hours after your last incident of vomiting or diarrhea.
* A medical communication form must be taken to doctor’s appointment and be completed by physician for mother and child and turned in to staff upon return.
* The Nurse Practitioner will be called to approve any prescriptions you obtain at the doctor’s appointments.
* If the child meets the conditions to warrant being on a sick day, you are responsible for informing their daycare of their absence.
* If you are “not feeling well”, you are expected to go to admin to be seen by medical staff.

#### Safety

* Supervision is critical to keeping children safe. Children must be supervised by their mothers **at all times.**
* Keep toys and other items off the floor to prevent falls. Never place anything on the stairs.
* No jumping, standing, or playing on couches, furniture or radiators.
* No running in the house.
* Shoes or socks must be worn at all times and bare feet are not allowed outside your room.
* Food or drinks are not allowed outside the kitchen and dining room. Water in a covered container is the only exception. Sippy cups are not to be carried by children outside of the kitchen or dining rooms.
* All outlets (not in use) are required to have covers, including the outlets in your room. Notify staff if you need outlet covers.
* You and your children are not permitted to answer the door. Staff must answer the door and will accompany any visitors. If staff is not available to answer the door, the door will go unanswered. The only exception would be opening the door for your child.
* Diapers are to be changed in the bathrooms, bedrooms, or on changing tables. At no time will diapers be changed on a floor, chair or couch, or in common areas of the house. Soiled diapers must be taken outside **immediately.** Remember to wash your hands after diapering and toileting. Hand sanitizers are not to be used in place of hand washing after diapering and toileting. Disinfecting spray must be used to wipe down plastic pads after every use.
* Baby gates may be use only with team approval.

#### Nutrition

* Refusing to provide snacks or meals to children for misbehavior is not allowed.
* It is important for babies to bond with their mother and feeding time is an important time for mother-infant bonding.
* Bottle propping is not allowed.
* For health reasons, children will not be allowed to drink pop or tea or flavored water.
* Cereal will not be fed in bottles.

#### Parenting and Care of Children

The mission of the Child Development program of PMC is to provide support, education and resources to you while providing the best learning environment for their children. Project Mother & Child program uses trauma informed practices for child(ren) and mothers such as building strong healthy, safe relationships, expressing feelings appropriately and safely, including parents and children.

In keeping with St. Monica’s goal of focusing on strengths instead of deficits, our child development program uses Nurturing Parent and Circle of Security curriculum. This approach provides resources, supports and coping strategies that allow mothers to parent effectively, even under stress. This is particularly important for mothers who, as children, experienced abusive parenting.

It is our goal that you learn to parent in ways that help your children understand boundaries and limits. In addition, we want all children to develop their social and emotional skills. There are a number of policies on parenting and care of children. Some of them are included in this handbook and some are stand-alone documents. Please read each one carefully and completely so you know how to respond to your child’s behaviors.

#### Expectations of Mothers

You will be learning new ways to parent while in the program. You will take classes, attend groups and be supported as you interact with your child. It is your responsibility to use the parenting techniques presented to you. They are developmentally appropriate for the ages and stages of your child(ren). This may include Mommy & Me meetings with the Child Care Assistant and Child-Parent Psychotherapy (CPP).

#### Supervision

* Children need to be supervised at **all times**; this means they are in the same room with their mother or caregiver and in eyesight of the mother or caregiver.
* School-age children may be allowed out of mom’s sight with permission (to run to the bathroom or bedroom) but may not be left unattended.
* Other privileges for school-age children may be allowed with permission.

#### Toys and Equipment

* PMC provides some toys, books and equipment for children to play with. We ask that you and your children treat these items with respect and consideration.
* Children's items in common areas are considered communal and to be shared by all house residents.
* If your child doesn’t want to share his/her toys, leave them in his/her room.

Toys that are mouthed by infants should be sanitized weekly. This can be done by washing toys in the dishwasher or by soaking clean items for 10 seconds in a sanitizing solution.

#### Family Time

Family Activities play an important role in the program. The goal is to allow you an opportunity to learn to play with your children, plan healthy and fun activities, and share the activities with other moms.

* You are required to attend and be actively involved in the activity unless you have presented a request to miss that is approved by your counselor.
* All moms/children participate together.
* Family Activities are posted on the bulletin board and need to be planned one week in advance.
* If you need help with your family activity, please ask your peers or staff.
* If for any reason you will not be able to lead your family activity you must find a peer to lead it for you.

#### Peer Child Care and Passes for Children

We encourage you to use other mothers in the community to assist you with childcare and you to assist other mothers with theirs. Do not ask the staff to watch your children.

* When leaving the house on pass please complete and sign a Peer Childcare form and turn it in to staff.
* You can watch other children for no longer than four hours and can watch a total of 4 children (including your own). Please remember, you are responsible for setting healthy boundaries.
* You are in no way obligated to watch other people’s children and are encouraged to keep your focus on your child(ren).
* If children will be missing activities or you want them to spend the night away from the residence, you are to complete a Pass Request form.

#### Important Safety Information for Infant Sleep:

* Lay infants on their back to sleep in a safety approved crib. A written note from physician is required for alternate sleeping situations.
* Children cannot sleep in a crib or playpen that contains materials such as sheepskins, pillows, fluffy blankets, bumper pads, stuffed animals or toys.
* Check infants for overheating during naps, as being too warm can contribute to Sudden Infant Death Syndrome.
* Cribs and playpens shall contain a tight-fitting mattress, sheets or blankets will be tucked tightly under the mattress and shall be kept away from the child’s mouth and nose
* If child falls asleep in a swing, bouncy seat, car seat, etc. remove the child to allow for easy breathing.
* Infants are NOT allowed to sleep in your bed with you.

### PHASES AND DEFINITIONS

There are specific phases to move through during your stay at Project Mother and Child. Each has clear expectations and guidelines. Moving from Orientation Phase to Transition is the goal; however, how you get there will depend on you and the work you are willing to put into your treatment and recovery. Any phase may be extended or adjusted if you have not completed the requirements or if you are exhibiting behaviors that demonstrate a lack of commitment to the program, i.e., inability to meet program expectations, being late to groups or classes, inappropriate behavior with staff/clients, negative attitude or lack of trustworthy behaviors.

When you are ready to apply for the next phase, it is advised that you gather feedback from your peers about your attitude, completion of assignments, chores, and specific expectations of that phase. This will help you decide whether you are ready to advance or not. Transitioning from one phase to another starts with you completing a Phase Advancement Application Form and presenting it to peers in group therapy. If you are denied phase advancement, you may reapply at a later date by submitting a new application.

#### Phase Adjustments

If you are not meeting the requirements of a phase, you may be moved to a phase more suitable for you at that time. Examples of behaviors that may cause a phase adjustment include: lack of participation or appropriateness of participation in groups or classes, inability to fulfill program expectations, disrespectful treatment of staff or clients, not completing requirements of the program such as chores, room cleanliness, assignments, not implementing appropriate parenting strategies or other behaviors that require a teaching, coaching, self focus, or reassessment of needs. If your phase is adjusted, you may be on the adjusted phase at least 30 days. You must re- apply to advance to higher phase again at a later date.

Phase privileges at a glance:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Phase** | **Without****Pass Request** | **Weekend****Hours** | **Curfew Times** | **Other****privileges** | **Step(s)** |
| **Orientation Phase** | None | None | No passes | None | To be identifiedwith counselor |
| **Phase 1** | 1 hour per day | Up to 4 hours per week | Sun-Thurs 9:00p Fri-Sat 9:30p | Discusswith counselor | To be identified with counselor |
| **Phase 2** | 1.5 hours per day | Up to 6 hoursper week if approved | Sun-Thurs 9:00p Fri-Sat 10:00p | Discusswith counselor | To be identified with counselor |
| **Transition** | 2 hours per day | Up to 8 hours per week ifapproved | Sun-Thurs 9:30p Fri-Sun 11:00p | Discuss withcounselor | To be identified with counselor |

#### Privileges to be considered as Treatment Plan Goals:

* Cars are allowed only with counselor permission and will be considered a treatment plan goal.
* Clients may go to GED
* School and/or work will be allowed with your counselor permission and will be considered a treatment plan goal.

#### Orientation Phase (1- 2 Weeks)

During orientation, you may not leave the house without a peer or staff unless you have received approval from your counselor. Activities that are generally approved include going to admin. or attending other staff transported meetings.

1. Present your belongings to staff to be inspected upon entering the program.

1. Complete program intake packet and get settled into the house before attending groups (within 24 hours of admission).
2. Read and sign off on the St. Monica’s Child Guidance Handbook (within 1 week of admission).
3. Schedule session with Family Support Manager and complete parenting plan.
4. Sign a financial contract and apply for Title XX authorization for child care if needed.
5. Pass orientation quiz.
6. Participate in Family Activities unless excused by your counselor.
7. Have potential visitors call Counselor for approval.
8. Meet with Residential Manager/Case Manager to apply for food stamps and/or housing.
9. Become acquainted with counselor, other staff and peers.
10. Go with a staff member or approved peer to ride the bus.
11. Advise your counselor, Residential Manager/Case Manager of any fines or warrants.
12. Participate in development of Individual Treatment Plan.

#### Phase 1

This is a time to get acquainted and comfortable with the house. Many clients also get reacquainted with their children during this time. This phase allows time to become familiar with the rules and procedures of the program. You may apply for Phase 2 after 2 months. If you are denied Phase 2, you may re-apply at a later date by submitting a new Phase Advancement Application.

Expectations:

* + Attend all groups, classes, and activities on time.
	+ Complete assignments and paperwork and get to know your counselor, other staff members, and families in the house.
	+ Follow through with identified goals on Individual Treatment Plan and Parenting Plan.
	+ Attend all individual parenting sessions.
	+ Attend all individual therapy sessions.
	+ You may be assessed for medication needs and may meet with the Psychiatrist, however, it is strongly recommended that you find your own outside provider.
	+ Attend a minimum of three AA or NA support-group meetings a week.
	+ Obtain an AA or NA sponsor and maintain your relationship and work the steps.
	+ Participate in Family Activity unless excused by your counselor.
	+ Work on obtaining employment, volunteer activities, or continuing your education.
	+ Complete and discover your Gallup Strengths.
	+ Be given a cook day and be expected to do chores daily, maintain bedroom and complete deep clean as instructed.
	+ Will not give out the residence phone number or address until friends, family members or other identified supports are approved by your Counselor.
	+ Interact with your children. For example: when your child is in the same room, you will not being sitting on the couch. You will be playing with your children.
	+ Working knowledge and appropriate follow through of the program rules, schedules, procedures, chores, and parenting.
	+ Have 3 levels of accountability: To: yourself, your peers, and the staff.
	+ Focus on you and how you are going to change your life.
	+ There will be no triangulation. If a staff or client hears you doing this, you will be given a “24”, meaning you have 24 hours to talk to this person about the issue.
	+ Be responsible for knowing when medication has ran out and reordering and informing staff when meds are available.
	+ Follow-up on housing application
	+ Follow sick day protocol

Privileges:

* + You can take a medicab for medical appointments and bus for other appointments.
	+ You will be allowed to leave the house with permission 1 hour/day. All time out of the house, passes, visits, or permission to miss mandatory activities must be requested and approved through the completion of the weekly passes.
	+ You may be allowed to have a 4 hour weekend pass with permission from your counselor.
	+ You may begin GED classes on this phase with permission and after completing application.
	+ You may begin employment on this phase with permission and after completing application.

#### Phase 2

You will be maintaining your honesty, responsibility and accountability to yourself, your peers, and staff in this Phase. This phase may be extended if you have not met the expectations below.

Expectations:

* + Maintain and provide appropriate follow through of the program rules, procedures, chores, and parenting.
	+ Maintain all expectations of Phase 1
	+ Demonstrate expected behaviors and financial responsibility.
	+ Treat yourself and others respectfully.
	+ Manage your addiction and any mental health issues, address triggers, adopt coping skills, utilize medication management.
	+ Confront any negative behaviors in the house and not triangulate or engage in unhealthy behaviors.
	+ Take on a leadership role by giving feedback to clients.
	+ Be a Big Sister to new clients on Orientation Phase.
	+ Maintain employment, education, or volunteer position.
	+ Attend and be on time to all groups, classes, activities, and individual sessions including Family Time and meals and let the group leaders or staff know ahead of time of your absence.
	+ Come prepared with your treatment plans, current assignments, and a writing utensil and actively participate in group and individual sessions.
	+ Attend a minimum of three AA or NA support group meetings a week.
	+ Have 3 or more weekly contacts with your sponsor (2 on the phone and 1 in person) and actively work the steps.
	+ Follow through on goals of treatment and parenting plans.
	+ Maintain current childcare authorization.
	+ Continue to develop discharge plans with your primary counselor.
	+ Identifying resources with the Program Coordinator/Case Manager.
	+ Complete transition activities such as finding quality childcare, housing, transportation and setting up an aftercare plan.

Privileges

* + You may take a cab for medical appointments and take a bus for other appointments. You will be allowed to leave the house alone with permission for 1.5 hours/day. All passes time out of the house, visits or permission to miss mandatory activities must be requested and approved through the completion of the weekly passes with permission from your counselor.
	+ You will be allowed to have a 9-hour weekend pass.

#### Phase 3/Transition Phase:

You will be working on the transition from PMC to independent living in this phase. Graduation may be delayed if the expectations below have not been met. If you are denied a graduation date, you may re apply at a later date by submitting a new Phase Advancement Application.

Expectations:

Expectations:

* Maintain expectations of Phase 1 and II.
* Internalize what you have learned and “walk the walk” of a women in recovery.
* Intervene when you see unhealthy behavior in the residence.
* Be an active leader of groups and classes and give feedback to clients on lower phases.
* Come prepared with your current assignments, and a writing utensil and actively participate in group and individual sessions.
* Maintain a minimum of three AA or Na support group meetings a week.
* Have 3 or more weekly contacts with your sponsor (2 on the phone and 1 in person) and actively work the steps.
* Follow through on goals on treatment and parenting plans.
* Maintain current child care authorization.

Privileges:

* You make take a cab for medical appointments and take a bus for other appointments.
* You will be allowed to leave the house, with permission, for 2 hours/day.
* You have earned an 8 hour weekend pass.

#### Reflection Phase

The Reflection Phase is an opportunity to put aside all outside distractions and focus on you, your treatment and recovery. This phase is for those who may have relapsed, have consistently not followed-through on program expectations or who are in danger of being discharged from the program. This phase is not a punishment.

In this phase, you may have a behavioral contract to follow or special assignments to complete. You may be required to discuss these in groups as well as the behaviors that lead to this phase. You will obtain feedback from other clients and staff and will be working toward reestablishing trust.

You must complete an application form to move out of the Refection Phase. A reduction in a phase may be a logical consequence of your actions.

#### Consequences

* You will not be permitted to leave the residence except for approved obligations and programming.
* You will be expected to remain with staff as much as possible. (The team will determine when and where this will be.)
* You may not have visits, other than with your children.
* You will not be granted any passes during this time.
* Issues related to transportation will be resolved individually.
* You will not be allowed to use your cell phone and will be required to turn it in to staff during this phase.

#### Graduation

Ideally most clients will graduate from PMC after completing all of the phases. However, there may be times when clinical staff feels that a client has fulfilled their program expectations before the transition phase. For your graduation, you will need to make a list of people who you would like to attend, and get them approved by your counselor.

Upon successful completion of your program, you will participate in a graduation ceremony to receive your certificate of completion. Family and friends are invited and encouraged to attend. Graduation applications must be submitted no less than one week prior to your graduation date.

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**St. Monica’s Therapeutic Community (TC)**

**INTRODUCTION**

Therapeutic Community (TC) services include substance abuse and mental health treatment. It is considered secondary, long-term treatment for women who want to continue to address the issues that led them to substances and kept them using. Your treatment plan will address ALL areas of your life. The length of stay for this residential treatment program is on average, 6 months. It provides 30+ hours of therapeutic programming per week that may include but is not limited to types of services indicated in the General Section (see pages 8-11 for a complete listing).

**Staff Coverage / Emergency Numbers:** St. Monica’s residences provide 24-hour staff coverage 7 days per week. At times, the staff person may be busy with other duties, involved in an individual session, at a meeting, or otherwise unavailable for general purposes. A posted schedule of staff coverage will be available. If there is an emergency and the staff person is unavailable, there are emergency numbers posted at the residential phone(s). These numbers include local emergency numbers (911) and the TC cell phone to reach a mentor staff.

You have access 24 hours a day to a clinical staff person through clinical on-call after hours via mentor or other staff person on duty.

#### TC Staff phone numbers

TC Counselor (402) 413-0327 X 506

TC Program Coordinator (402) 413-0327 X 225

Clinical Director (402) 413-0327 X 210

TC Cell Phone (402) 310-4348

(See TC Quick Guidelines for specific listing of primary program staff)

### ORIENTATION (1-2 WEEKS)

Orientation week is designed to help you learn more about the residence and the program and is a settling in period of time where you will have more structure than later in your treatment process. It gives the staff an opportunity to get to know you and learn how we can best meet your needs as a client in our program. The staff will be gathering information regarding your substance use, your medical history, your social and family history, and any other information that will help us to provide the most comprehensive treatment care for you. Information gathered during this phase is used, with your input, to create your Individualized Treatment Plan designed to meet your individual needs. This will serve as an agreement between you and your counselor and will include problems, goals, objectives, (your responsibilities and expectations) as well as interventions developed to meet your specific needs and preferences.

Since you have completed primary treatment recently, the Therapeutic Community portion of your treatment is a new level of care with much more freedom. We ask for you to take this Orientation week to settle in to your new home, get to know your peers, and begin to explore options for your 20 hours of volunteer, job time commitment, or school. During this week you may leave the residence *only* with counselor permission.

### PROGRAM INFORMATION AND EXPECTATIONS

To make a consistent, supportive, and empowering environment, there are certain guidelines and policies of the residences that you are asked to follow. Everyone is expected to follow these guidelines, unless they have been exempt by the clinical staff for some reason. Please read the following carefully so you can familiarize yourself with these policies and guidelines.

**Participation:** All residents are expected to take an active role in the programs. A schedule of all activities will be given to you upon admission. If you do not receive a schedule, please talk with your counselor or a staff member, and they will make sure that you receive one.

Because each component of our program makes the entire experience most beneficial, *your attendance is mandatory*. Permission to miss a group is granted by the group leader and your primary counselor. (If you choose to miss a group without obtaining permission, you and your counselor will discuss the resulting potential consequences of your non-participation). It is your responsibility to complete any missed assignments before the next group.

*You are responsible for being on time to meetings, groups, and individual sessions*. We want to provide the best care possible so that you can get the most from the program, and it is very important that staff and resident time is used wisely.

**Big Sister:** As a newcomer to the residential program, you will be assigned a Big Sister. This person will be made available to you to help familiarize you with the program policies and procedures. They will assist you until you feel more comfortable with the program and residence. You are encouraged to utilize this system and ask any questions you might have as they come up. It is always best to ask if you are uncertain about anything. If your mentor is unavailable, you can ask another resident or a staff person if you have questions. At some point in your successful recovery program, you may be asked to be a Big Sister for another resident.

**Room Assignments:** Women in the Therapeutic Community will share a room with another resident. Residents are responsible for making certain that their space is kept clean and tidy *at all times*. This includes having beds made neatly, clothes put away and/or hung up, dirty laundry kept in proper containers, dressers (the tops) neat and uncluttered and floors neat and picked up. Residents may not rearrange the furniture in the rooms unless you have received permission from a clinical staff person. The agency also asks that you not put nails in the walls without permission or deface the room in any way.

Residents are charged for any property of St. Monica’s that is taken from the premises without specific permission from your primary counselor or the director. Each person in the residential programs is granted the use of: 2 sheets, 1 pillow and pillowcase, 2 bath towels, and 2 washcloths. Each bed has a blanket and/or a comforter for resident use. Extra blankets and/or pillows are supplied if they are available.

If you are in need of personal items such as soap, shampoo, tampons or sanitary napkins, razors, toothbrush/toothpaste, lotion, or any other personal item, please ask a staff person. We try to maintain a supply of these items, and they are available for resident use if they are on hand.

**House Duties:** As part of the residential program, you will be asked to help keep the house and surrounding areas neat and clean. Individual chores are assigned for on-going cleaning needs and duty rosters are posted on a weekly basis. We also ask you to be mindful that garbage is stored properly outside.

A ***Chore Description*** handout is available at this program. These handouts contain the expectations of the agency for chores assigned and how they need to be carried out. It describes what is expected for each residence on a *daily* and *weekly* basis, so it is important that you read this thoroughly to familiarize yourself with its contents. If you are experiencing difficulty in understanding or meeting the expectations listed in the House Duty Description handout, please talk with a staff person as soon as possible. Spring and fall cleaning will be assigned twice per year. You are asked to empty all trash in your rooms on a daily basis. Kitchen and bathroom trash may need to be emptied more than once during the day.

**Laundry Facilities:** The house is equipped with a washer and a dryer for residents’ laundry needs. St. Monica’s provides general laundering supplies (laundry soap, washer and dryer). However, any special detergent, fabric softener, stain remover, etc. must be purchased by the resident needing or wanting them. *You are asked to be considerate of others when doing laundry and remember that there are many people using the machines. Never leave your laundry unattended or left lying around the laundry area.*

**Morning Wake-up:** Residents are asked to be out of bed, dressed with shoes, have their beds properly made, rooms neat and tidy, and clothes picked up and put away at Therapeutic Community by times indicated on TC Quick Guidelines. (This *may* be extended on weekends. Please avoid wearing nightclothes in the common areas of the house. If you are sick you must contact the medical staff. You may not go to outside meetings for the day/evening, unless you have received permission from a clinical staff person. Residents (including children) may not be barefoot due to Health Department regulations.

#### Smoking

St. Monica’s is tobacco free at all facilities – all tobacco products are prohibited by clients, staff and visitors. See page 21 for additional information.

#### Telephone Usage:

In order to be fair to all residents, **personal phone calls** are limited. Please be considerate of your peers also needing to use the phone. No collect calls are to be accepted by any resident. As part of confidentiality do not answer the phone until you have heard who is calling.

Please use common phone courtesy when using the residential phone. Refrain from yelling, using swear words and slamming the phone down. (The phones are agency property and should be treated with respect.) Messages retrieved from the answering machines that are not your messages need to be written down for the person the message is intended. As part of maintaining a therapeutic structure, please see Quick Guidelines for times of phone usage.

**Personal Vehicles:** You are permitted to have your own vehicle with you at the residences providing you can prove you possess a valid driver’s license, proof of insurance and proper car license and registration. There are designated parking areas for client vehicles. Driving your personal vehicle is a privilege you will need to earn, and staff can revoke this privilege if they deem that your behavior is not responsible.

**Testing:** St. Monica’s requires random UA’s at various times.

**Television**: See Quick Guidelines for TV viewing days/times. *There will be no viewing of movies or TV programs that contain violence, drug use, exploitation of women in any way, or any movies that are offensive to anybody in the house for any reason*. You may be asked by the staff on duty to remove any movie that

contains material of the above nature. You are permitted to watch therapeutic videos during the daytime hours if they are part of your treatment plan.

### PASSES AND VISITS

**Weekly Staffing:** St. Monica’s clinical staff (counselors, Clinical Director, and other staff) meet weekly to review client progress, new problems or issues, and various other areas related to client care. This is called “Staffing”. Program Coordinators and counselor will also meet weekly to review requests of the residents for permission to go places or do things that are considered out of the scope of daily activities at the residences. Staffing requests/Self Evaluation form needs to be submitted to staff in order to be considered for an outing.

You should make sure to plan ahead of time to get your requests reviewed and discussed with your counselor. Counselor or staff will normally *not* grant permission for things that “just come up” which is why you need to plan ahead. If you are unclear about what to request, ask a staff person. It is better to be safe than sorry in these cases.

**Visitors and Guests:** Upon your arrival, you may write down the names of those persons you expect will be visiting you during your stay at St. Monica’s. These people may include family, friends, clergy, or anyone else you may want to visit you; however, you must discuss with staff and obtain approval before people can visit. Any visitors will need to be approved by calling your Program Coordinator first. If someone comes to visit and their name is not on your approved visitor’s list, they may be asked to leave. You may add names or remove them from your list at any time.

*Visitors are asked to follow the same rules and expectations of the program as you do. The staff reserves the right to ask any visitor to leave if she/he appears to be under the influence of any drug or alcohol. If any guest becomes belligerent or poses any kind of threat to either you or anyone else, they will be asked to leave immediately. At the Therapeutic Community, women who have their children visiting may have them in the common area only and they must* always *be under your direct supervision. You are also responsible for making sure that the house is cleaned and picked up after each visit. If you wish to have a guest(s) for dinner, staff must approve it before hand and you must get the permission of the person cooking for that day.*

**Visiting Hours:** At the Therapeutic Community, visiting hours are flexible. During the day most women are looking for work, or working, or going to school.

**Curfew:** At the Therapeutic Community, curfew is based on your phase. See the Therapeutic Community phase outline. ***If you are late you may be subject to a UA and/or breathalyzer test and possible 24-hour restriction, and clinical staff will be notified***. You will be considered **late for curfew** if you are five or more minutes late getting back to the house. If you know that you are going to be late, you are asked to call the staff person on duty and inform them of the situation. However, making this call does not protect you from any actual consequences that might occur when discussing with staff. If you are 30 minutes or more late for curfew and have not called the staff person on duty, it will be assumed that you are not planning to return (unless staff has been notified of an emergency that has prevented your return).

**Time Away From the House:** Each residence maintains a sign-in/sign-out book. This is to inform staff of your whereabouts at all times. Y*ou are expected to use this system every time you leave the residence for any reason*. When leaving for time away, you must log what time you leave, where you are going, a phone number of where you can be reached, and what time you will be home. Staff also uses the sign-in/sign-out

book in case of an emergency when residents need to be evacuated from the residence. It is designed to provide an accurate account of who is in the residence and who is not at any given time.

If it appears that you will not make it back to the house by the time you expected or your plans change while you are out, **you are expected to call and personally inform the staff person on duty as soon as possible**. However, calling the staff on duty does not necessarily exempt you from natural logical consequences related to being late for dinner, curfew, or a scheduled group or individual session.

### MEAL PROCEDURES

Every person in St. Monica’s residential programs is expected to eat balanced, nutritional meals, which include breakfast. Proper nutrition is important to your recovery. Breakfast and dinner cooking is rotated between clients. All residents are expected to attend breakfast and dinner. Lunch is on your own. *Residents who use the kitchen facilities during the daytime hours are responsible for keeping it clean during those hours.* After the evening meal, it becomes the responsibility of the cook for the day to keep the kitchen area clean until bedtime; however, all residents are expected to help with this and clean up after snacking in the evenings. You may use the kitchen facilities at any time, but remember you are asked to clean up after yourself!

The evening meal is prepared by the person assigned to cook for that day. See TC Quick Guidelines for specific mealtimes. Everyone is required to be on time for the meal. Meals will begin with the cook leading a blessing, and appropriate mealtime behaviors are expected. Your primary counselor or another clinical staff person must approve any absences. During breakfast a goal for the day is said and during dinner a positive for the day is shared.

### PHASES AND DEFINITIONS

There are specific phases to move through during your stay at the Therapeutic Community. Each has clear expectations and guidelines. Moving from Orientation Phase to Phase 3 is the goal; however, how you get there will depend on you and the work you are willing to put into your treatment and recovery. Any phase may be extended or adjusted if you have not completed the requirements or if you are exhibiting behaviors that demonstrate a lack of commitment to the program, i.e., inability to meet program expectations, being late to groups or classes, inappropriate behavior with staff/clients, negative attitude or lack of trustworthy behaviors.

When you are ready to apply for the next phase, it is advised that you gather feedback from your peers about your attitude, completion of assignments, chores, and specific expectations of that phase. This will help you decide whether you are ready to advance or not. Transitioning from one phase to another starts with you completing a Phase Advancement Application Form and presenting it to peers in group therapy. If you are denied phase advancement, you may reapply at a later date by submitting a new application.

#### Phase Adjustments

If you are not meeting the requirements of a phase, you may be moved to a phase more suitable for you at that time. Examples of behaviors that may cause a phase adjustment include: lack of participation or appropriateness of participation in groups or classes, inability to fulfill program expectations, disrespectful treatment of staff or clients, not completing requirements of the program such as chores, room cleanliness, assignments, or other behaviors that require a teaching, coaching, self focus, or reassessment of needs. If your phase is adjusted, you may be on the adjusted phase at least 30 days. You must re apply to advance to higher phase again at a later date.

Phase privileges at a glance:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Phase** | **Without Pass****Request** | **Weekend Hours** | **Curfew Times** | **Other****privileges** | **Step(s)** |
| **Orientation Phase** | None | None | No passes | None | To be identifiedwith counselor |
| **Phase 1** | 1 hour per day | Up to 4 hours perweek | 10p weekdays10:30p weekends | Discuss withcounselor | To be identifiedwith counselor |
| **Phase 2** | 1.5 hours per day | Up to 6 hours per week if approved | 10:30p weekdays 11:00p weekends | Discuss with counselor | To be identified with counselor |
| **Transition** | 2 hours per day | Up to 8 hours perweek if approved | 11:00p weekdays11:30p weekends | Discuss withcounselor | To be identifiedwith counselor |

#### Privileges to be considered as Treatment Plan Goals:

* Cars are allowed only with counselor permission and will be considered a treatment plan goal.
* Clients may go to GED
* School, work, and/or volunteer hours will be allowed with your counselor permission and will be considered a treatment plan goal.

#### Orientation Phase (1-2 weeks)

* + Present your belonging to staff to be inspected upon entering the program.
	+ Participate in Group Activities unless excused by your counselor.
	+ Have potential visitors call your Residential Manager for approval.
	+ Meet with Residential Manager/Case Manager to apply for food stamps and discuss meds and housing.
	+ Go with staff or approved peers to ride the bus.
	+ Advise your Residential Manager of any fines or warrants.
	+ Participate in development of Individual Treatment Plan with counselor.
	+ Read client handbook and ask questions you may have.
	+ Get to know your counselor, other staff members, and peers in the house.
	+ Pass the orientation quiz

During orientation you do not have the freedom to leave the house without a peer or staff unless you have permission from the counselor. Activities that are generally approved for orientation phase are: going up to Admin. Building to attend groups, or use the computers to apply for jobs, and riding the buses to learn routes with peers or staff, riding the bus down to Workforce to register and look for work with peers.

#### Phase 1

This is a time to begin working on your goals to get a job or go back to school. You may apply for Phase 2 after 30 days (minimum) of being on phase 1.

Expectations:

* + Attend all groups, classes, and activities. Be on time and if you will be absent please notify staff ahead of time.
	+ Complete assignments and paperwork and follow through with identified goals on Individual Treatment Plan.
	+ Attend all individual therapy sessions.
	+ Be assessed for medication needs and may meet with the Psychiatrist.
	+ Attend a minimum of three AA or NA support-group meetings a week.
	+ Obtain an AA or NA sponsor and maintain your relationship and work the steps.
	+ Complete and discover your Gallup Strengths.
	+ Be given a cook day and be expected to do chores, daily bedroom maintenance and deep clean.
	+ Will not give out the residence phone number or address until friends, family members and other supports are approved by your Counselor.
	+ Working knowledge and appropriate follow through of the program rules, schedules, procedures, and chores.
	+ Have 3 levels of accountability: To: yourself, your peers, and the staff.
	+ Focus on you and how you are going to change your life.
	+ There will be no triangulation. If a staff or client hears you doing this, you will be given a “24”, meaning you have 24 hours to talk to this person about the issue.
	+ Be responsible for knowing when medication has run out and reordering and informing staff when meds are available.
	+ Follow-up on housing application
	+ Follow sick day protocol

Privileges:

* + You can take a public transportation for medical appointments and bus for other appointments.
	+ You will be allowed to leave the house with permission 1 hour/day. All time out of the house, passes, visits, or permission to miss mandatory activities must be requested and approved through the completion of the weekly pass.
	+ You may be allowed to have a 4 hour weekend pass with permission from your counselor.
	+ You may begin GED classes on this phase with permission and completion of application
	+ You may begin employment on this phase with permission and completion of application
	+ You may have your cell phone.

#### Phase 2

You will be maintaining your honesty, responsibility and accountability to yourself, your peers, and staff in this Phase. This phase may be extended if you have not met the expectations below.

Expectations:

* + Maintain and provide appropriate follow through of the program rules, procedures, chores.
	+ Maintain all expectations of Phase 1
	+ Demonstrate expected behaviors and financial responsibility.
	+ Treat yourself and others respectfully.
	+ Manage your addiction and mental health issues, address triggers, adopt coping skills and utilize medication management.
	+ Confront any negative behaviors in the house and not triangulate or engage in unhealthy behaviors.
	+ Take on a leadership role by giving feedback to clients.
	+ Be a Big Sister to new clients on Orientation Phase.
	+ Engage in employment, education, or volunteering.
	+ Attend and be on time to all groups, classes, activities, and individual sessions and meals and let the group leaders or staff know ahead of time of your absence.
	+ Come prepared with your treatment plans, current assignments, and a writing utensil and actively participate in group and individual sessions.
	+ Attend a minimum of three AA or NA support group meetings a week.
	+ Have 3 or more weekly contacts with your sponsor (in person) and actively work the steps.
	+ Follow through on goals on treatment plan.
	+ Continue to develop discharge plans with your primary counselor.
	+ Identifying resources with the Case Manager.
	+ Complete transition activities such as finding housing, transportation, and setting up a aftercare plan.

Privileges

* + You may take a cab for medical appointments and take a bus for other appointments.

You will be allowed to leave the house alone with permission for 1.5 hours/day. All passes time out of the house, visits or permission to miss mandatory activities must be requested and approved through the completion of the weekly passes.

* + You will be allowed to have an 6 hour weekend pass with permission from your counselor.

#### Phase 3:

You will be working on the transition from TC to independent living in this phase. Graduation may be delayed if the expectations below have not been met.

Expectation:

* + Maintain expectations of Phase 1 and II.
	+ Internalize what you have learned and “walk the walk” of a women in recovery.
	+ Intervene when you see unhealthy behavior in the residence.
	+ Be an active leader of groups and classes and give feedback to clients on lower phases.
	+ Come prepared with your current assignments, and a writing utensil and actively participate in group and individual sessions.
	+ Attend a minimum of three AA or NA support group meetings a week.
	+ Have 3 or more weekly contacts with your sponsor (in person) and actively work the steps.
	+ Meet goals on treatment plans.

Privileges:

* You may take a public transportation for medical appointments and take a bus for other appointments.
* You will be allowed to leave the house, with permission, for 2 hours/day.
* You have earned an 8 hour weekend pass with permission from your counselor.

#### Reflection Phase

The Reflection Phase is an opportunity to put aside all outside distractions and focus on you, your treatment and recovery. This phase is for those who may have relapsed, have consistently not followed-through on program expectations or who are in danger of being discharged from the program, it is not a punishment.

In this phase, you may have a behavioral contract to follow or special assignments to complete. You may be required to discuss these in groups as well as the behaviors that lead to this phase. You will obtain feedback from other clients and staff and will be working toward reestablishing trust.

#### Consequences

* + You will not be permitted to leave the residence except for approved obligations and programming.
	+ You may not have visits, except with children.
	+ You will not be granted any passes during this time.
	+ Issues related to transportation will be resolved individually.
	+ You will not be allowed to use your cell phone and will be required to turn it in during this time.

#### Graduation

Ideally most clients will graduate from TC after completing all of the phases. However, there may be times when clinical staff feels that a client has fulfilled their program expectations before the transition phase. For your graduation, you will need to make a list of people who you would like to attend, and get them approved by your counselor.

Upon successful completion of your program, you will participate in a graduation ceremony to receive your certificate of completion. Family and friends are invited and encouraged to attend.

Graduation applications must be submitted no less than one week prior to your graduation date.

# St. Monica’s Outpatient Services:

## Outpatient Substance Abuse – OPSA

**Outpatient Mental Health Services – OPMH Community Support – CS**

In addition to residential treatment programs, St. Monica’s provides many services on an outpatient basis.

**Outpatient Substance Abuse (OPSA) -** This service provides individual counseling for women with substance abuse as a continuation of care/support after completion of a higher level of care or clients needing less intensive treatment. Individualized Treatment Plans are developed for this level of care to assist clients in identifying and managing progressive warning signs of possible relapse, and to develop and support clients in their plan for recovery and are updated regularly. This program is individualized, offering group and individual counseling sessions, as needed each week. Additionally, family therapy, couple’s therapy and parent-child therapy is available as needed.

**Outpatient Mental Health (OPMH) –** This service provides individual counseling for women with a mental health diagnosis. Counseling will assist with education pertaining to personal mental health issues. Individualized Treatment Plans are developed and updated regularly. This program will also help you to develop appropriate problem solving skills and to maintain self-sufficiency while continuing to live in the community. Counseling is offered by scheduled appointment.

**Community Support (CS) –** This program provides rehabilitative case management services for outpatient clients who are waiting for treatment or inpatient services as well as clients that have completed treatment services and have/are integrating back into the community. This program is designed to provide contact and support for maintenance, sobriety, and self-sufficiency in community living situations. The Community Support case manager works along with your counselor, CPS, probation officer, DHHS, and other workers. Community Support offers ongoing assistance with life skills, basic needs such as assisting with grocery shopping, meal planning, budgeting, organizing bills, and resources in the community, and referrals. Community Support can also help you apply for financial aid, schooling, GED preparation, job seeking, completing job applications, making a resume, looking for housing, parenting, medication assistance, DHHS services including food stamps and Medicaid, SSDI and SSI cases, General Assistance and other needs. You and your Community Support worker will meet on a regular basis based on your individual needs.

#### Outpatient Services Staff phone numbers

OPSA/OPMH Counselor (402) 413-0327 X 302

Community Support (402) 413-0327 X 221

**Child and Family Therapy –** We offer child/parent psychotherapy, trauma focused cognitive behavior therapy, family and couples therapy.

Clinical Director (402) 413-0327 X 207

#### Expectations regarding client fees for Outpatient Substance Abuse (OPSA, Outpatient Mental Health (OPMH) are as follows:

Expectation: Clients will pay their fees daily to front desk personnel when you come in for services. Consequence: If you become more than one week behind on your payment or if no payment has been made in a month, your counselor will be notified and will discuss with you during your session.

#### Expectations regarding client fees for Community Support (CS):

Expectation: You will be expected to pay your fees monthly to your Community Support Worker. Consequence: If payment is not made each month, your Community Support Worker will work with you to determine consequence and payment plan.

Additional program information for all of these services will be provided to you upon admission or upon request.

**Client Signature Page**

\*\*This page must be completed and signed within 7 days of receipt\*\*

#### From page 12: Contact Information -

In the event we need to contact you for program evaluation or in the event of injury we ask that you provide a phone number to reach you.

#### Phone Number:

**CLIENT AGREEMENT FORM -**

I acknowledge that I have received a copy of the client manual. I have been given an opportunity to discuss the contents of this manual and have had any questions answered by a staff person during my orientation.

I agree to follow all the rules and policies of the program as written. I further acknowledge that this manual cannot contain every rule and procedure of the program and it is MY responsibility to ask a staff member if I am in doubt about any procedures, guidelines, rules, etc.

Client Signature: Date:

Staff Signature: Date:

Signature Page