# RESIDENT MANUAL & RESOURCE GUIDE

11<sup>th</sup> Ed. 1/12/2019



A Social Model Recovery Program

1059 Main Street - Worcester, MA 01603 - (508) 755-6403 www.jeremiahsinn.org.

Updated 9/15/2020



# ... I know the plans I have for you, says the Lord, plans for your welfare and not for harm, to give you a future with hope.

- Jeremiah 29:11

We reserve the right to update and/or modify this material upon our discretion and/or as needed.

~ Management Staff December 2016

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Updated 9/15/2020

# SOCIAL MODEL

#### Transitional Program

#### **Lifestyle Changes**

Jeremiah's Inn, a social model program, is a Residential Rehabilitation Services (RRS) residence for adult men 18 years of age and older in recovery from addiction to drugs and/or alcohol.

The program design is based on providing residential rehabilitation services in a peer supported environment that encourages lifestyle changes through experiential learning and modeling. This supportive environment is maintained through 24-hour staffing and case management services.

#### **Focus on Individual Growth**

Jeremiah's provides programming in a semi-structured, drug free environment where mutual respect is fostered. Our focus is on individual growth, development of responsibility, self-management and promoting a drug-free lifestyle. Residents participate as active co-planners in their programs.

The emphasis is placed on assisting residents to provide one another with a culture of recovery, support, sharing and positive peer role modeling. Opportunities for community interaction and service are prevalent.

#### **Service Elements**

Primary service elements include: case management; individual recovery service plans; daily programming that includes individual and group services such as: relapse and overdose prevention, individual and group counseling, a holistic approach to health and wellness education (ie. nutrition, stress-reduction, meditation, mindfulness, yoga, HIV/AIDS — Hepatitis and other communicable disease awareness & testing, etc.); development of life skills (ie. anger management, conflict resolution, recreation activities, financial planning, etc.); referrals to medical, dental, psychological and psychiatric services; self-help; legal assistance; support and referrals for for employment/vocation, education and housing; cooperation with criminal justice system; outreach/engagement with family members and referrals for parenting and other family supports; aftercare planning which identify linkage and supports to assist in maintaining a healthy, drug-free lifestyle.

#### **Commitments**

We share the Mass. Dept. of Public Health - Bureau of Substance Abuse Treatment (DPH-BSAS) commitments to treatment, as outlined in the Standards of Care, and work towards integrating and providing these elements in our program to the best of our ability and as the needs of our community and population dictate.

Jeremiah's Inn is committed to person-centered recovery oriented care, evidenced-based practices, continual improvement, collaboration and integrated care, engaging and supporting families and serving those who use opioids, are in involved in the criminal justice system, have co-occurring disorders, are homeless, served in the military and/or identify as gay, bi-sexual, transgender, queer or questioning. We are committed to providing trauma-informed care, preventing and reducing harm caused by transmittable diseases, addressing tobacco and nicotine addiction and problem gambling. We are committed to cultural competence, reducing disparities and providing access to those with disabilities.

# **STAFF**

# Staff of Jeremiah's Inn

#### Administration

Executive Director – Janelle Wilson

Operations Director – Dick Quinlan

Assistant to Director/Bookkeeper – Lori Joler

Communications Coordinator – Alyssa Dancause

# **Social Model Recovery Program**

Director of Clinical Services – Jeffrey Busby

Lead Substance Abuse Counselor and Case Manager – Jason Lavallee

Case Managers -

Carlos Ojeda Kashawn Hampton Terry Hughes Jayson (Jay) Daughtry

Lead Direct Care- Serina Connor/Intake Coordinator Direct Care Staff- Jim Cicio Charles Lewis

Overnight Awake Staff – Dan Hill

House Manager – Doug Robbins

# **Nutrition Center / Emergency Food**

Nutrition Center Coordinator – Mary Tamblin

# **Resident's Rights**

#### Residents at Jeremiah's Inn have the right to:

- Considerate Care that respects the individual's personal belief and value systems and life circumstances; respect for the person as an individual with personal value and belief systems. Policies and procedures allow the resident to express spiritual beliefs and cultural practices that do not harm others or interfere with the planned course of treatment for the resident.
- **Competent Care** at all times with the program providing a sufficient number of trained, experienced, and competent personnel, providing appropriate care and supervision for all residents to ensure that their personal needs are met.
- Adequate and Comfortable living space with sufficient lighting, ventilation, heating, unexposed electrical outlets, comfortable household mattresses and bed-fixtures (including box springs and frames) that conform to all DPH regulations governing resident's living space.
- **Nutritional Meals** where the program provides at least one (1) nutritionally well-balanced hot meal daily, and supplies food and material for other meals and snacks.
- **Privacy** to be interviewed and treated in surroundings designed to give reasonable visual and auditory privacy.
- **Knowledge** of all rules and policies with which the resident must comply and which govern the resident's conduct while at Jeremiah's Inn; being informed in advance and in writing of any fees for service which he must pay after the first thirty (30) days.
- **Confidentiality** of all personal information that is part of his record and residency at Jeremiah's Inn.
- **Informed Consent** to any treatment; to have policies, procedures and programs explained prior to the resident's participation.
- **Actively Participate** in the development of his recovery plan and in all reviews and revisions of the recovery plan.

**Access** to information in program records relating to his care and treatment.

#### Standards of Conduct

Each resident has an obligation to observe and follow Jeremiah's policies and to maintain proper standards of conduct at all times. If an individual's behavior interferes with the orderly and efficient operation of our program, corrective measures will be taken.

Thes measures may include a verbal warning, written warning or discharge. An authorized staff member or the residents in the house will determine appropriate disciplinary action imposed. Jeremiah's does not guarantee that one form of action will necessarily precede another.

While it is impossible to attempt to set forth a complete list of intolerable offenses, below are examples that will illustrate the kind of serious misconducts for which you may be discharged immediately:

Possession and/or use of illegal drugs and/or alcohol (including marijuana) on Jeremiah's premises

- Returning to facility under the influence of illegal drugs or alcohol NOTE: All residents are expected to come forward when they suspect, or have proof that someone is using in the house. Our goal is to refer someone who has used to appropriate resources for help and keep the house safe for other residents. If you are aware of this behavior and fail to come forward, you may be subject to discharge. In the event that you have a brother under the influence and do not feel safe, please report your concern to a peer leader or staff member with no repercussions.
- Theft or dishonesty, including:

  Misappropriation of Jeremiah's or another resident's property

  Willful falsification on any reports or records
- Possession on Jeremiah's premises of firearms or weapons of any kind
- Any verbal and/or any physical assault of another person
- Smoking or use of any tobacco products in the building or in unauthorized areas
- Getting a tattoo or haircut by another resident or someone else while on the premises of Jeremiahs Inn
- Destruction of Jeremiah's or another person's property
- Any insubordination towards any staff member, including volunteer staff
- Any breach of resident confidentiality
- Any reckless or willful disregard for the safety or property of staff, residents, guests, volunteers or any other person at the facility
- Failure to abide by the terms of corrective action contracts
- Conduct at outside meetings and activities must honor the program and healthy sobriety. If you break the rules outside of the house, you are breaking the rules inside the house.
- Refusal to participate in nutritional/orientation program. Ie(volunteer)
- Racist comments

# Jeremiah's Inn Tier System

The tier system is designed to allow residents to advance through the program based on changes in thinking as evidenced by changes in behavior. Clean and Sober is not an event, it is a lifestyle that requires a significant change in thinking and behaviors.

# **Tiers 1-9**

# **TIER ONE**

• There are no priveliges in tier one Privileges

# **Expectations**

- 72 hour restriction
- No visits
- Must attend daily meetings
- Must attend all groups
- Read the Resident Handbook
- Learn and follow all program policies and rules
- Must take medications as prescribed

#### **TIER TWO**

# **Privileges**

• Weekly visits from family and friends. (CM approval)

#### **Expectations**

- Begin minimum 2 weeks house restriction (except appointments, meetings, and court)
- Follow all program rules and policies
- Attend all groups and daily meetings.
- Begin to develop social model and citizenship skills
- Develop a 90-day recovery plan what does this mean
- Complete all Clinical Director homework what CD homework
- Begin to develop a sober network.
- Attend 3 weekend meeting 1 Morning 2 Evening.
- Meet with Case Manager daily to complete orientation homework.
- 4 Hours mandatory in nutrition center (Volunteer) Daily, weekly, what
- Medication Adherence
- Begin 6 weeks of Broga & Meditation
- Complete 3 Reiki sessions

#### **TIER THREE**

#### **Privileges**

- May begin to search for full time employment, school, volunteer opportunities.
  - Job search hours from 930 am 130 pm.
- May be able to begin work at case managers discretion.
- Client may utilize a 2-hour sponsorship time off property per week (CM approved)

#### **Expectations**

- Clients should have a sponsor, Recovey Coach, or SP advisor
- Clients will be home from job search by 130 and attending 300 pm group
- Clients should be attending dinner daily
- Clients should be building a sober network
- Clients will be compliant with insurance, PCP, counseling/therapy, and psychiatry
- Maintain medication compliance.
- Attend 3 meeting during weekend 1 am 2 pm
- Complete 90-day recovery plan. What

#### TIER FOUR

#### **Privileges**

- Client may have a 4-hour leisure pass weekly. (CM Approval)
- Client may utilize a 2-hour sponsorship time off property per week (CM approved)
- Continued to search for full time employment, school, volunteer opportunities.
- Job search hours from 930 am 300 pm.
- Can begin work at case managers discretion.

#### **Expectations**

- Client may utilize a 2-hour sponsorship time off property per week (CM approved)
- Clients can work full time of 32 to 45 hours.
- Continue to stay engaged in his personal recovery and the social model.
- Provide proof of work schedule and payroll weekly.
- Maintain meeting/group attendance.
- Pay all program fees.
- Save 20 percent of income for aftercare.
- Return to program after all meeting and appointments including work using 1-hour travel time to and from.
- If still on job search attending 300 pm group.
- If working check in by 500 pm for dinner daily. Call if going to be late.
- Weekend check-ins at 130 pm
- Run at least 1 orientatin group or house group.

#### TIER FIVE

#### **Privileges**

- Clients may utilize a 24 hour pass monthly. (CM Approval)
- Client may have a 4-hour leisure pass weekly. (CM Approval)
- Client may utilize a 2-hour sponsorship time off property per week (CM approved)

#### **Expectations**

- Continue to stage engaged in his personal recovery and the social model.
- Provide proof of work schedule and payroll weekly.
- Maintain meeting/group attendance.
- Pay all program fees.
- Save 20 percent of income for aftercare.
- Return to program after all meeting and appointments including work using 1-hour travel time to and from.
- If working check in by 500 pm for dinner daily. Call if going to be late.
- Weekend check-ins at 130 pm
- Begin/maintain aftercare planning

#### **TIER SIX**

#### **Privileges**

- Clients can utilize 1 24-hour pass per month. (CM Approval)
- Clients can utilize 1 personal night per month beginning at 500 pm. (CM Approval) (No Monday, Tuesday and Thursday)
- Client may have a 4-hour leisure pass weekly. (CM Approval)
- Client may utilize a 2-hour sponsorship time off property (CM Approval)

#### **Expectations**

- Continue to stage engaged in his personal recovery and the social model.
- Provide proof of work schedule and payroll weekly.
- Maintain meeting/group attendance.
- Pay all program fees.
- Save 20 percent of income for aftercare.
- Return to program after all meeting and appointments including work using 1-hour travel time to and from.
- If working check in by 500 pm for dinner daily. Call if going to be late.
- Weekend check-ins at 130 pm
- Begin/maintain aftercare planning
- Actively search for housing assistance for aftercare.

#### TIER SEVEN

#### **Privileges**

- Clients can utilize 2 24-hour pass per month. (CM Approval)
- Clients can utilize 1 personal night per month beginning at 500 pm. (CM Approval) (No Monday, Tuesday and Thursday)
- Client may have a 4-hour leisure pass weekly. (CM Approval)
- Client may utilize a 2-hour sponsorship time off property (CM approved)

#### **Expectations**

- Continue to stage engaged in his personal recovery and the social model.
- Provide proof of work schedule and payroll weekly.
- Maintain meeting/group attendance.
- Pay all program fees.
- Save 20 percent of income for aftercare.
- Return to program after all meeting and appointments including work using 1-hour travel time to and from.
- If working check in by 500 pm for dinner daily. Call if going to be late.
- Weekend check-ins at 130 pm
- Begin/maintain aftercare planning
- Actively search for housing assistance for aftercare.
- Participate in recovery service work including group jobs and detox commitments.
- Continue to follow up with PCP, Counselor/Therapist, Psychiatrist, and Sponsor.

#### **TIER EIGHT**

#### **Privileges**

- Clients may utilize 3 24 hour pass per month.
- Clients can utilize 1 personal night per month beginning at 500 pm. (CM) Approval) (No Monday, Tuesday and Thursday)
- Client may have a 4-hour leisure pass weekly approved by CM.
- Client may utilize a 2-hour sponsorship time off property (CM approved)

#### **Expectations**

- Continue to stage engaged in his personal recovery and the social model.
- Provide proof of work schedule and payroll weekly.
- Maintain meeting/group attendance.
- Pay all program fees.
- Save 20 percent of income for aftercare.
- Return to program after all meeting and appointments including work using 1-hour travel time to and from.
- If working check in by 500 pm for dinner daily. Call if going to be late.
- Weekend check-ins at 130 pm

- Begin/maintain aftercare planning
- Actively search for housing assistance for aftercare.
- Participate in recovery service work including group jobs and detox commitments.
- Continue to follow up with PCP, Counselor/Therapist, Psychiatrist, and Sponsor.
- Begin to plan for discharge and finalize aftercare plan.
- Be a positive and contributing peer leader and senior resident. /what does this mean?

#### TIER NINE

#### **Privileges**

- Clients may utilize 4 24-hour pass per month. (CM Approval)
- Clients can utilize 1 personal night per month beginning at 500 pm. (CM Approval) (No Monday, Tuesday and Thursday)
- Client may have a 4-hour leisure pass weekly. (CM Approval)
- Client may utilize a 2-hour sponsorship time off property (CM Approval)
- One personal day from all programing. (Except for house meeting)

#### **Expectations**

- Continue to stage engaged in his personal recovery and the social model.
- Provide proof of work schedule and payroll weekly.
- Maintain meeting/group attendance.
- Pay all program fees.
- Save 20 percent of income for aftercare.
- Return to program after all meeting and appointments including work using 1-hour travel time to and from.
- If working check in by 500 pm for dinner daily. Call if going to be late.
- Weekend check-ins at 130 pm
- Begin/maintain aftercare planning
- Actively search for housing assistance for aftercare.
- Participate in recovery service work including group jobs and detox commitments.
- Continue to follow up with PCP, Counselor/Therapist, Psychiatrist, and Sponsor.
- Finalize aftercare plan.
- Be a positive and contributing peer leader and senior resident.
- Prepare for AFTERCARE stage.
- Prepare for Alumni status.

# **Expected Behaviors Through All Tiers**

- Read and follow the resident handbook.
- Follow all rules and policies.
- Participate in all required groups and meetings.
- Take suggestions.
- Develop and utilize coping skills.
- Develop and utilize relapse prevention skills.
- Take all medications as prescribed.
- Develop a sober support network.
- Learn to cope with disappointment.
- Be considerate to brothers and staff.
- Pay all program fees.
- Save 20 percent of income for aftercare.
- Be respectful to brothers and staff.
- Find and utilize a recovery coach/sponsor or other approved advisor.
- Be active in service work in a 12 step recovery group or other approved recovery clubs/groups.
- Attend all groups and meetings on time.
- Complete all required paper work such as weekly progress reports, groups summaries, CM & CD homework, recovery journal, and recovery plans.
- Comply with parole and probation conditions.
- Comply with all daily check-ins and curfews.
- Meet with case manager ar least one time per week.
- Do not deviate from program policies and programming
- Be honest, open minded, willing to change, non-judgmental, and responsible.
- Attend 3 weekend meeting 1 Morning 2 Evening
- Attending dinner daily
- Be compliant with insurance, PCP, counseling/therapy, and psychiatry
- Return to program after all meeting and appointments including work using 1-hour travel time to and from.
- Continue to stay engaged in personal recovery and the social model.
- If working check in by 500 pm for dinner daily. Call if going to be late.
- Weekend check-ins at 130 pm

# **Behaviors Considered Non-Compliant**

All residents are expected to remain accountable to themselves and their house brothers. The following are examples of deviation

- Cheating
- Stealing
- Manipulation
- Justification
- Bad attitude
- Deviation from program policies
- Not signing in and out
- Late for groups and meetings
- Behind on program fees
- Not being responsible
- Not paying probation, child support, and other bills.
- Not saving money for aftercare.
- Fighting or assaultive behavior such as physical, emotional, mental, and verbal.
- Refusal to do chores, homework, group summaries, recovery plans, and progress reports weekly reports.
- Not taking medications as prescribed.
- Skipping any medical and mental health appointments.
- Having a bad attitude
- Being a bad citizen to the house.
- Refusal to find gainful employment within a reasonable time.
- Using any form of drugs, alcohol or non-prescribed medication.
- Diverting or manipulating medication in any way.
- Signing out and going someplace different.
- Leaving the house without proper permissions from staff and house.
- Not returning to house for inhouse groups, daily dinner, and curfews.
- Not returning before daily check-ins (job search 1:30 pm & 3:00 pm, Monday –
   Friday 5:00 pm dinner check in, and Saturday-Sunday 1:30 pm).

# Jeremiah's Inn Group Rules

Jeremiah's Inn is a social model house, and a major part of being in this type of program involves calling house groups. There are several reasons that a group can be called in the house. Some of the types of groups that get called are for the following issues:

- Resident relapse
- Concern (use, behavior, negative attitude, lack of participation, etc.)
- Awareness (only for new residents normally no consequences)
- Exception/Permission (to ask for a specific privilege/request)
- Multiple Pull Ups in one week

Any resident can call a group at any time if there is a concern. To hold a formal group, the resident calling the group would need **at least half of the house** to be in attendance. All of the information about the group needs to be recorded *on the "Group Intervention/Learning Experience Form"* including the following:

- Reason group is being called
- Date and time of group
- Number of residents present at the group
- All questions, comments, and concerns discussed should be logged
- Voting results (Must be equal to number of residents in the group)

Every person must vote (no abstaining from voting)

#### **Calling A Group:**

- The resident must go to the Chair Person (CP) or a peer leader when the resident wants to call a group on himself or another resident.
- All groups run the same and are initially an awareness group until the house determines/votes that it will be progressed to a permission, concern, learning experience, consequence, or contract group.
- CP or peer leader selected to run the group is responsible to call on residents who would like to participate in the group. If the same residents are raising their hands to ask questions, make suggestions, or share comments the CP may call on other residents to engage their participation.

The following is a step by step guide to help residents become familiar with how a group is expected to run:

- 1) Group rules are read by a resident selected by CP
- 2) CP announces the following:
  - a) Who is being grouped?
  - **b)** Who is grouping the resident?
  - **c**) A detailed reason why resident is being grouped. Be specific when describing reasons.(i.e. breaking of specific rules, repeated problematic behaviors, time frame, and people involved etc..)

- 3) Each resident takes turns speaking/sharing (CP continues to run the meeting and call on which residents wil be speaking/sharing.)
  - a) Resident who called the group speaks first.
  - **b**) Resident who is being grouped speaks second.
  - c) Then house residents are allowed to ask questions and gather information to get clarification and share information.
- 4) CP opens the group for comments from the house. CP can choose to limit the comments if they become repetitive. ("beating a dead hourse") Comments should not exceed 5 or 6 minutes.
- 5) Suggestions
  - **a)** CP picks on 3 to 4 residents who can then share up to 3 suggestions for the house to vote on
  - **b**) Residents are expected to be thoughtful with suggestions and they should b All residents must vote except resident and CP, If there is ever a tie CP would then vote.
  - c) e specific to the reason for group, problematic behavior etc....
  - **d)** CP reads all suggestions made by each resident before hotes votes on suggestions.

\*All residents are expected to complete any and all suggestions from the house. The resident is able to meet with the clinical director if they disagree with house decision, however client will be placed on administrative restriction until he can meet with CD at his earliest or client can begin to adhere to house decision and wait to meet with CD.

Once the group has concluded, the CP must bring the completed "Group Intervention/Learning Experience Form" to staff for review. Staff should be able to understand what went on during the group by reading the notes. If the notes are insufficient, the *form* will be sent back to be completed correctly. Once staff is in agreement with the conclusion of group, only then will the group be over and the residents will be dismissed.

#### Safe Space

If for any reason, a resident in group is feeling overwhelmed or feels like they are going to lash out at the other residents in the group, that person may call for "safe space." This allows the person who is upset, the opportunity to separate themselves from the group and retain their composure. The resident can go outside on the grounds of Jeremiahs Inn. However the resident isn't allowed upstairs at this time. The resident is on administrative restriction until he finishes the group he called "safe space" in. He must finish the group once they have calmed down and feel like they can continue.

At any time during a group, a resident can request staff to sit in on the group if wanted.

#### **Group Conduct**

- Must be five minutes early for group (Only use clock in dining room for the time)
- No eating during group (Beverage are allowed).
- Be respectful when others are sharing
- No Cross Talking
- Raise your hand to speake at
- Limit comments to 5 minutes or less to allow as many people as possible to participate
- If you are in the house you are expected to participate in the group

Failure to comply with the group rules may lead to a "write up" or a "pull up" from the house. In addition the group will not count towards active participation in the house program and may delay tiering.

# **Buddy System**

To help guide new residents in the early stages of their time here and under other specific circustances a buddy is assigned to accompany the residents outside of the building. All residents in tier 1 must have a buddy when leaving the house. Residents on restriction and some residents who have a "Behaviour Agreement" in place may be required to have a buddy when leaving the house.

A "Buddy" is a resident who has been at Jeremian's Inn for some period of time, has demonstrated an understanding of the rules, policies and procedures and has generally complied with them. At a minimum the buddy must be in at least tier 2. Each month at the house meeting the buddy of the day is chosen by vote for each day/week for the coming month.

The buddy system is designed to offer support to new residents at any time for any reason. (Buddy of the day MUST buddy unless he finds coverage, house comes first.)

# **Chores & Maintenance**

As members of Jeremiah's Inn Community each client is expected to contribute to the health, well-being and cleanliness of the house through consistent completion of chores and maintenance of personal living spaces.

This module will provide proper training and information related to house rules and expectations for these tasks. Clients will also receive direct guidance from the House Manager and gain an understanding his role in the house. The house manager will provide a short outline of consequences for not completing tasks or meeting expectations. Daily chores and responsibilities are an important part of learning; to get started meeting their responsibilities, setting achievable goals and completing them.

#### **Intake Orientation will include:**

- House Manager Introduction and Complete Walk Through.
- Kitchen Operations / Food Safety
- Chore Descriptions / Expectations
  - a. Chores / Maintenance Logs
  - b. General Inspection Cleaning (G.I. Night)
  - c. Room Cleanliness / Room Inspections
  - d. The Role of the "Chore Checker".
  - e. Resolving conflicts pertaining to chores and cleanliness.
    - i. Program Warnings / Write Ups
- Maintenance Supplies / Repairs
  - a. Rules / Regulations / Procedures
- Program Warnings / Write Ups
- Q/A Session

#### Chores

Chores are assigned individually and should be completed twice daily (morning and evening) unless otherwise specified. Morning chores must be completed between 7:30AM and 9:30AM. Evening Chores must be completed between 9:00PM - 11:00PM. Chores are checked twice daily, by the resident "chore checker" and inspected by staff throughout the day. Residents will nominate a "chore checker" each month during the house meeting.

# G.I. Cleaning

Following the weekly house meeting, there will be a scheduled G.I. Cleaning. During this time residents are not permitted to go upstairs, unless they are participating in GI activity on the  $2^{nd}$  and  $3^{rd}$  floors.

# **Cleaning Supplies**

Supplies are kept in securely locked closets and will be available upon request, with assistance from a staff member. All chemicals must be returned to the locked closets after each use.

# Daily Routines for Health & Cleanliness of the House

**Chore Checker** – As Needed - Check all chores to assess a pass or fail score of completion.

**Dishes AM 7-3** – Wash all Dishes and maintain dishwashing area in kitchen until 3pm **Dishes PM 3-11** - Wash all Dishes and maintain dishwashing area in kitchen until 11pm **Dining Room PM 7-3** – Clean/Wipe Down all surfaces, sweep, mop and disinfect. Discard trash/recycle.

**Dining Room AM 3-11** - Clean/Wipe Down all surfaces, sweep, mop and disinfect. Discard trash/recycle.

Frt. Hall / Conf. Room -2 x Daily: 2PM/11PM Discard boxes/crates at closing of food pantry. PM - Sweep/Mop Conf. Room and Hallway.

**1st Floor Men's Room** / **Hall** -2 x Daily: Clean, Wipe and disinfect all surfaces, toilets and sweep/mop.

**2nd Floor Lg Bathroom** -2 x Daily: Clean, Wipe and disinfect all surfaces, toilets and sweep/mop.

**2nd Floor Sm Bathroom** -2 x Daily: Clean, Wipe and disinfect all surfaces, toilets and sweep/mop.

**3rd Floor Bathroom** -2 x Daily: Clean, Wipe and disinfect all surfaces, toilets and sweep/mop.

**Kitchen** – Nightly - Scrub, Clean, Wipe down all equipment and surfaces. Sweep/Mop floors. Discard Trash.

White Fridge/Temps. 2x Weekly - Rotate/Discard Food/ Date Food Containers.

Clean/Wipe Down Surfaces. Organize fridge contents.

**Silver Fridge/Temps.** 2x Weekly - Rotate/Discard Food/ Date Food Containers.

Clean/Wipe Down Surfaces. Organize fridge contents.

**TV Room** – Nightly – Move Furniture, vacuum, Clean/Wipe down surfaces.

**1st Floor Stairs/Entry** – Nightly – Cambridge St. Entryway & Sweep

Porch/Sweep/Mop 1<sup>st</sup> Floor Stairway.

**Front Porch / Ramp** – Nightly – Sweep / Clean up Main St./Front Porch/Ramp/Driveway

**Main St. / Parking** – Nightly – Sweep / Clean up Main St / Driveway Up to Dumpsters. Assist Fellow Parking Lot Chores

**Cambridge. St. / Driveway** – Nightly – Sweep / Clean up Cambridge St / Far Parking Lot Driveway Up to Dumpsters. Assist Fellow Parking Lot Chores

**Smoking Area/Porch** – Nightly – Sweep / Clean up Smoking Area / Parking Lot /Driveway Up to Dumpsters. Assist Fellow Parking Lot Chores

**2nd Floor Hallway** – Nightly – Sweep/Clean/Mop 2<sup>nd</sup> Floor Hall and discard trash

**Library** / **Meditation** – Nightly - Clean/Neaten Shelves, vacuum and clean room.

 $\textbf{2nd Floor Stairs} - Nightly - Sweep/Clean/Mop~2^{nd}~Floor~Stairs$ 

**3rd Floor Hallway** – Nightly – Sweep/Clean/Mop 3<sup>rd</sup> Floor Hall and discard trash **Basement / Stairs** – Nightly – Neaten weights/fitness and tools. Sweep/Mop stairs and floors.

**Laundry / Donations** – Nightly – Clean Laundry Machines Area - Neaten Donation Table Sweep/Mop stairs and floors.

**Case Management** – 3 x Weekly – Empty Trash during week – Clean/Wipe all surfaces and sweep and mop floors – clean chair mats on weekend.

**Weekend Bathrooms** – All Bathrooms as assigned by chore checker. - Clean, Wipe and disinfect all surfaces, toilets and sweep/mop.

# **Room Inspections**

Resident Rooms will be inspected daily for cleanliness, compliance and other maintenance related tasks. *Jeremiah's Inn staff reserve the right to enter resident's rooms at any time*.

It is expected that residents will complete the Room Cleaning and Maintenance logs daily. Paying close attention to complete only the "resident" column on the right of the sheet titled "Residents".

Rm: 207 All of these items must be done daily					Re	side	nt Ro	om C	leani	ng/N	lainte	enand	e Lo	g										
	,								PI.	ace an	"X" to	Verif	v Each	Area	ls									
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			Place an "N" in the box if attention is needed  House Manager Residents																					
House Manager															Resident									
Date Time	Name	Test smoke detector	Walls clean, no holes, paint good	Floors in good shape	Window 1 - screen & blinds	Window 2 - screen & blinds	Bed 1 - mattres & box good	Bed 2 - mattres & box good	Lamps & bulbs functional	Ceiling in good condition	Switch & outlet covers OK	Door & knob functional	No tripping hazards, cords, etc.	Bureaus good shape, functional	Ceiling fan & fixture functional	House Manager Initials	/ Floors & baseboards clean	Makebeds	Clothes clean & put away	> Dust Ceiling Fan & radiator	Wash Window	> Dust Blinds	Shampoo rug monthly	жооу в эше <b>М</b>

#### **Rules & Room Etiquette**

- Review & Sign Inspection Sheets Daily
- NO Food or Drinks (Water Only)
- NO Visible Tobacco / e-Cig or Vape Products
- NO Chemicals / Cleaning Products
- NO Extension Cords / Multi-Outlets
- NO Electric Heaters / Heating Pads / Heated Blankets
- NO Knives / Weapons / Tools / Sharp Objects
- NO Medications / Vitamins / Medical Items
- NO Excessive Clothing / Shoes
- NO Aerosol Products / Deodorants (Axe)
- NO Pornography / Offensive Material DO NOT Hang items on the walls
- DO NOT Leave Lights / Fans On
- DO NOT Hoard Linens (Pillows/Blankets/Towels)
- DO NOT Leave Windows Open
- Be Mindful & Communicate With Each other.
- Be respectful of your roommate's schedule.
  - o e.g. Be quiet when he is resting.
- Share responsibility: Review & Sign Inspection Sheets Daily
- Be respectful of each other's space.
  - o e.g. Do not sit on your roommate's bed without permission.
  - o e.g. Use headphones when listening to music/watching videos.
- Neutralize Odors / Bag Up Dirty Laundry
- Keep Personal Items Clean and Orderly
  - o **Please Note:** Any exceptions must be signed off by Case Management

#### **Conditions and Consequences**

The majority of violations will be handled using the house's pull-up and grouping procedures. Repeat and/or serious offenses may be forwarded to staff for review with Clinical Director and Case Manager.

#### **A Few Examples Are:**

Incomplete Chore / Unsigned Chore Sheet:

Signing off an incomplete chore:

Sick Days: No Step Up:

Refusal to Participate in GI Cleaning:

Follows pull-up/group procedures
Follows pull-up/group procedures
Written Warning/Referred to Staff

#### PROGRAM POLICIES

#### **Meals/Meal Planning and Preparation**

Breakfast and lunch are self-serve. Refrigerators and microwaves are available for residents' use in dining area. No food is allowed above the first floor. Residents are responsible for cleaning up after themselves. If a resident has a personal coffee cup that resident is responsible for keeping it clean. All residents are required to cook dinner 1 to 2 evenings per month. Unless there is a documented dietary necessity no resident is allowed to cook any meals for themselves; all meals cooked in the kitchen must be for everyone in the house.

Residents are assigned two cooking slots per month, selected monthly, on the last Monday of the month during the house meeting. Meals must be planned and prepared by the residents with assistance from staff. As meals are planned, meats must be staged / prepared in a manner which allows for safe defrosting. You must plan to feed 35 people, if you are unsure how to measure portions, please ask for assistance. At mealtime the assigned kitchen staff for that night must put aside meals for residents who are late because of work hours or on an approved evening pass. As a matter of Jeremiah's Inn policy food is for the residents first. Guest and staff are allowed to eat the resident prepared meals only if there is enough left over.

Dinner must be ready to serve between 4:30-5:00pm on a nightly basis, you must plan accordingly. If you are scheduled to cook or assigned as backup to assist volunteers, you must be present in the kitchen and available while the meal is being prepared and served and then assist with closing/cleaning up the kitchen.

Eligible residents may be elected to specials roles as kitchen assistants. As part of the Jeremiah's Inn Vocational Program for Work Readiness. The kitchen assistants report to the Nutrition Center Coordinator. Here residents learn how to follow instructions, customer service skills, communication in a work place skills, teamwork skills. Their

main role is to ensure the kitchen is kept in an inspection ready state, and food safety guidelines are being met and upheld.

#### Signing In and Out/Accountability

When we accept you as a resident at Jeremiah's Inn we accept a level of accountability for your safety and progress in our program. To assist us in meeting that accountability Jeremiah's Inn requires all residents to sign in and out on the sheet by the pay phone at the Cambridge Street door. In addition we require that residents write where they are going next to their name on the white board. This enables Jeremian's Inn staff to help you ensure that your choices, activities are in your best interests, safe and in keeping with your treatment program goals and objectives. Also, in the event of the need to evacuate the building we don't want to risk the lives of first responders looking for someone who is not in the building but did not sign out. Conversely we do not want to leave anyone behind because they did not sign in.

#### Pull Up System

The house residents have developed the following Pull Up System to address situations where residents are not adhering to the guidelines of behavior in the house.

- The first 2 pull-ups are free \*(see below)
- 3 pull-ups in a week span is an automatic Learning Experience group
- 4 pull-ups in a week span is an automatic consequence group
- 5 pull-ups in a week span is an automatic contract group
- 3 of the same pull up offense within a week span is an automatic consequence group
- 4 of the same pull-up offense within a week span is an automatic contract group
- \*2 of the same pull-up offense within a week span is an automatic Learning Experience
- You are allowed 1 hour to pull yourself up on the clipboard, longer than that could result in a group
- The Learning Experience needs to be associated with the offense committed
- A Consequence will result in a loss of privilege, essay or what the house suggests
- Learning Experience needs to be approved by the house
- All groups brought up must be turned in to staff for final approval
- If group is denied by staff it must be revisited from house
- All essay assignments must be:
  - o Related to the problem behavior in question
  - o Be recovery/treatment oriented
  - o Reviewed and accepted by a majority of the residents

#### **Pull-ups List**

Residents will experience a pull up for the following reasons:

- Bad Attitude (ex. swearing, negative comments, destructive behavior)
- Not signing in or out
- Not attending or being late for group
- Not keeping room up
- Refusal to help on truck day
- Electronics (ex. phone goes off during group, using of phone during program time)
- Being upstairs during unity night
- Not signing or doing chore as well as signing and not actually doing your chore
- Entering kitchen without permission
- Taking food from silver fridge and putting in white fridge (hoarding)
- Disrespect (ex. braking confidentiality, belittling, etc.)
- Not fulfilling cooking duties
- Not filling out group summary, weekly progress report
- Tobacco products out in the open this includes your room, smoking in non-smoking areas
- Nothing in rooms that wasn't purchased by self
- Late for curfew 1:30 from job search, 3:00 for afternoon group, 5:00 from work/dinner, 10:00 phone call)
- Phones in excess at outside meetings
- Erasing names for laundry
- Not doing assigned job from house
- Not finding a step-up for chore, also not fulfilling step-up
- Skip buddying duties
- Appointment not signed
- Crosstalking during group
- Food or drink in TV room
- Skipping pantry duties (need 4 hours volunteer to tier up)
- Skipping colunteer work
- Not helping with donations
- Not taking meds, non-compliant
- Not attending required meetings
- Skipping meetings
- Being upstairs during program time without permission
- Skipping Broga

# **Personal Property**

Personal property and possessions brought on-site are the sole responsibility of the owner. Jeremiah's Inn is not responsible for loss or theft of any personal items. Use caution and good judgement when deciding what to keep on-site. Do not leave personal property unattended.

Because of a lack of storage space and a requirement that the house be kept clean and orderly residents are expected to have only the personal property needed for their stay in

treatment. Collecting and/or hoarding unnecessary amounts of clothes, shoes/sneakers or other items is prohibited. Staff reserves the right to require that a resident move excessive/unnecessary personal property to an offsite location.

Personal property left behind at Jeremiah's Inn for any reason is not the responsibility of the inn. However, Jeremiah's Inn will make reasonable efforts to secure the property and store it on the premises for 14 days. Within the 14-day period, property may be claimed between the hours of 10 A.M. and 4 P.M. Monday through Friday with a 24 hour prior notification. If a former resident authorizes another person to pick up his property, that person must have a letter of authorization (see enclosed form on page 33) and their ID at the time of pickup.

#### Misc. Items

- Per BSAS safety requirements residents may have televisions no larger than 32 inches. Access to cable TV is not provided.
- Box fans, small radios, and alarmclocks are allowed as long as fans and radios are turned off when not in the room.
- Heaters and air conditioners of any kind are not allowed.

All resident's personal property brought into the facility from the time of intake to time of discharge must be inspected by staff before going into client's room.

#### **Program Fees**

Program Fees for the first 30 days at Jeremiah's Inn are equal to your monthly allotment of SNAP benefits. After that the Program fees are \$10.00 per day. The fees are paid using a combination of your SNAP benefits and cash. See the calculation under Food Stamps/EBT Cards

Program fees are to be paid by money order only and made out to Jeremiah's Inn, cash or checks will not be accepted.

# Food Stamps/EBT Cards

All residents who are eligible must apply for food stamps upon admission if they do not already receive them. In accordance with an agreement between Jeremiah's Inn and the U. S. Department of Agriculture – Food and Nutrition Service Programs all food stamp benefits must be surrendered monthly to offset program costs. In most cases residents will qualify for \$194 per month in food stamps. The remaining balance will be the client's responsibility.

Clients receiving EBT food stamps are required to pay ¼ of the balance of their monthly program fees on a weekly basis. Example, if client receives \$190.00 in food stamps and program fees are \$280.00 that leaves \$90.00 divided by 4 would be \$22.00 every week to be budgeted for program fees to be paid. For those who do not have EBT food stamps they will pay \$70.00 per week for program fees.

Food Stamps and EBT cards are to be turned into the business office upon admission or receipt of the card. Your card and pin number will be stored in a separate, secure location and debited on a monthly basis.

If you are behind on your fees, you must work with your Case Manager on a fee payment agreement based upon your income. <u>If a resident has balance of \$70 or higher, passes</u> will not be granted.

Hardship situations will be evaluated on a case-by-case basis with your case manager to determine if an alternate payment arrangement is warranted.

#### **Confidentiality**

Resident's case records and information are considered confidential - case files are stored and managed electronically in a HIPAA compliant system with restricted access. Level of access is determined by the employee's role in the Jeremiah's Inn Operation. In other words, staff are only allowed access to the resident information necessary to perfrom their job. Information in confidential files may not be released unless:

- The resident consents in writing to the release
- The disclosure is mandated by court order
- The disclosure is made in an emergency, in order to protect the welfare of the resident or others, or
- The disclosure is for statistical purposes, research, education, or audit and does not identify the individual resident.

#### Live On-Site

Residents are expected to live on-site and to be participating fully in their treatment program.

#### **Passes**

- Passes are a privilege that is earned.
- Eligibility for passes and the type of pass are determined by the tier which the resident has achieved
- To receive a pass the resident must be compliant with all program rules and responsibilities at the time of the request.
- Resident is up to date with fees or is meeting the arranged fee schedule.
- Passes must be submitted 24 hours in advance
- Passes must include an address and phone number of where you can be reached.
- Client must have a written safe plan of action for the duration of the pass including at least one recovery meeting per day while on pass.
- Extra passes can be earned by doing extra duty.
- Passes cannot be combined in any way.
- Passes cannot be held over month to month.
- If staff contacts the resident while he is on pass for any reason and needs him to return, he must return to the program immediately.
- If a resident returns from pass early for any reason, the pass is completed and he is not allowed to go back out on the same pass.
- Residents on Parole or Probation must have approval of their PO.

# **Night Time Curfew and Check Ins**

- Curfews 11:00 P.M. Sunday Thursday 12:00 P.M. Friday - Saturday
- Check ins 5:00 PM Monday Friday (mandatory) 1:30 PM Saturday&Sunday (mandatory)

These apply to all residents who are not on a pass.

If a client is going to be late for curfew he must call by phone or communicate through BAND at least an hour before curfew and communicate with a staff member. If a client is late for curfew and does not call, he is placed on administrative restriction until meeting with Clinical Director or supervisor. If a client is late for curfew for any reason, he must provide a sample for drug screening within the limits given in the drug screening policy.

Residents on parole or probation are subject to their particular conditions and cannot request a pass for more than 24 hours without permission from their parole/probation officer.

#### **Program Hours**

- Weekdays all residents are expected to be on the 1<sup>st</sup>. floor from 7:30am 1:30p.m.
  - Residents are not allowed upstairs or in their room during program hours without staff permission
  - o This does not apply to weekends.
- Residents must sign in by 7:30 am
- Morning meeting/check in is from 8-8:30 a.m.
- Morning chores from 8:30a.m.-9:30 a.m.
- Working residents exceptions (see Outside Employment)

#### **Television**

- The television in the resident living room is to be shared by all. Please be respectful and share.
- The television is to remain off from 8:00 AM to 4:00 PM

# **Required Meetings**

Assigned groups and meetings are mandatory and attendance must be documented and presented to your Case Manager. All residents in any tier are required by State program regulations to attend 5 clinical groups per week.

During Orientation tier 1 and 2 residents will be given a calendar with the required in house groups. All unemployed residents regardless of tier will be required to attend a noon time recovery oriented meeting Monday through Friday. All residents are required to attend an evening recovery oriented meeting Tuesday, Wednesday, Friday, Saturday, and Sunday and one day time, either morning or noon, recovery oriented meeting on the weekend.

The afternoon in-house meeting is at 3:00p.m. Monday – Friday. All unemployed residents are required to attend. Dinner is at 4:30. For nightly meeting subjects, days and times consult the weekly calendar. Monday night and Thursday night are in house nights and all residents are required to attend. All residents are expected to be in the house by 5:00p.m. for groups and bonding time. Residents are expected to be prepared for in house nights by getting what they need before 5:00p.m. Unless approved by a case manager residents are not allowed to leave the property after 5:00pm.

During your time in the program, you will meet with your Case Manager at least once per week and present and review your weekly summary.

Attendance at the weekly House Meeting, Life Skills and Relapse Prevention is mandatory. Six weeks of Broga and Meditation are mandatory, after which attendance at these two groups is voluntary, but strongly suggested. One 30 minute and one 15 minute session of Reiki are mandatory as a way of introducing residents to alternative methods of healthy living.

#### **Change/Treatment Plan**

Residency at Jeremiah's Inn is about a program of change. We strive to assist our residents to make changes in their thinking and Self-Care necessary to adopt a Clean and Sober way of life. Utilizing the Association of Addiction Medicine (ASAM) 6 Dimensions of Change we work with each resident to develop an individualized, holistic Change/Treatment Plan.

Developing the Change/Treatment Plan begins with the two week orientation. During orientation residents are given daily objectives and activities designed to introduce them to the operations of the inn, the principles of Good Citizenship, the importance of community support and the practice of daily self reflection (ICR). Residents should meet with their case manager daily during the orientation period to review each package objective and discuss areas of change to include in their individual Change/Treatment plan.

The last package includes the Dimensions of Change where residents are asked to list specific areas of change to work towards. These should include steps to make changes in thinking and behaviors, goals for clean/sober living, self-care and ultimately the circumstances and conditions for discharge that provide the greatest support for life long clean and sober living.

Keep in mind that the Change/Treatment Plan is a "Living Document". It can be changed, updated or modified as time, self-discovery and greater self-awareness of needs dictates.

# **Relaspse Response Policy**

Relapse in recovery is common and, addressed appropriately, can become a learning experience leading to greater self-awareness of triggers and stressors that need to be addressed as part of a residents' change/treatment plan. At Jeremiahs Inn we understand the importance of keeping all persons with Substance Use Disorders in the continuum of care in an attempt to assist the resident to learn from the relapse and move closer to adopting a life time of clean and sober living. Relapse must be addressed as a learning

experience rather than a failure requiring a punitive response. A relapse does not automatically mean a discharge from the program. Once issues of safety are addressed and to ensure an appropriate response to a relapse with the best possible odds for a positive outcome the following procedure will apply.

- 1. Clients who relapse will be objectively re-assessed using the ASAM criteria by the clinical director to ensure that Jeremiah's Inn is the appropriate level of care.
  - a. Assessment results must be consistent with treatment plan and/or intervention documentation in the client's file.
  - b. The "Relapse" ASAM assessment are stored in the client's file
- 2. All reasonable efforts must be made to keep the client at Jeremiah's Inn
  - a. Clients who relapse may be subject to a program restart
  - b. Clients may be required to attend one or more of the following IOP, SOAP, Counseling, Therapy, and /or additional relapse prevention groups.
- 3. All clients who remain in program will need to meet with the clinical director and resident's case manager to complete a relapse prevention plan, update their change/treatment plan and develop a "Behavior Agreement".
- 4. Based on the assessment, or for reasons of safety, if the client requires a higher level of care the Clinical Director will make a referral.
  - a. BSAS will financially support holding a bed for up to 6 days in the event short term ATS (detox) is needed.
- 5. Clients who accept a referral to a higher level of care will be considered for readmission pending bed availability.
- 6. All final decisions require the approval of the Director of Operations

# **Behavior Agreements**

A behavior agreement is developed when a resident has continuous challenges complying with program responsibilities and requirements and/or in the event of a relapse. The agreement is in addition to the existing treatment plan and includes additional steps, therapies or actions of accountability to help the resident make the changes necessary to adopt a clean and sober way of thinking. Behavior Agreements are developed with the direct participation of the resident. A Behavior Agreement, at minimum, would contain the following:

- A description of the non-compliant behavior
- Reason for expected behavior (treatment objective)
- Needed change
- Steps toward change/activities
- Positive consequences of change in client's life
- Negative consequences of refusal to change in client's life

# **Employment**

Generally speaking residents are eligible for work once they reach tier 3. However, experience and history has taught us that residents often see successfully getting work as the end of their need to make changes in their thinking and attitudes. This is not so. Before beginning job search residents will review their attitudes towards work with their case manager. In other words is working just a way to get money to buy and hoard stuff or an opportunity to become responsible, pay bills, support children, be of service to the

company, its' customers and those to whom we owe gratitude? Is the resident ready to manage the stressors of work without the use of mind altering substances? The following rules apply to working while a resident at Jeremiah's Inn:

- Residents can work 1<sup>st</sup> and 3<sup>rd</sup> shift only
- 2<sup>nd</sup> shift is not allowed because it intereferes with required meetings and programming
- Residents must be home, at the inn by 5:00pm
- Residents working 3<sup>rd</sup> shift are allowed upstairs to sleep after 9:00am
  - o 3<sup>rd</sup> shift workers will need to be downstairs by 5:00pm
- Working residents are entitled to two days off, typically Saturday and Sunday
  - Residents who work Saturday or Sunday can switch those days off for weekdays
  - o The resident's case manager must approve
- You must supply your Case Manager with a paycheck stub and proof of employment with in 24 hours of acquiring employment weekly/bi weekly.
- All residents are required to save 20 % minimum of their weekly income.
- Days off from work are not days off from program time unless it is in exchange for having worked the weekend.

#### **Appointments**

All apointments are to be documented in the appoingment book in the Case Manager office. They should be made at least 48 hours in advance and approved by the house and a Case Manager.

Appointments are not allowed during the food delivery on Wednesday unless it is a doctor, MAT or urgent appointment where an alternative time is not feasible.

# **Drug Screening**

For the safety and well-being of the house, residents under certain circumstances will be required to provide a Supervised Urine Toxicology Screen and/or Breathalyzer. Those circumstances include but are not limited to the following:

- When active use of alcohol and/or drugs is suspected by staff
- House toxes which may occur at ramdon
- Upon return from a pass of any duration

Refusal to submit a sample will be considered the same as a positive result. Tampering with specimens, consuming adulterants or refusing to give a specimen will result in additional steps to ensure the safety of the resident and others in the house.

When requested by staff, residents must stay in the dining area until screening has been completed. The resident has 60 minutes to produce a specimen. If a resident does not produce a sample within 60 minutes that will be considered a refusal.

Testing for some substances and certain situations require that the sample be sent to a certified lab. Jeremian's Inn has agreements with a couple of labs to process the additional testing. That includes when testing for the following:

- K-2 Testing
- Medication abuse
- Fentanyl
- Carfentanil

Jeremiah's Inn will also send the sample to the lab in the event the resident disputes the results of the "quick test". Results take 2 to 3 business days on average to be completed. However, the time needed to finish the additional testing is not guaranteed. During that time the resident is placed on administrative restriction.

#### Prescriptions, Supplements, OTC Meds

Per BSAS regulations, residents must supply their own medication. Jeremiah's Inn has no "house meds" of any kind for residents, including "over the counter medications". Medications and supplements are kept in the Direct Care office inside of the locked file cabinet in a container labeled with the name of the resident. If a resident chooses to change his medication for any reason, he needs to contact his doctor to make the change and provide supporting paperwork to Jeremiah's Inn. If a resident does not take his medication as prescribed for 3 days steps will be taken to address the non-compliance.

Medications can be accessed Monday through Friday from 5:00A.M.-8:00 A.M., Noon – 4:30P.M., after 7:00 P.M and before midnight. On the weekend's medication times are between the hours of 5:00a.m. and 11:00p.m.

Medication must be taken as prescribed and can only be discontinued by prescribing doctor. All residents are responsible for providing documentation from doctor in such situations prior to discontinuing any medication. When a narcotic medication is discontinued the resident will be placed on administrative restriction until 72 hours **after** last dose to monitor withdrawal symptoms after completing medication.

Any and all narcotic medication and Gabapentin are considered controlled substances and must be properly stored and regulated for safety. In the event narcotic medication is prescribed, proper documentation (evidence of a prescription in the resident's name) must be provided.

Any client who receives a medication prescription for a controlled substance shall adhere to the following:

- A resident who receives a prescription for treating of pain from the Emergency Room, their PCP, or Dentist must have proper documentation along with the script for medication(s).
- Resident will be placed on restriction when the first dose is taken.
  - The resident will only be allowed to go out during this time for appointments and meetings *provided* they have a buddy for support.
  - Restriction will conclude 72 hours after the last dose for opiates. Restriction will end 48 hours after all other narcotics.
  - o Your case manager will work closely with you to ensure your safety

All medication must be brought to the Case Management office immediately prior to taking a dose. If the medication started with a dose at the prescribing doctor's office, proper documentation must be provided to staff.

For some medications (e.g. inhalers) and OTC meds, residents need written permission from their case manager to keep them on their person or in their room. Only meds (<u>including Over the Counter meds</u>) that have been approved by Case Managers and have been properly logged may be kept in resident's room.

#### **Sick Day Policy**

If a resident is sick and needs a "sick day," he will be allowed to go upstairs and rest in his room. The purpose of the sick day is for the resident to rest and relax so that he feels better. The only reason that a resident on sick day should be downstairs is to eat meals and smoke (only after meals) the majority of the sick day should be spent in his room resting so that he can fully participate in the program as soon as possible. If a resident is sick for more than two days in a row, he must go to the doctor to be assessed. If a resident starts the day on sick day, he needs to finish it on sick day. On a sick day, a resident is restricted to the house and cannot go out anywhere including outside recovery meetings, work, and visits. If clients are too sick to attend meetings and groups they should be in their rooms getting better not going to work.

The use of sick time may disqualify the resident from tiering that week. Tiering is determined a the clinical team meeting. Sick time and/or extenuating circumstances will e considered, but the Clinical Director's decision is final.

#### **Room Security**

It is recommended that resident rooms be kept locked at all times and valuables be kept off-site. For safety reasons, keep only a small amount of cash on site. Jeremiah's Inn is not responsible for lost or stolen items. Be sure to take appropriate precautions.

Additional security used by residents must be approved by management. In the event that a resident uses additional locks a key/combination must be provided to case management.

# Laundry

Resident's washer and dryer are located in basement. Laundromats are also available in the neighborhood. Use of an outside laundromat is at the resident's expense unless required by Jeremiah's Inn.

Resident must provide their own laundry soap; Use liquid High Efficiency detergent only or else half the normal amount of regular detergent!

- Do not open the lid when lock light is on.
- Empty all pockets before putting clothes in washing machine.
- Don't overload appliances; 1 standard pillowcase full of items equals 1 load.

Unattended laundry may be removed from the machines by other residents at the end of the cycle and placed on the table.

#### **Bed Bug Protocol**

Bed bugs in a facility such as Jeremiah's Inn is a constant concern. The introduction of bed bugs to the inn make life very uncomfortable for residents and are a health hazard. Removal of bed bugs is very expensive.

Jeremiah's Inn takes specific steps to prevent bed bugs and/or address the presence of bed bugs should that occur. At admission all soft items, clothing, shoes, back packs must be put through the dryer in the basement before being taken upstairs to the residents' room. Hard items such as suitcases are spayed with a solution of rubbing alcohol and water. Any clothing or other soft goods purchased during your stay need to be processed through the dryer. Each month an extermination company inspects every room and bed for the presence of bed bugs. Should there be any, that bed is treated immediately.

#### Phone Calls/ Messages - 508-795-6989

Jeremiah's Inn provides a restricted line for resident's use who do not have a cell phone. This phone should be used to make phone calls to providers and family. There is a 10 minute time limit per call. If the phone rings and you choose to answer it the following rules apply:

- To protect confidentiality do not identify Jeremiah's Inn
- Be willing to take a message and place it in the appropriate resident's mail box
- Be Polite

#### **Residents and the Nutrition Center**

Each resident is required to volunteer a minimum of 4 times the Nutrition Center. There are several ways and opportunities to reach this requirement.

- Volunteering between 30-60 minutes in the pantry assisting with food distribution
- Volunteering to transport items from downstairs & restock shelving in the pantry
- Participating in a trip to WCFB on Wednesday (minimum of 1 trip required)
- Attending an educational tour at Price Chopper, 2<sup>nd</sup> Tuesday of the month (required)
- Attending events associated with the Nutrition Center
- Working in the Community Garden on Camp St.
- Truck unloading is done on Wed 7:30 am 11 am if on truck van leaves at 7:30. (all new residents should go on truck at least 2x)

When volunteering, residents must use the sign-in sheet documenting time in/out to receive credit. The Nutrition Center Coordinator will sign your card.

#### **Donations**

Jeremiah's Inn receives donations of many kinds from generous members of the community. These donations are for the benefit of the residents. By regulation Jeremiah's Inn is required to carefully track and control all donations regardless of their type or source. To that end Jeremiah's Inn has established protocols that must be followed. Whenever anyone arrives with a donation residents must get a staff member to assist with the processes.

**Clothing**: All clothing donations must be bagged immediately in large, black trash bags and placed in the case manager's office until the clothing can be processed through the staff dryer. (See Bed Bug protocols.) No resident or staff member is allowed to go through clothing donations and take or give out any items. Once processed clothing donations will be distributed to residents according to need.

**Food/Non-Perishables**: All non-perishable food donations must be weighed and logged. There is a donation log for this purpose.

**Perisables:** All perishable foods must be logged and placed in the walk-in cooler immediately.

#### **Bicycles/Automobiles**

All resident bicycles must be kept only in the authorized area, for the safety of the house. Fire safety regulations state that hallways, exits or fire escapes cannot be blocked in any way, including by bicycles. Check with your case manager to ensure proper storage

Under certain conditions residents are allowed to keep personal vehicles at Jeremiah's Inn. Written permission from the case manager and approval from the Director of Operations is required. The following rules also apply:

- On-site parking of a resident's vehicle is at the resident's risk. Jeremiah's Inn accepts no responsibility for damage or theft of any resident's vehicle or its' contents
- All clients must park vehicles in the over flow parkig lot located next to the fire department. Clients will revieve a parking pass for over flow parking.
- Residents are not allowed to co-own vehicles with anyone
- Automobiles must be properly insured in resident's name, have a valid registration in resident's name, updated inspection sticker and be in operable condition.
- Drivers must have a valid license at all times.
- Major repairs and oil changes are not permitted on-site.
- Minor repairs requiring a jack must be attended to at all times.
- Must be on tier 3 with proper documentation

#### Guests

During certain times and under specific conditions residents are allowed to have guests visit them at Jeremiah's Inn. The following rules apply:.

- All guests must sign in/out of the visitor log **and** notify the staff
  - o This applies to guests who are outside or inside of the building
- All guests must comply with the house rules and regulations
- All guests must identify whom they are visiting with, and residents must stay with their guests throughout the visit, *children must be supervised at all times*.
- No guests are allowed above the first floor
- No resident is to be in any locked room, at any time, with their guest
- Residents must be accountable for their guests and are responsible for any damage their guests may cause to Jeremiah's Inn property
- No guests are allowed during scheduled groups and meeting. There will be no loitering on Jeremiah's Inn premises
- Guests times are as follows: Tuesday 1-5pm, Wednesday 1-5pm, Friday 3-5pm
- Weekend guest times are as follows: Saturday and Sunday 1-4 pm

#### **Cell Phones**

Clients are allowed to have a cell phone. However, Jeremiah's Inn does not provide wi-fi access. Group rules regarding the use of cell phones must be followed. Failure to follow the guidelines will result in 48 hour loss of phone.

#### **Common Areas**

Common areas at Jeremiah's Inn are areas of the house that are generally shared by all residents. For the common good it is important to respect each person's right to be there. Appropriate use of and behavior in the common areas are important to good citizenship and community. Please be aware of the following:

- The first floor is a business area; proper clothing, including shirts and shoes must be worn at all times.
- Common areas are available to our residents 24 hours a day- *Please be considerate of other residents' needs at all times*.
- Sleeping is not allowed on the first floor.
- Entry into unauthorized areas (Front offices, kitchen, pantry, basement storage, furnace room) is not permitted without prior approval from case management.

#### Mail

Residents may receive mail at Jeremiah's Inn. An office staff member collects the mail at the post office Monday through Friday only, sorts and places it in the resident's Jeremiah's Inn mail box outside of the case manager office.

- Address: Jeremiah's Inn P.O. Box 30035, 1059 Main Street, Worcester, MA 01603.
- Residents must keep mailboxes clean.
- The Post Office is located at the mini-mall. As you leave by the front door, turn right and walk approximately 50 feet.

- Jeremiah's Inn does not, as a matter of policy, deliver resident's mail to the post office
  - o However, if, out of the kindness of the heart the staff member volunteers to drop off a piece of mail remember to say Thank You
- Jeremiah's Inn does not forward the mail of residents who have left the program for any reason
  - Residents must inform anyone from whom they receive mail of their change of address. Forms for change of address are available at the post office
- Jeremiah's Inn will collect and save the mail of discharged residents for two (2) weeks
  - O After the two week time limit mail will be returned to the post office
- Packages delivered by USPS, Fed-EX, UPS, Amazon, etc will be only accepted
  by Jeremiah's Inn staff when the package has been approved by the case manager
  and office staff notified.
  - Residents are not allowed to be ordering and collecting items not necessary for their stay in treatment

#### Harrassment

Good citizenship and community requires individuals to demonstrate respect and tolerance of differences of the community members. Jeremiah's Inn is committed to providing an environment that is free of all forms of abuse or harassment. Jeremiah's Inn recognizes the right of all employees, residents, guests and visitors to be treated with respect and dignity.

#### **Sexual Harrassment**

Sexual harassment is a form of behavior prohibited by State and Federal law. Jeremiah's Inn also condemns and prohibits sexual harassment by any employee, client, guest or visitor.

Sexual harassment does not refer to purely voluntary social activities. It refers to behavior that is not welcomed by the employees, clients, guests or visitors, which is personally offensive to him or her, and which undermines morale and/or interferes with the ability of the person to work effectively. Sexual harassment, as defined by the law, may, depending upon circumstances, include unwelcome actions such as:

- Verbal abuse of a sexual nature, use of sexually degrading words, or jokes or language of a sexual nature
- Physical contact including patting, pinching or repeated brushing against another's body
- Demands or requests for sexual favors accompanied by implied or overt promises of preferential treatment or threats concerning an individual's status.
- Continuing to express sexual interest after being informed that the interest is not welcomed
- Assaults or molestations
- Posting or distributing sexually suggestive pictures or other materials
- Inquiries into someone's sexual experiences or discussion of one's own sexual activities

Sexual harassment is not limited to prohibited behavior by a male toward a female. Sexual harassment can occur in a variety of circumstances. Here are some things to remember:

- A man as well as a woman may be the victim of sexual harassment, and a woman as well as a man may be the harasser.
- The harasser does not have to be the victim's superior or person in authority.
- The victim does not have to be the opposite sex from the harasser.
- The victim does not have to be the person at whom the unwelcome sexual conduct is directed. The victim may be someone who is affected by the harassing conduct, even if it is directed toward another person, if the conduct creates an intimidating, hostile, or offensive environment.

NOTE: while this policy sets forth our goals of promoting an environment that is free of sexual harassment, the policy is not designed or intended to limit our authority to discipline or take remedial action for conduct which we deem unacceptable, regardless of whether that conduct satisfies the definition of sexual harassment.

#### **Other Harrassment**

Any harassing behavior which includes, but is not limited to, words or actions referring to a person's race, gender, age, disability, physical appearance, sexual orientation, color or beliefs, that creates an intimidating, hostile or offensive environment will be considered harassing behavior and subject the harasser to the disciplinary process.

Anyone who feels that they are a victim of harassing behavior should initiate a grievance as outlined in "The Greivance Procedure".

#### **Tobacco**

Jeremiah's Inn is tobacco-free. The use of any form of tobacco, including the use of smokeless tobacco such as snuff and chewing tobacco is prohibited throughout the entire building. This includes all indoor facilities, offices, hallways, waiting rooms, rest rooms, meeting rooms and community areas. (*Jeremiahs Tobacco Policy incorporates the DPH/BSAS Tobacco Guidelines effective 7/1/04*)

This policy applies to all employees, residents, guests, volunteers, food pantry clients and any other visitors to the building. There are no exceptions to this policy.

#### **Smoking Area**

Smoking is allowed on the grounds only in the designated smhe smoking area is at the picnic table or the parking lot on the Cambridge side of the building. All used smoking materials must be disposed of in the buckets provided

There is no smoking on the front porch, on the porch on the Cambridge Street side of the house, or within five (5) feet of any doorways or windows.

## **Gambling**

It is currently estimated that approximately 5% of the general adult population will have a gambling disorder in their lifetime. The prevalence rates within populations of individuals who live with substance use disorders and other mental health disorders jumps between 25% and 40%. Acknowledging these statistics and desiring to help our clients avoid harmful behaviors, Jeremiah's Inn has adopted the following gambling policy.

Gambling, as defined by the Massachusetts Council on Compulsive Gambling, is risking something of value on the outcome of an event when the probability of winning is less than certain (Shaffer, Howard and Korn, David. "Gambling and Related Mental Health Disorders: A Public Health Analysis," Annual Review of Public Health, 23 (2002).

Staff, residents and visitors are prohibited from engaging in gambling activities on Jeremiah's Inn premises and at events sponsored by Jeremiah's Inn. Such activities may include:

- Lottery games (scratch tickets, Keno, numbers games, etc.)
- Pari-Mutual betting (horse and dog races, jai lai)
- Casinos (table games and slot machines)
- Sports betting (office or family pools and/or with a bookie)
- Bingo or Beano or similar activities
- Raffles and fundraising tickets
- Internet gambling of any type
- Day trading
- Animal fights
- Betting on individual skills
- Electronic gaming devices including "free" cell phone applications that mirror gambling of any kind
- Any card, video, board or other games for money
- Any illegal wagering Illegal wagering, just as any other illegal activity, cannot take
  place on Jeremiah's Inn premises. Illegal wagering is defined as any wagering,
  betting or gambling that does not meet the parameters of the law. Illegal wagering can
  include betting with a bookie, betting in office pools with a cut of all money wagered
  given to the organizer, and illegal machines.

Also prohibited is any staff gambling or discussion of gambling in front of clients, including having scratch tickets on premises or at a Jeremiah's Inn event, and/or discussion of gambling in front of clients, such a talking about their latest trip to a casino.

Lottery machines or gambling opportunities on the premises are not permitted. (We are not required to monitor raffles within 12-Step meetings held on the premises.)

Betting between clients and staff members is prohibited.

Staff who violates this policy will be subject to disciplinary action, up to and including termination. Residents who violate this policy will also be subject to disciplinary action, up to and including discharge from the program.

## **Written Warnings**

Residents may receive a written warning under certain circumstances, usually a pattern of non-compliant behavior towards the house rules and treatment requirements. Three (3) written warnings of any kind will be grounds for a re-assessment as to whether or not Jeremiah's Inn is the appropriate level of care and/or determine whether or not the resident truly wants to engage in treatment. If a resident receives a written warning, he will have to meet with staff and develop a plan to address the problem behavior. Residents who receive a written warning may lose tier priviledges and/or be held back from tiering up as deemed appropriate by the clinical team. The resident will also have to present the written warning to the house and follow the house's recommendation. Below are listed some of the offenses for which a written warning may be issued. It is not a comprehensive list, but a guide to the types of behaviors that could lead to a written warning:

- No cell phone/electric devices are allowed in common areas during program time 800am—130pm or in any group/activity *Unless pre-approved by the house because you are expecting a phone call from a doctor, lawyer or job.*
- Not doing your daily, assigned chore(s)
- Unauthorized absence from assigned groups including all clinical groups and meetings.
- Keeping a messy and untidy living space
- Keeping of any food upstairs in bedrooms
- Having an unauthorized vehicle on the premises
- Not showing up for weekly case management sessions
- Unauthorized occupancy of your room between 7:30a.m. and 1:30 p.m.
- Refusing to help in the pantry and/or to unload the food bank delivery
  - o The only passes allowed during this time are doctor or MAT appointments
  - There is No Job Search during this time
- Refusing to help when donations are being brought into the house
- Failing to clean up after yourself
- Unauthorized presence in the walk-in and/or kitchen area
- Using inappropriate or vulgar language or actions
- Any negative behaviors that are non-responsive to corrective actions for change outlined in Recovery Plan (i.e. resisting treatment)
- Not signing in / Not signing out
- Arriving late for curfew without having called at least one hour prior
- Deviation/being out of place
- Possessing Energy drinks on the property.

## **Fire Safety**

#### Plan ahead

Don't wait until you're caught in a fire to beginning planning what you should do. If you have an escape plan and adapt it to the emergency, you can greatly increase your chance of survival. People often panic when they don't know what to do in an emergency; panic can cause people to make wrong decisions that could cost lives. Be proactive and plan ahead!

#### Should a fire start in your room:

- Evacuate your room immediately & close the door behind you.
- Sound fire alarm by pulling down on alarm box, breaking glass rod and notify residents & staff.
- Move quickly and orderly to nearest exit.
- Join staff in parking lot.

#### Should a fire start in another part of the building:

- 1. If there is any evidence of smoke in the room roll out of bed and crawl to the door. Don't stand, because smoke is a deadly gas, and gases rise.
- 2. Because heat and smoke rise, move along as close to the floor as possible.
- 3A. Feel the door with the back of your hand, if the door or knob is hot or very warm, don't open it!
  - a. **Don't panic-** seal the door from smoke with towels or sheets.
  - b. All rooms are equipped with a chain ladder in box below the window
  - c. Open window check area below, and if clear, drop ladder.
  - d. If unsafe to use fire ladder, signal for help from Fire Dept. or passerby.
- 3B. If the door is NOT hot, open it slowly a crack to check for safety.
  - a. If there is no smoke in the hall, it is probably safe to leave your room. Close the door securely behind you and proceed to the nearest exit.
  - b. Walk down to the ground level holding on to the rail to protect yourself from being knocked down by someone in a panic.
- 4. If you encounter some fire at lower levels, walk back up to cleaner air and use another exit.
- 5. Join staff in parking lot.

## NOTE: Remember that few people are burned to death in fires; most people die from smoke and poisonous gases so stay low to the ground if there is any smoke present at all.

- Use of candles is not allowed, no incense or any open flame
- Do not accumulate trash in your rooms
- Never drag a smoldering mattress through the building
- Don't overload outlets, no multiple plugs allowed
- The wiring of appliances such as fans, radios, irons etc. must be inspected and approved by a staff member before bringing them into your room

Residents should only use fire extinguishers on small fires which can be contained. i.e. waste baskets, rugs, bed clothes etc.

#### **Fire Drill Procedures**

Resident safety is of primary importance. All residents are to respond immediately to any Fire Alarm and to participate fully in any Fire Drills scheduled by the staff.

1. Exit room, closing door behind you.

- 2. Proceed immediately to nearest EXIT. Besides the regular exits, there are Emergency Exits located on each floor. It is the responsibility of each resident to be fully aware of the location of all the exits.
  - Check with the staff if you are unsure of Emergency Exit locations.
- 3. Exit the building in an orderly manner and assemble in the rear of the parking lot under the billboard sign.
- 4. Reenter the building only when instructed to do so by the Staff or Fire Department.

Note: Fire Drills not completed within acceptable time will be repeated.

## **Involuntary Discharge**

Jeremiah's Inn makes every effort to work with clients as they go through treatment which includes self-discovery, a change in thinking and living. We recognize that this process is different for everyone. However, there are circumstances when an involuntary discharge is appropriate. These include breaking of cardinal rules, acts of violence towards other residents or staff, damage to Jeremiah's Inn property, a physical or mental state that indicates possible danger to the resident himself or others etc.

Other involuntary discharges are made on a case-by-case basis by the clinical team. Generally as a result of behaviors that indicate that the level of care at Jeremiah's Inn is not appropriate or conducive to a positive outcome for the resident. These involuntary discharge decisions are made by the clinical team. Jeremiah's Inn will make referrals to a more appropriate level of care. However, if the resident refuses the referral the resident will be required to make other living arrangements and Jeremiah's Inn is not responsible for the outcome or consequences the resident may experience as a result of their decision.

#### Grievance

Residents at Jeremiah's Inn are afforded the priviledge of disputing decisions made by staff regarding their treatment and residency at the inn. Any resident who feels his rights have been violated or that he has been discriminated against at Jeremiah's Inn has the right to *file* a grievance. Grievances should be filed as soon as possible following the event/issue. Keep in mind that memories fade and resentments grow with time.

To initiate a grievance procedure, the resident must fill out a "Grievance Form" and submit it to the Director of Operations. If the grievance involves the Director of Operations, the request must be submitted to the Executive Director. If the grievance involves the Executive Director then it can be submitted to the chair of the Board of Directors. The request should describe the events about which the resident is making a complaint in sufficient detail to allow an investigation of the complaint. Grievance forms are available in the resident bookcase in the dining room.

The appropriate director or her/his designee shall investigate the complaint in a timely manner and make a finding. First priority for resolution will be given to actions which correct an unfair situation and educate offending parties as opposed to actions which are merely punitive. Investigations will include documented interviews of the person filing the grievance, the person(s) responsible for the alleged grievance, and any witnesses that either the resident or the alleged offender deem necessary. The investigator will document the interviews and present a written finding to the person filing the complaint

and the person(s) named in the complaint within five (5) business days of completion of the interviews.

A resident who makes a complaint in good faith is protected from retaliation for making a complaint. No punitive or disciplinary action shall be taken against the resident. However, residents who knowingly bring frivolous complaints will be subject to discipline.

### MAT Medication

Jeremiah's Inn does not discriminate based on the use of MAT (Medication Assisted Treatment), psych medications for mental health or pain medications. Residents on MAT MUST provide their own transportation. All medications must be pre-approved before admission into Jeremiah's Inn. MAT includes Vivitrol, Suboxone, and Methadone. If a client wishes for more information about MAT there are contacts available at these agencies for more information:

<b>Spectrum Health Systems</b>	<u>Cleanslate</u>	<b>Experience Wellness</b>
411 Chandler Street	585 Lincoln Street	121 Lincoln Street
Worcester, MA 01602	Worcester, MA	Worcester, MA 01605
(413) 341-1787	(800) 464-9555	(508) 890-0990

## What Is Medication-Assisted Treatment (MAT)?

Medication-assisted treatment (MAT) for opioid use disorder combines counseling and other recovery supports with prescribed medications. These medications help reduce cravings and withdrawal symptoms that come from stopping opioid use. The medications approved for MAT are methadone, buprenorphine, and naltrexone.

Three medications are currently approved for treating opioid problems:

- Methadone is a long-acting opioid medication that reduces cravings and withdrawal symptoms. It is usually taken by mouth in liquid form. It is dispensed to addiction treatment clients daily in single doses and only at certified opioid treatment programs. Methadone is highly effective for treating opioid use disorder, especially in people with extensive histories of drug use. Side effects of methadone include constipation, sexual problems, swelling, and sweating. It can also can cause heart problems or make them worse.
- **Buprenorphine** is usually taken daily and must be dissolved under the tongue or in the mouth. It comes in tablet form and as a film. Patients making satisfactory progress may receive a prescription for buprenorphine. It has proven to be very effective, although not more effective than methadone. For some people it may offer advantages. Risk of overdose is lower and withdrawal from buprenorphine may be milder. Buprenorphine is widely available in a formula that contains added naloxone, which discourages abusing or injecting it. Access to buprenorphine has helped many individuals seek treatment who otherwise might not have. Some common side effects are headache, nausea, and constipation.
- Naltrexone blocks the ability of opioids to eliminate pain and induce euphoria. This removes the rewarding aspects of opioid use that result in a desire for more. Reduced cravings make it easier for people not to use. Naltrexone does not help with withdrawal symptoms, and cannot be started until seven to ten days after the last opioid use. It is available in an extended release injectable form that lasts 30 days. Overdose risk is high for people who use large amounts of opioids while taking naltrexone and for those who return to opioid use after a period of taking naltrexone, due to a decrease in tolerance.

How can medications help? People use medications to help manage many health problems, such as diabetes, cigarette smoking, or high cholesterol. Medications can help people get started while they make the lifestyle changes necessary for long-term recovery. Medications for opioid use disorder can decrease cravings or withdrawal symptoms and reduce the stress of extreme highs and lows. Some people recover from opioid use disorder without medications. Others find that medications help them to make the changes needed to build a life in recovery.

Is it right for me? Because MAT involves prescribed medications, it is not for everyone. Some medications are unsafe for people with certain health conditions or for women who are pregnant. Some work well for some people and do not work for others. The more you talk over your health concerns about MAT with your doctor or treatment provider, the more help they can offer. Before you make a decision about whether MAT is right for you, it is important to discuss your concerns with professionals experienced in MAT. They will let you know about the risks, treatment options in your area, and requirements for successfully completing treatment. Think of your provider as an expert on what has worked for others. You are the expert on what is best for you and your situation.

**Health conditions:** Your provider needs to know about all your health conditions and the drugs you use. All medications involve some degree of risk but sharing this information can help avoid harmful drug interactions and minimize other health risks. You and your primary care provider can go over the risks and benefits in light of your situation.

Using medications safely: MAT involves taking powerful prescription drugs, storing them properly, following instructions carefully, and working with your provider to get the dose right. All medications should be stored in a locked cabinet out of reach of children or pets. Medications should only be taken by the person for whom they were intended. Doses tolerated in some individuals can cause serious harm to others, or even fatality to children or pets. Excess medication should be disposed of properly. MAT for people with HIV/AIDS or chronic hepatitis: People with liver disease should check with their doctors before deciding to use naltrexone or buprenorphine. Very large doses of naltrexone can cause liver damage, but studies show the recommended dose has been used safely, even with people being treated for Hepatitis C (HCV). Liver function tests are recommended before beginning buprenorphine, since there is a possibility it could contribute to liver damage, especially in people with liver disease. But, many people with HCV have been safely treated with medications for opioid use disorder, even while they were taking interferon and other medications. People with HIV/AIDS have also been treated safely with medications for opioid use disorder and sometimes benefit from the additional structure and support they receive in opioid treatment programs. They also should check with their medical providers. Medication interactions may occur and sometimes require dosage adjustments for people taking a combination of anti-viral medications as part of their HIV treatment regime. Availability: Access is an important issue for people thinking about starting MAT. Methadone is only available at state- and federally-regulated opioid treatment programs that require daily visits for dosing. Some people do not live close enough or cannot realistically arrange transportation nearly every day. Private physicians trained and certified to prescribe buprenorphine can offer 20 office-based treatment for opioid use disorder. Patients usually need to see their doctor frequently during the initial weeks of treatment with buprenorphine, but if they make good progress, their doctor can prescribe a take home supply of buprenorphine, often for up to a month. Any qualified medical professional can administer an extended release long-acting naltrexone injection once a month or prescribe it in pill form to take daily. This includes a nurse practitioner or a physician's assistant.

## **Social Service Agencies/Hospitals**

Adcare (508) 799-9000

Adult Learning Center/ Worcester Public Schools (GED, English as 2<sup>nd</sup> Language, etc.) (508) 799-3170

AIDS Project Worcester (508) 755-3773

Center for Living and Working – Disabilities Services (508) 798-0350

CHL Detox (508) 860-1200

CHL Emergency Mental Health/Crisis 1-800-977-5555

CHL Homeless Outreach Advocacy Program (HOAP) (508) 860-1080

Counseling and Assessment Clinic - 38 Front Street 5th FL (508) 756-5400

Father's Group - Chris Nelson - Pernet Family Health - 237 Millbury Street (508)-755-1228

South Bay Mental Health Intake (508) 427-5362

Spectrum Intense Outpatient – Lincoln Street (508) 854-3320

Triage and Assessment Center – 25 Jacques Avenue (508)-757-0103

UMASS – Emergency Mental Health 55 North Lake Avenue (508) 856-3562

UMASS Medical Center Main Number (508) 334-1000

YMCA (508) 755-6101

## **Government Agencies**

Department Transitional Assistance – 9 Walnut Street -(508) 767-3100

Department of Children & Families (DCF) 121 Providence Street (508) 929-2000

Disability Determination Service/Social Security Administration 1-800-551-5532

Food Stamp Office 1-800-645-8333

Massachusetts Rehab Commission (508) 754-1757

Workforce Central/Unemployment 44 Front Street (508) 799-1600

Worcester Housing Authority Belmont Street (508) 635-3000

## **Health Clinics/Centers**

Family Health Center – 26 Queen Street (508) 860-7700

Edward Kennedy/Great Brook Valley Health Center (508) 852-1805

# **Emergency Resources**

### **Detox**

-	Adcare	(508) 799-9000
-	Spectrum	(508) 898-1570
_	Thayer (CHL)	(508) 860-1200

# **Mass State Agency**

- Mass Health Enrollment	(800) 332-5545			
- Mass Health Customer Service	(800) 841-2900			
Other Important Numbers				

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## **Community Resources**

Abuse

Mass. Dept. Children and Families (DCF)

121 Providence Street Suite 200 (508) 929-2000

UMASS Memorial Medical Center University Campus (508) 334-1000

UMASS Memorial Medical Center Memorial Campus (508) 334-1000

Clothing

Little Free Store 70 Piedmont Street (508) 831-7455

Salvation Army (508) 799-0528

St. Vincent de Paul 507 Park Ave (508) 752-4232

Crime / Fire

Emergencies 911

Worcester Police Dept. (508) 799-8600

Worcester Fire Dept. (508) 799-1816

**Crisis / Suicide Intervention** 

Emergency Mental Health (508) 856-3562

55 North Lake Avenue

**Disabilities** 

Center for Living and Working (508) 798-0350

EMH-CHL 1-800-977-5555

**Employment & Training** 

Adult Learning Center/Worcester Public Schools/GEDS (508) 799-3170

Disability Determination Service1-800-551-5532Mass Rehab Commission(508) 754-1757Work Force Central(508) 799-1600

Food

DTA (508) 767-3100

Food Stamps (800) 645-8333

Health

AIDS Project Worcester (508) 755-3773

STD Testing (Planned Parenthood) (508) 854-3300

TB Testing (M.A. DPH) (508) 792-7880 YMCA (508) 755-6101

Mass Health (800) 332-5545

Medicare / SHINE (Council on Aging) (800) 244-3032

#### **BSAS**

### Bureau of Substance Abuse Services

#### KNOW YOUR RIGHTS

You have many rights under 105 CMR164.079 related to your care. There are also 'rules' describing how treatment should be provided. You are encouraged to contact the Department of Public Health, Bureau of Substance Addiction Services (BSAS) to report any potential violations of these rights or rules.

- · If a provider completes an assessment and determines that this is not the right level of care for you, the provider must make a referral to the appropriate level of care and support you through the referral process.
- · You cannot be denied admission based only on the results of a drug screen.
- · You cannot be denied admission only because of a medication prescribed to you by a physician. This includes medications such as methadone, buprenorphine, naltrexone, and other medications prescribed for substance use disorder, mental health, or other medical conditions.
- · You cannot be denied re-admission to a program based solely on one of the following happening when you were in the program:
- (1) you left treatment against medical advice;
- (2) you relapsed while in treatment; or
- (3) you filed a grievance or complaint either to the program or to the Bureau of Substance Addiction Services regarding any aspect of your treatment.

IF YOU THINK YOUR RIGHTS OR THE ABOVE RULES AROUND TREATMENT HAVE BEEN VIOLATED, PLEASE CALL THE

BSAS CONFIDENTIAL COMPLAINT LINE AT

(617) 624-5171

## **Family Support Services**

Jeremiah's Inn understands that addiction does not only impact the individual, but the family and loved ones are often impacted as well. It is often beneficial for the family to be included in the recovery process. By incorporating the support and understanding of the family into the treatment plan, in an informed, healthy and positive way we hope to improve your ability to achieve long term success. We will assist the resident and their family with opportunities for education, collaboration and integration by providing referrals and supports. We encourage you to incorporate your family into your treatment plan and offer the following supports, referrals and tools to help meet your treatment goals.

- Upon admission our treatment team will encourage all residents to utilize the support services and family integrtion program with their family (wife, partner, son, daughter, mother, father, and siblings) as part of their treatment plan.
- All residents who choose to participate in family support services will be provided with referrals to one or more of our partner/collaborating agencies, or any other agency of choice; for example: Baker Mental Health for individual, family, and couples counseling, Pernet Family Services for parenting and family education and resources, Learning to Cope for family support groups, and other agencies offering related services such as Worcester Community Connections /YOU Inc., South Bay, Al-Anon/Nar-anon, etc. or others as identified based on the specific needs of the family.
- Various resource guides, listings and education materials available as needed.
- We will work with the Dept. of Children and Families for residents that have open cases or if referral is requested.
- We will accommodate case management meetings that incorporate the family, in an effort to educate, mediate and include the family in the treatment and aftercare plans.
- Case managers and their client will continue to work on family re-unification and integration as the resident moves up in the different phases of our program.
- Residents will be offered overnight passes with family member(s) as appropriate.
  - o One monthly for the first 3 months.
  - o Four overnights weekly during fourth month.
  - o Two overnights and 2 weekend passes during the fifth month.
  - Weekend passes during sixth month
- On-site visits: All residents will be offered use of our private conference room for any family visits they may have scheduled during visiting hours. (also see visitors policy).
- Jeremiahs Inn clinical treatment team will be available 7 days a week for family interventions and during visiting hours.

## Useful Websites, Links and Resources for Residents and their Families:

## Worcester Community Connections (a You Inc. affiliate) WCC

"WCCC is a parent led coalition that works to improve access to local services for Worcester families. [They] are involved in a multitude of family support activities including:

- Linking families to needed services & helping them advocate for the services they need
- Creation of task-forces to address gaps in services and other problems impacting families
- Meetings where parents can offer one-another mutual support
- Parent workshops & educational trips

In our meetings we provide food, childcare and the opportunity to make new friends!! Come and see what we're about!! Our services are FREE and available to families living in Worcester and its surrounding towns."

- WCC website address: http://worcestercommunityconnections.org/
- Worcester Connections Family Resource Center, classes & events schedule: <a href="http://worcestercommunityconnections.org/activities/calendarOfEvents.html">http://worcestercommunityconnections.org/activities/calendarOfEvents.html</a>
- GED (HISET)/ESL Resource Guide: http://worcestercommunityconnections.org/ESOL.pdf
- Support Group Resource Guide: http://worcestercommunityconnections.org/supportgroups418.pdf
- Program Guide /Children w/ Special Needs
   :http://worcestercommunityconnections.org/32017.pdf
- Mentoring Program Guide: http://worcestercommunityconnections.org/mentoring2018.pdf
- Employment Guide: http://worcestercommunityconnections.org/employment.pdf
- Mental Health Resource Guide: http://worcestercommunityconnections.org/mentalhealth2017.pdf

## YOUInc.

"Through a broad array of services [YOU Inc.] offers support and care to you and/or your child, matching you with the right professionals. From working with you in the community or your home, in early childhood services, individual & family therapy, outpatient counseling or college success and transitional-age support, and with out-of-home care when needed, we've got you covered. Please reach out now for someone to help guide you."

- YOUInc. website: www.YOUinc.org
- YOUInc. referrals: <u>1-855-4YO-UINC</u> or <u>centralreferral@youinc.org</u>

## **Other Resources**

- Mass 211 website: www.mass211.org
- Family Resource Centers website: www.frcma.org
- Mass Housing website: www.masshousing.com
- Mass Legal Help / Children & Families www.masslegalhelp.org/children-andfamilies
- Community Legal Aid website: www.communitylegalaid.org
- Worcester Community Housing Resource website: https://www.wchr.org

## Personal Property Pick-up Authorization Form

If a resident authorizes another person to pick up his property, that person must present this form as well as a picture ID at the time of pick-up.

Personal possessions brought on site are the sole responsibility of the owner and not Jeremiah's.

Personal property abandoned without notification shall be tagged and stored for 14 days. Within the 14 day period, abandoned property may be claimed, but only between the hours of 10:00 A.M. and 4:00 P.M. Monday through Friday with a 24 hour notification to office staff.

Unclaimed property shall be discarded after 14 days		
, do hereby authorize		
•		
to pick all of my		
at		
(Time)		
his / her actions.		
<b>.</b>		
Date:		