



Client Handbook: Residential Treatment Program

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MISSION STATEMENT

The mission of Heartland Recovery, Inc. is to provide comprehensive, safe, cost-effective substance abuse treatment that improves the quality of life of the people we serve through a caring attitude and a dedication to excellence in all that we do.

VISION STATEMENT

Our vision is to be recognized for outstanding services to those we serve as we assist them in setting new standards and methods to maintain drug-free living.

WHAT TO EXPECT

While you are a client at Heartland Recovery, you can expect to participate in a variety of medical and clinical assessments and activities, including the Residential Programming schedule. Our staff is comprised of a Medical Director, Clinical Director, Nurse, and Professional Team of Addiction Counselors.

You can expect to have an individualized treatment plan and discharge plan developed by our team of professional staff. You can also expect to participate in the development of your treatment and discharge plans.

Each client will be evaluated to allow our team members to assess what additional medical and clinical treatment needs a client may have so that appropriate referrals can be made, and a discharge plan developed.

Heartland Recovery strives to educate clients on the Disease of Addiction/Alcoholism; therefore, clients are expected to participate in all designated group activities and therapeutic sessions.

Phones

To assist in treatment and keep the focus on program tasks, cell phones are not allowed. Check the schedule for phone times or discuss the need for calls with your counselor.

COUNSELING & EDUCATION

Individual Counseling

Individual counseling sessions are held once a week at a minimum. Although we encourage clients to participate in group therapy, individual counseling is offered to assist in addressing personal issues. If you need to see your therapist more frequently, you may request additional meetings. Do your best to follow the suggestions. Your counselor is there to listen to your concerns and act as your advocate.

Family Therapy

Addiction is a family disease. As your family adapted to your behavior(s), they too became sick. The family counselor will work with you to determine which family members will best benefit from the education and family therapy session. The family group will be held once per month.

Small-Group Therapy

You will meet with other members in the group to discuss specific issues related to addiction as well as topics specific to your life and belief system. Group Therapy is the core of your program, so it is important you attend each session and invest as much of yourself as possible.

Lectures

Different staff members may present diverse lectures at specified times during the week. Topics will cover many aspects of recovery, such as causes of addiction, family roles, principles of recovery, spirituality, social skills, relationship issues, living skills, and more. Education is important, but it is not enough. You must take what you hear and internalize it. When it is internalized, you will act differently.

Films

While in treatment you may see different films. Some will be in an information format; others will be dramas. Films are provided as an aid in understanding addiction and how it has impacted you and those around you.

Education

Bring required/requested materials to the Education Group. Be on time for all groups!

Small-Group Guidelines

1. Be on time for the group – you need to be in a group whether your therapist is there or not.
2. No gum, candy, or drinks in the group, cough drops are allowed but tell your counselor before meeting you need them, wait until break if possible.
3. No cross-talk in the group while others are presenting.
4. Each group member is expected to give feedback to peers about the work presented. Regardless of time here, every person will provide some form of feedback, positive and adverse.
5. Group members are expected to bring community issues concerning small group members to light in a small group.
6. You will not discuss peer information outside of the group with anyone other than the peer. It is appropriate to confront a peer on addictive and inappropriate behaviors outside the group. Never discuss sensitive information (rape, sexual molestation, abuse, or crimes committed) outside of a group setting.

Support Groups

The 12-Step Meetings are a component of this program. In the long run, your recovery will depend on your willingness to make yourself part of the fellowship of men and women who "come together to share their experience, strength, and hope." If you want to remain clean and sober, you may have to make a continued, lifelong goal to attend meetings.

AA was founded over 70 years ago, and over the years, a similar group has started based on their 12-step approach. Why? Because it has shown to be the most successful treatment for addiction!

Clients are expected to attend AA meetings.

Activities

Exercise and recreation are important parts of your recovery. These activities will help you to begin to feel better, both physically and mentally. These activities will also help you learn cooperation, sharing, decision making, and how to have fun without drugs and alcohol. Because in the end, if one does not learn to have clean and sober fun, one will not remain sober.

AA/NA Sponsor Guidelines

1. Your sponsor must be active in AA/NA.
2. The sponsor should have experience working the steps and presently practice these steps in their daily life.
3. Your sponsor should have a sponsor and be working the steps with their sponsor.
4. Your sponsor should not be a staff member, relative, or close friend of yours.
5. The sponsor has to be the same gender.
6. A permanent sponsor should live close enough vicinity to you for it to be practical to call and see them regularly.
7. There are 12 steps, and you need to work all of them with your sponsor.
8. Your sponsor needs to know everything, and you need to be willing to follow their suggestions, especially when you do not want to.

Community Group

1. Clients will be required to participate in therapeutic community group by coming up with two "Pull Ups" and one "Prop Up" per week and presenting these to the individual and group with staff present.
2. Format is ("**When you are...** 7 Deadly Sins/Virtues List, **I feel...** Primary Emotions List")

CLIENT SCHEDULE

Residential treatment is 24 hours a day, 7 days a week. All activities are mandatory. All clients are expected to show up and participate in scheduled activities unless excused by medical. Group will begin promptly as scheduled:

HEARTLAND PROGRAMMING SCHEDULE

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	WEEKEND SCHEDULE	SATURDAY	SUNDAY
6:30 AM	WAKE UP	WAKE UP	WAKE UP	WAKE UP	WAKE UP	7:00 AM	WAKE UP	WAKE UP
6:30 AM - 7:15 AM	CLEAN/DESS	CLEAN/DESS	CLEAN/DESS	CLEAN/DESS	CLEAN/DESS	7:00 AM - 8:00 AM	CLEAN/DESS	CLEAN/DESS
7:15 AM - 8:00 AM	BREAKFAST/MED PASS	BREAKFAST/MED PASS	BREAKFAST/MED PASS	BREAKFAST/MED PASS	BREAKFAST/MED PASS	8:00 AM - 9:00 AM	BREAKFAST/MED PASS	BREAKFAST/MED PASS
8:00 - 8:30 AM	YOGA AND MEDITATION GROUP	YOGA AND MEDITATION GROUP	YOGA AND MEDITATION GROUP	YOGA AND MEDITATION GROUP	YOGA AND MEDITATION GROUP	9:00 AM - 9:45 AM	COUNSELOR EDUCATION	NURSING EDUCATION
8:30 - 8:45 AM	BREAK	BREAK	BREAK	BREAK	BREAK	9:45 AM - 10:00 AM	BREAK	BREAK
8:45 AM - 10:45 AM	SMALL PROCESS GROUP	SMALL PROCESS GROUP	SMALL PROCESS GROUP	SMALL PROCESS GROUP	COMMUNITY GROUP (SEE FAMILY DAY SCHEDULE*)	10:00 AM - 12:00 PM	FACILITY CLEAN	SPIRITUALITY
10:45 AM - 11:00 AM	BREAK/SNACK	BREAK/SNACK	BREAK/SNACK	BREAK/SNACK	BREAK/SNACK			
11:00 AM - 12:00 PM	HORTICULTURE GROUP	HORTICULTURE GROUP	HORTICULTURE GROUP	HORTICULTURE GROUP	GENDER SPECIFIC GROUP (MALE AND FEMALE)			
12:00 PM - 12:45 PM	LUNCH/MED PASS	LUNCH/MED PASS	LUNCH/MED PASS	LUNCH/MED PASS	LUNCH/MED PASS	12:00 PM - 1:00 PM	LUNCH/MED PASS	LUNCH/MED PASS
12:45 PM - 1:45 PM	STEP GROUP	STEP GROUP	STEP GROUP	RELAPSE PREVENTION	ART AND MUSIC THERAPY	1:00 PM - 2:00 PM	FREE TIME	FREE TIME
1:45 PM - 2:00 PM	BREAK/SNACK	BREAK/SNACK	BREAK/SNACK	BREAK/SNACK	BREAK/SNACK			
2:00 PM - 3:00 PM	RECREATION	RECREATION	RECREATION	RECREATION	RECREATION (FAMILY DAY ENDS*)	2:00 PM - 3:00 PM	RECREATION	VISITATION/RECREATION 2:00 PM - 4:00 PM - SUNDAY FAMILY VISIT
3:00 PM - 5:00 PM	FREEPHONE TIME	FREEPHONE TIME	FREEPHONE TIME	FREEPHONE TIME	FREEPHONE TIME	3:00 PM - 5:00 PM	FREEPHONE TIME	FREEPHONE TIME
5:00 PM - 5:45 PM	DINNER	DINNER	DINNER	DINNER	DINNER	5:00 PM - 5:45 PM	DINNER	DINNER
5:45 PM - 6:00 PM	CLEANUP	CLEANUP	CLEANUP	CLEANUP	CLEANUP	5:45 PM - 6:00 PM	CLEANUP	CLEANUP
6:00 PM - 7:00 PM	SMART/AA/NA GROUP	SMART/AA/NA GROUP	SMART/AA/NA GROUP	SMART/AA/NA GROUP	SMART/AA/NA GROUP	6:00 PM - 7:00 PM	SMART/AA/NA GROUP	SMART/AA/NA GROUP
7:00 PM - 7:15 PM	BREAK	BREAK	BREAK	BREAK	BREAK	7:00 PM - 7:15 PM	BREAK	BREAK
7:15 PM - 8:00 PM	MED PASS	MED PASS	MED PASS	MED PASS	MED PASS	7:15 PM - 8:00 PM	MED PASS	MED PASS
8:00 PM - 8:30 PM	NIGHTLY REVIEW	NIGHTLY REVIEW	NIGHTLY REVIEW	NIGHTLY REVIEW	NIGHTLY REVIEW	8:00 PM - 8:30 PM	NIGHTLY REVIEW	NIGHTLY REVIEW
8:30 PM - 10:00 PM	ASSIGNMENT/SITV/FREE TIME	ASSIGNMENT/SITV/FREE TIME	ASSIGNMENT/SITV/FREE TIME	ASSIGNMENT/SITV/FREE TIME	ASSIGNMENT/SITV/FREE TIME	8:00 PM - 11:30 PM	MOVIE/NIGHT	GAME NIGHT
10:00 PM	LIGHTS OUT	LIGHTS OUT	LIGHTS OUT	LIGHTS OUT	LIGHTS OUT 12:00 AM	LIGHTS OUT 12:00 AM	LIGHTS OUT 12:00 AM	LIGHTS OUT 10:00 PM



UPDATED: 12/19/2023



CONTRABAND	
No Narcotic Medications	No Outside bedding, sheets, comforters
No Alcohol	No Hamper Bags
No Drugs	No tank tops or sleeveless tops
No Drug Paraphernalia	No swimsuits
No Knives	No short shorts
No Guns or Ammunition	No Towels
No Cellular Phones or any kind of Smart Watch	No Heating Pads/Electrical Blankets/Mattress Pads/Pillows
No Laptops or Tablets	No Metal Hangers
No Pagers, cameras or any other device that captures picture/video	No Dip tobacco (Non-tobacco nicotine pouches are allowed)
No Phone Cases or accessories	No Clothing Iron
No Super glue	No Hair Dryers
No Vape juice	No Hair Straightener
No Needles (unless approved medical)	No excessive amounts of makeup
No Picture frames (printed pictures are allowed)	No Vaporizer/Humidifier/Space Heater/A/C or Box Fans
No Scissors	No Keys
No Straight Razors	No Cologne or perfume
No Cash, Checks, or Credit Cards	No sewing kits
No Wallets	No Hair dyes
No Valuable jewelry	No candles or incense
No Torn or ripped clothing	No Pornography or illicit photographs
No Clothing that is revealing, inappropriate messages of drugs/alcohol or disrespectful to others	No Aerosol or pressurized containers of any kind (shaving cream, deodorant, etc.)

ITEMS TO BRING	
Casual clothing - gym clothes, tennis shoes, sandals (all shorts must be no shorter than 2" above the knee, undergarments)	Approved nicotine products (Only sealed disposable vapes are allowed, cigarettes, NO dip tobacco, only nicotine pouches)
Insurance card and ID	Rain gear
Large thermos cup	Shower Shoes
Non-Smart watch	Clothes hangers - Plastic only (optional)
Any prescription medications you are now taking (non-narcotic)	Printed pictures of loved ones (frames not allowed)
Personal Hygiene items (Razor (electric or disposable) Shave Gel (No Aerosol) Toothbrush, Toothpaste, Shampoo, Soap, Alcohol free Mouth Wash	Recovery Books
Doodling pads, colored pencils, sketchbooks	Word puzzles, Sudoku

FACILITY RULES & REGULATIONS

- 1. NO Drugs or Alcohol are permitted on facility grounds; no energy drinks are permitted.**
- 2. NO Weapons permitted on facility grounds**
- 3. NO Physical or Verbal Abuse will be tolerated.**
- 4. NO threats of violence will be tolerated.**
- 5. NO gambling or betting of any kind. Cards will be kept with other games and will be accessible only during recreation periods.**
- 6. NO excessive profanity or derogatory statements. Language should be appropriate.**
- 7. NO sexual relationships with other clients.**
- 8. NO smoking vaping or use of smokeless tobacco products inside the building. The use of these products is only to be performed in designated areas during break/free time. No cigars, hand-rolled cigarettes, or pipes that resemble drug paraphernalia. Smoking only in designated areas at designated times.**
- 9. NO outside food or drinks allowed in the building (no energy drinks allowed on Heartland Recovery property by clients). Food provided by Heartland must be consumed same day. Any food that is not individually sealed from the previous day must be discarded.**
- 10. NO cell phones allowed by clients.**
- 11. Clothing cannot contain messages regarding drugs, alcohol, sex, or violence. Clothing must fit appropriately and cover the body adequately. (See Dress Code).**
- 12. Clean/straighten up group room after session, all chairs, etc. should be returned to their proper place.**
- 13. Do not disrespect any member of Heartland Recovery Staff.**
- 14. Clients are to respect other's confidentiality (do not speak of anyone's personal business but your own. (It is a disease to gossip, and with this disease, gossip has the power to kill, don't be that person).**
- 15. Clients should raise their hand to signal to the counselor that you have something to share and wait for the counselor to call on you before speaking.**
- 16. Pick up garbage and cigarette butts outside. (Do not throw cigarettes on the ground).**
- 17. Clients must remain in designated areas before the group, on break, and when leaving the facility.**
- 18. Clients will submit to a drug screen, a search of property or person, at any time.**
- 19. Clients will be searched upon entering or returning back to the facility.**
- 20. Beds should be made at all other times.**
- 21. Hygiene items should be kept neat and organized.**
- 22. Clients are not allowed off the grounds unless authorized by staff and must sign in and out.**

STRIKE SYSTEM

The intention behind the strike system is to ensure accountability and enforcement of the rules that are outlined in the Heartland Client Handbook. Practical experience shows that receiving consequences for an individual's actions helps ensure that we make different choices in the future.

INFRACTION WORTHY CHOICES

- Use of tobacco products outside of designated smoking area.
- Being late to groups or meals.
- Being out of your room before wake-up time or after curfew.
- Raising voice or using vulgar language towards staff or clients.
- Being in other rooms besides your own, without staff approval.
- Not adhering to behavioral contracts.
- Leaving or disrupting groups.
- Not completing the daily disciplines (nightly) and/or **not taking step work seriously.**
- Refusing programming/Not bringing Big Book or materials to group.
- Zone work not completed to standard.
- Room inspections are completed 6:30am on weekdays and 7:00am on weekends

These expectations can change and are dependent on staff discretion. Infractions will be tracked weekly from Monday to Sunday. Clients will be notified by staff anytime they receive a strike. Strikes will be tracked both individually and tracked as a community.

CONSEQUENCES

- Early discharge and removal of a client from the program for non-compliance
- Removal or restriction of gym privileges
- Restriction of phone access
- Removal of smoking/tobacco privileges
- Writing assignments
- Removal of tv privileges
- Three infractions will result in a loss of phone calls for one week.
- Six infractions will result in loss of visitation privileges and phone calls.

DRESS CODE

- Clothing should be neat and fit appropriately.
- No saggy pants; all pants should fit at the waist.
- Shirts must cover the torso.
- No sleeveless clothing, except during rec time.
- No clothes with holes.
- No pajamas in the daytime hours.
- No clothing with references to drugs, alcohol, sex, or violence.
- While on facility grounds, you are expected to abide by all rules and regulations of the program.

VISITATION POLICY

CLIENTS ARE ELIGIBLE FOR FAMILY VISITORS TO COME AND BE A PART OF PROGRAMMING IF A CLIENT HAS BEEN HERE FOR AT LEAST TWO WEEKS AND IS ADHERING TO ALL HEARTLAND RULES AND POLICIES AND IS ULTIMATELY AT THE DISCRETION OF HEARTLAND'S TREATMENT TEAM.

RULES BEFORE VISITATION

1. ALL VISITATION IS HELD AT 212 CHURCH STREET.
2. VISITATION IS EVERY SUNDAY FROM 2PM-4PM FOR CLIENTS THAT ARE ELIGIBLE.
3. ALL CLIENTS ELIGIBLE FOR VISITATION MUST STAY IN THE DESIGNATED VISITATION AREA FOR THE DURATION OF VISITATION AND UNTIL ALL VISITORS HAVE LEFT THE FACILITY.
4. ALL VISITORS MUST LEAVE OUT THE NORTH DOOR (MAIN ENTRANCE, CIRCLE DRIVE) NO EXCEPTIONS.

RULES FOR VISITATION

1. All visitors must be approved by Heartland Recovery Team and have an active Release of Information on file.
2. Visitation is limited to 2 adults and 2 children per client (children must be accompanied by an adult at all times.)
3. Clients may not split their visit; visit must be continual.
4. Visiting is only allowed in designated visitation area.

VISITORS RULES

ANY VISIT MAY BE TERMINATED IF A CLIENT OR VISITOR VIOLATES THESE RULES.

1. No items are allowed to be handed to the client; any items brought in by visitors must be given directly to staff to be searched before being distributed to the client.
2. All visitors must agree to have person or additional personal belongings searched if requested.
3. NO CELL PHONES.
4. No purses or bags on site.
5. No smoking.
6. All visitors must be dressed appropriately.
7. Visitors with small children may not bring diaper bags into the facility. You may bring in the following: In a clear plastic bag or Ziploc bag:
 - 2 diapers
 - 10 wet wipes (in a clear Ziploc bag)
 - 1 plastic baby bottle or sippy cup
8. Visitors must abstain from inappropriate public displays of affection.
9. Once a visitor leaves the facility, he/she will not be allowed back inside the same visiting day.
10. Any person believed to be under the influence of drugs or alcohol will be denied entry.
11. Profane, obscene, vulgar, or abusive language, yelling, horse playing, or other disorderly conduct is not permitted, and the visit will be terminated.
12. NO CAMERAS ARE ALLOWED. Any camera found will be confiscated and NOT returned for any reason.

ANY VIOLATIONS OF THESE RULES OR NOT FOLLOWING THE INSTRUCTIONS OF A STAFF MEMBER MAY RESULT IN VISITATION BEING TERMINATED AND/OR INCLUDING CRIMINAL PROSECUTION. THANK YOU ALL FOR YOUR COOPERATION & ENJOY YOUR VISIT.

PHONE POLICY

- When you arrive at Heartland you may be eligible for a 5-minute phone call with your counselor at their discretion.
- Heartland believes in developing healthy boundaries, building self-sufficiency, and working to restore relationships while in treatment.
- Clients are not allowed a regular phone call until day 4 of treatment. (Admission date counting as day 1.) This is referred to as a “Blackout period.” This time is meant for clients to integrate into a therapeutic environment and begin using recovery tools in addition to allow family/friends the ability to receive resources and information from counselors on family programs.
- After the initial blackout period in order to use the phones, clients must sign up on the Phone Sign-Up sheet provided by staff that will need to be filled out and turned in by 12pm daily. If this form is not filled out by that time a client will not be eligible for a phone call that day.

Phone Call Rules

1. If the following rules are violated staff will terminate the call and revoke client’s phone call privileges.
2. All client’s calls will be monitored with a staff member present.
3. Any kind of harsh, cruel or abusive talk while using phones will be cause for phone/visitation privileges to be revoked.
4. No drop-offs of any kind are allowed and they must go through staff for approval.
5. Any discussion of AMA while using phones is prohibited and is also cause for revocation of phone privileges and should be shut down by staff immediately.
6. Clients may only use the 10 minutes allotted to call one individual on their Release of Information list per day. Clients are not required to use their full time.
7. If a person does not answer the phone initially when dialed out, a client may call someone else listed on their Release of Information (and Phone Sign Up-Sheet) or wait to try again.
8. If the family is unavailable or posted time has elapsed, a client must wait until the following day to call again.
9. Phone calls are only allowed during the 3:00pm-5:00pm call window, daily.

ALCOHOL AND DRUG TESTING POLICY

As this is a drug and alcohol treatment facility, you are expected to maintain complete and total abstinence from any and all potentially addictive chemicals, over-the-counter, scheduled or unscheduled (including but not limited to alcohol, alcohol-containing products, marijuana, tranquilizers, sedatives, stimulants, narcotics, opioids including Ultram(tramadol), Nubian, soporifics, androgenic steroids, synthetic drugs, opiate replacement therapies (Methadone, Buprenorphine, etc.) or any other addictive drug) except as prescribed for a legitimate medical condition by a healthcare provider who is knowledgeable in, and aware of your treatment for chemical dependency. You will be required to comply with both regular and random alcohol & drug tests. If selected for a screen, failure to provide a sufficient specimen for analysis or failure to test may be considered a positive screen. Any positive test will result in discharge from the program and a recommendation to a higher level of care.

CLIENT BILL OF RIGHTS

Under HIPAA and 42 CFR, Part II, you have the right to request restrictions on certain uses and disclosures of your health information. Heartland Recovery is bound by this agreement and may not use or disclose any information which you have restricted as necessary in a medical emergency.

You have the right to request that we communicate with you by alternative means or at an alternative location. Heartland Recovery will accommodate such requests that are reasonable and will not request an explanation from you. Under HIPAA, you also have the right to inspect and copy our own health information with the exception of psychotherapy notes for use in a civil, criminal, or administrative proceeding or in other limited circumstances.

Under HIPAA you also have the right, with some exceptions, to amend health care information in Heartland Recovery records, and to request and receive an accounting of disclosures of your health-related information made by Heartland Recovery during the six year period prior to your request. You also have the right to receive a paper copy of this notice.

A. In accordance with Title 6 of Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title 9 Section 10800, and Americans with Disabilities Act of 1990, each person receiving services from an alcoholism or drug abuse recovery or treatment facility, shall have rights which include, but are not limited to, the following:

1. The right to confidentiality as provided for Title 42, Code of Federal Regulations, Part 2 and HIPAA, and the right to receive the privacy notice.
2. To be accorded dignity in contact with staff, volunteers, board members, and other persons. You have the right to have your rights explained to you in simple terms, in a way you can understand within 24 hours admission, which can help in decision making.
3. To be accorded safe, healthful, and comfortable accommodations to meet the patient's needs. You have the right to a humane environment that provides reasonable protection from harm and appropriate privacy for your personal needs.
4. To be free from verbal, physical, emotional abuse, inappropriate sexual behavior or contact, financial or other exploitation, humiliation, retaliation, harassment, and neglect.
5. To be informed by the program of the procedures to file a grievance (without fear of retaliation) or appeal a discharge.
6. To be free from discrimination based on ethnic group identification, culture, sexual orientation, religion or spiritual beliefs or age, gender, skin color, socioeconomic status, language, or disability.
7. To have access to information pertinent within 48 hours in order to help facilitate his decision making.
8. To be accorded access to his/her file and the right to own the information within his or her file with the exception of psychotherapy notes.
9. The right to request corrections of erroneous and incomplete information.
10. The right to prohibit release of information or re-disclosure of patient information without written consent.
11. The right to request transmittal of communications in an alternative manner.
12. The right to obtain an accounting of disclosures.
13. The right to express preferences regarding counselor, service provider, and manner of service delivery.
14. Fiduciary abuse of participants is prohibited.
15. To be free from any marketing or advertising publicity without written authorization.
16. The right to the provision of services will be responsive to the participants' social support and legal advocacy needs when necessary.
17. If you agree to treatment, medication, you have the right to change your mind at any time (unless specifically restricted by law). You have the right to refuse unnecessary or excessive medication or treatment.

18. You have the right to accept or refuse treatment and concurrent services after receiving this explanation.
19. You have the right to appropriate treatment in the least restrictive setting available that meets your needs.
20. You have the right to be told about the program's rules and regulations before you are admitted. You also have the right to be told what is to be expected of treatment.
21. You have the right to be told before admission:
 - a. the condition to be treatment;
 - b. the proposed treatment
 - c. the risks, benefits, and side effects of all proposed treatments and medication;
 - d. other treatments that are available and which ones, if any, might be appropriate for you;
 - e. the expected length of stay;
 - f. the composition of the treatment team; and
 - g. what is to be expected of treatment
22. You have the right to a treatment plan designed to meet your needs, and you have the right to take part in developing the plan. You also have the right to meet with staff to review and update the plan on a regular basis.
23. To participate or refuse to participate in experimental search projects when the patient gives informed written consent to such participation.
24. You have the right to be told in advance all estimated charges and any limitations on the length of service of which Heartland Recovery is aware.
25. You have the right to receive an explanation of your treatment and/or your rights if you have questions while you are in treatment.
26. You have access to self-help and advocacy support services upon request.
27. The right to consult freely and privately with the patient's counsel or other legal entities.

B. For residential sites, the Patient Bill of Rights shall also include:

1. You have the right not to be restrained or placed in a locked room by yourself. If you become a danger to yourself or others, Heartland Recovery staff will call 911.
2. You have the right to communicate with people outside of Heartland Recovery. This includes the right to have visitors, to make telephone calls, and to send and receive mail. This right may be restricted on an individual basis by the medical director or clinical services director if it is necessary for your treatment or security, but even then, you may contact an attorney or the Louisiana Department of Behavioral Health at any reasonable time. If a patient's right to free communication is restricted under the provisions of this paragraph, the medical director or clinical services director will document the clinical reasons for the restriction and the duration if the restriction on the patient record. The clinical services director will also inform the patient and if appropriate the patient's consenter of the clinical reasons for the restriction and the reason for the duration of the restriction.
3. If you consented to treatment, you have the right to leave Heartland Recovery within four hours of requesting release unless a physician determines that you pose a threat of harm to yourself and others.
4. You have the right to pastoral and other spiritual services during your treatment.

C. Each participant shall review, sign, and be provided at admission, a copy of the participant rights specified in A1 through A28 above. The program shall place the original signed bill of rights document in the participant's file.

D. The provider shall post a copy of the participant rights in a location visible to all participants and the general public.

E. The follow-up after discharge cannot occur without written consent from the participant.

F. Any program conducting research using participants as subjects shall comply with all federal regulations for the protection of human subjects and adhere to all research guidelines and ethics. (Title 45. Code of Federal

Regulations 46.) However, you have the right to refuse to take part in research without affecting your regular care.

All reported allegations of infringement of patient rights shall be documented by a formal grievance and shall follow the Grievance Procedure process of investigation within 24 hours and resolution within seven days. In cases where legal or state agencies are involved, reporting shall take place only after a thorough investigation has taken place, and the allegations are supported by facts.

You can also contact the:

State of Louisiana, Department of Health & Hospitals/Health Standards
Complaint Program Desk
P.O. Box 3767
Baton Rouge, LA 70821
Phone number: (225) 342-0138
Fax: (225) 342-5073

CONFIDENTIALITY LAWS

All clients receiving substance abuse services are protected by law (42CFR, Part 2, and HIPAA) to have their personal and medical information kept confidential by the facility. Client confidentiality begins at the time of admission or inquiry into the facility. Client confidentiality does not expire even following death.

Client confidentiality can be breached by the facility under the following conditions:

1. Client has signed a written Release of Client Information, identifying person(s) to whom the information is to be released
2. Client is a danger to self
3. Client is a danger to others
4. Court-Ordered Subpoena
5. Report of abuse/neglect against a minor child, elderly person, or dependent adult

CLIENT COMPLAINT/GRIEVANCE PROCEDURE

It is the policy of Heartland Recovery that every effort shall be made to resolve a client's complaint in a fair and equitable manner and that all client complaints will be investigated and resolved promptly in accordance with the Louisiana Department of Health and Hospitals.

Please follow the below directions when you have a complaint:

1. Inform your counselor of your complaint/grievance. He/she will assist you in resolving the issue(s) involved in the complaint/grievance.
2. If your counselor is not available, please inform the staff-on-duty of your complaint/grievance. He/she will assist you in resolving the issue(s) involved in the complaint/grievance.
3. If you believe that your complaint/grievance was not addressed or resolved in an appropriate, timely manner, you may request to file an official complaint/grievance.
4. You may ask for a complaint/grievance form from your counselor (or staff member-on-duty when counselor is unavailable).
5. Please fill out the complaint/grievance form completely, place it in a sealed envelope provided, and turn it in to your counselor (or staff-on-duty when your counselor is not available).
6. Complaint/grievance will be given to the appropriate administrative personnel for investigation.
7. Note: A complaint/grievance can always be filed directly with the Department of Health and Hospitals via mail at the address below:

State of Louisiana, Department of Health & Hospitals/Health Standards
Complaint Program Desk
P.O. Box 3767
Baton Rouge, LA 70821
Phone number: (225) 342-0138
Fax: (225) 342-5073

STATEMENT OF CONFIDENTIALITY

By participating in the program and/or by your presence at this facility, you will be privileged to certain confidential information regarding clients involved in the program.

Confidentiality is a right entitled to each client and begins at admission or upon the making of a request for admission. Any and all information imparted to you during the time that you are at this facility and/or your knowledge of any person or persons here is strictly confidential. The privacy of our clients and their rights to be treated with total confidentiality is protected by law. The disclosure of any information pertaining to a client and their treatment may be in direct violation of Federal Regulations and may be punishable by fine or imprisonment or both.

MEDICAL REQUEST FORM

CLIENT'S NAME			
DATE			
CHECK ONE	This request is a non-emergency		
	This is a request is for emergency medical attention		
BRIEFLY Describe the nature of your request for medical attention			
Client's Signature			
FOR STAFF USE ONLY			
STAFF MEMBER			
DATE RECEIVED			
TIME RECEIVED			
MEDICAL EVALUATION / ACTION(S) TAKEN			
Signature of Staff		Date & Time	
Follow-up comments			

Counselor Request Form

Client Name: _____

Date: _____

These forms are only accepted during morning process group.

Counselor Signature: _____

Counselor Request Form

Client Name: _____

Date: _____

These forms are only accepted during morning process group.

Counselor Signature: _____

STEP 1 ASSIGNMENT

Step 1

“We admitted we were powerless over alcohol – that our lives had become unmanageable.”

THIS ASSIGNMENT IS DUE ONE WEEK FROM TODAY.

1. What does the doctor believe about the medical approach to helping addicts & alcoholics?
2. What are 2 abnormal things about the addict & alcoholic?
3. What is the doctor's theory?
4. How does the doctor view *Recovered* alcoholics & addicts?
5. Is it important that we be clear minded before we begin to apply a solution to our life? Why?
6. What's the explanation of the doctor about the addicts & alcoholics body? Does this happen to everyone? Can outside circumstances or people make an addict/alcoholic recover? Explain.
7. What message can get the attention of an addict & alcoholic?
8. Describe the cycle of addiction/alcoholism. Use a diagram if necessary.
9. According to the doctor, what must happen for you to recover?

10. According to the doctor, are doctors best suited to help chronic alcoholics/addicts? Why?
11. Is addiction/alcoholism a problem of mental control? Why?
12. What are the 5 types of users/drinkers? Which one do you think you are?
13. What is the one symptom all users/drinkers have in common?
14. What is the general opinion of addicts/alcoholics from a medical standpoint?
15. What does the doctor believe is the only hope for the hopeless?
16. Can hopeless addicts/alcoholics recover?
17. Do you think you can recover? Explain.
18. What binds us? Is that enough to keep us together?
19. What is our common solution?
20. Is alcoholism/addiction an illness?
21. What can the ex-problem drinker do when he is properly armed with the facts about himself?
22. What attitude makes us more helpful to others?

23. What are the 3 different types of drinkers? How are they different?
24. What happens to a real alcoholic/addict once he starts to drink or use?
25. What are we equally positive about?
26. Where does the main problem of alcoholic center?
27. What is likely to happen if you ask him why he started on his last bender? Is this reasoning plausible?
28. What happens at a certain point in the drinking career of every alcoholic/addict?
29. What is a fact for most alcoholics/addicts? What are we unable to do?
30. Is there a solution? Did we, who have recovered, like it? What is it? Explain in detail.
31. What are your two alternatives?
32. Above all, what did the American businessman believe? Nevertheless, what happened?
33. According to the doctor, what do these vital spiritual experiences appear to be?

34. If what we have learned, felt, and seen means anything at all, what does that mean?
35. What is our hope for many alcoholic men & women?
36. What have most of us been unwilling to do? Why?
37. What is the idea of most alcoholics? What do they usually do with it?
38. What did we learn? Why was this so important?
39. What is no alcoholic able to do? What were the intervals followed by?
40. Of what are we convinced? What always happens?
41. What happens despite all we can say? Why?
42. What challenge does the book offer to diagnose yourself?
43. What do we believe about our early drinking careers? What's the difficulty?
44. What delusional belief did the businessman fall victim to? What happened to him?
45. What needs to happen if we plan to stop drinking?

46. What doesn't need to happen to be gravely affected by alcohol?
47. What is the second challenge the book offers if someone questions whether they can quit with their own willpower?
48. What's the baffling feature of alcoholism?
49. What did Jim fail to do, and what happened because of it?
50. What does the book define as plain insanity?
51. Our justifications for our sprees were what? What do we now see?
52. We, who have been through the wringer, have to admit what? However intelligent we are in other respects, we've been what, where alcohol is involved?
53. The actual or potential alcoholic, with hardly an exception, will be what?
54. What did Fred see wouldn't help in those strange mental blank spots?
55. The alcoholic at certain times has what? Where must his defense come from?

Step One Personal Questions

As you read, answer the personal questions below. These are included in your Step 1 assignment.

1. Have you ever had any ominous warnings about your drug use/drinking? Explain.

2. What are some of the reasons you used to justify your drinking/using?
3. How did your drinking/using progress? What consequences did you suffer?
4. Have you lost friendships or family because of your alcoholism/addiction? Explain.
5. Have you ever done things you regret doing on drugs/alcohol? Explain.
6. Were there times in your life where drinking/using worked? Explain.
7. Did drinking/using stop being a luxury and become a necessity? Explain.
8. Have you ever stayed clean/sober for a period of time? If so, how long? Did you relapse, get better, or worse? Explain.
9. Describe the thoughts leading up to and immediately after your relapse (If applicable).

10. List all the different ways you have tried to stop, moderate, or substitute your addiction/alcoholism. Did it work?
11. How long have you known that drugs/alcohol have been a problem in your life?
12. Did self-knowledge (knowing you were an alcoholic/addict) stop you from doing it again?
13. Have you ever felt loneliness, despair, and self-pity? Explain.
14. Have you ever felt resigned to a drug addicted/alcoholic miserable life?
15. Who has it affected in your life?
16. Do you honestly know why you return to drinking/using even though you know it always causes you problems?
17. Can you stay stopped for good and all on your own?
18. Is alcoholism/addiction about will power?

19. How many times have you tried to remember the consequences of your drinking/using as a means to stop? Has it worked? Explain.
20. Do you have the desperation of a drowning man that you will grab onto anything that looks like it might stop you from drowning?
21. Can you control and enjoy the number of drinks/hits you take every time you start?
22. List 5 specific times in your own personal drinking/using careers that you've experienced the phenomenon of craving.
23. List 5 specific times in your own personal drinking/using careers that you've experienced the mental obsession.
24. How long have you been trying to drink/use successfully? Have you accomplished this?
25. If you look honestly at your alcoholism/addiction, has it been getting progressively better or worse? Explain.

26. What are all the methods you have tried to drink or use like other people?

27. What is the longest time you have ever been able to remain sober/clean?

28. Because alcoholism/addiction is an illness, does it really matter how old you are or how many consequences you have suffered in comparison to other people? Explain.

29. What are some of the bizarre excuses you have used to justify why you started again after a period of sobriety?

30. Does the jaywalker story apply to you? Explain.

31. Have you ever, after a period of sobriety, returned to it without any thought at all? Explain.

32. Write the stages of the cycle of addiction as described in The Doctor's Opinion using diagram.

Cycle of Addiction

