



**GAUDENZIA**

**SIENA HOUSE  
D&A**

**ORIENTATION  
HANDBOOK**

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# WELCOME

Dear New Client,

Welcome to the Gaudenzia Siena House Family....

Folklore has it that Gaudenzia was a courageous mare, from a town in Italy near Siena, who had been a farm cart horse. She was chosen to ride the colors of one of Siena's 17 contrade, or neighborhoods, in the town's annual race. Gaudenzia the horse became the inspirational symbol of courage, determination, and the willpower to rise above adversity.

At Siena House, regardless of your past, we believe you can overcome great obstacles, pain, and adversity. Through the community of Siena House, you can begin to reverse the cycle of the criminal/addictive lifestyle and start living a healthy, productive, responsible and satisfying life. With effort, your pain and struggle can become a source of joy.

We are here to help you and remind you that not until we confront ourselves and share our secrets can we start to change, can we start to grow, can we start a new beginning.

Sincerely,

*The Staff of Gaudenzia Siena House*

## **GAUDENZIA PHILOSOPHY**

We are here because there is no refuge, finally, from ourselves.  
Until people confront themselves in the eyes and hearts of others, they are running.  
    Until they suffer others to share their secrets,  
        they have no safety from them.  
Afraid to be known, they can know neither themselves nor any other; they will be  
    alone.

Where else but in our common ground can we find such a mirror?  
    Here, together, people can at last appear clearly to themselves.  
Not as the giant of their dreams, nor the dwarf of their fears, but as individuals,  
    part of a whole, with a share in its purpose.  
In this ground we can each take root and grow,  
    Not alone anymore as in death,  
    but alive to ourselves and to others.

## **HISTORY of GAUDENZIA, INC.**

“Gaudenzia” was the name of a horse which raced in Siena, Italy. During the race, Gaudenzia stumbled, fell to the ground, but got up and won the race, despite injury!!!

Gaudenzia, Inc. is a statewide private non-profit Human Services agency which was created in 1968 to assist individuals to overcome their struggles with substance abuse. Gaudenzia began as a mutual support community – a group of people who, through the basic assumption that sticking together would give them the strength and resolve to stop using drugs, were trying to recover from addiction through their unity and support of one another. Back then, there was little distinction between staff and residents. The senior residents ran the program – they were the people who had been around long enough to feel secure in their own recoveries and had gained enough knowledge to manage the facility. Since then, Gaudenzia has gained acceptance due to the effectiveness of treatment services, and now has a network of services so diverse, virtually anyone in need can receive help for their individual substance abuse problems. The Gaudenzia approach is a humanistic one relying on self-help and community involvement.

Siena House is licensed by the Department of Drug and Alcohol Programs (DDAP), and is accredited by The Commission on Accreditation of Rehabilitation Facilities (CARF) and The American Correctional Association (ACA).

## **CONFIDENTIALITY of SERVICES**

Siena House complies with all federal and PA state statutes (including HIPPA) protecting the privacy of the clients it serves. No information concerning any client, including acknowledgement of presence in treatment, may be released without written authorization from the client. Please note that Probation and Parole are specifically exempt from this requirement. A standard release of information form is utilized for this purpose.

## **PROGRAM PHILOSOPHY**

The Gaudenzia Siena House program was established to meet the treatment needs of individuals seeking recovery from chemical dependency utilizing the Therapeutic Community (TC) treatment modality, which is uniquely suited for criminal justice populations. The Staff believe that chemical dependency is progressive, incurable, and irreversible. We also believe that chemical dependency can be arrested, and that through sobriety, the recovering individual can lead a productive, responsible and satisfying life.

Siena House's purpose is to re-direct the chemically dependent individual away from self-destruction towards a better life starting with abstinence from all substances. We believe that chemical dependency is a disease of the body, mind and spiritual being, which requires extensive change in the effected individual's thought process and behavior patterns. We believe addiction is the individual's primary problem and therefore, demands priority attention. An addicted person must first deal with his/her chemical dependency in order to attempt coping with other problems. We integrate specialized services with the self-help, mutual support approach, and strongly emphasize the re-entry and continuing care phases of treatment. For those individuals who have a co-occurring mental health or medical disorder, admission into Siena House requires general psychiatric and physical stability so that primary addiction intervention can occur.

Recovery is a long-term process, and Siena House is only the beginning. The recovering person's continued involvement in a support program is necessary for maintaining recovery.

## **TREATMENT MODALITY**

The Gaudenzia treatment process is unique in its concentration on the TC model, which is well known as an effective treatment model. The primary goal of a TC is to foster personal growth. Gaudenzia views substance abuse as a complex biopsychosocial problem that must be addressed on all levels. The TC aims to address all aspects of the dysfunctional behavior and attitudes as individuals must make significant lifestyle changes in order for recovery to be successful and long lasting. Traditionally a residential therapy in a highly structured setting, it is based on the premise that new and more permanent patterns of coping must become routine in order for permanent change to take place. Global lifestyle change is accomplished through the community of recovering people working together to help themselves and each other.

Gaudenzia adheres to the holistic principles of the Therapeutic Community that encourages individuals to take part in the treatment process as full partners, not as objects or patients. The TC emphasizes personal responsibility for one's life and for self-improvement. The TC is a highly structured environment with defined boundaries, both moral and behavioral. In addition to daily seminars, group counseling, and individual activities offered to all clients, work responsibilities are assigned that teach basic cooperation, respect and discipline. Being part of something greater than oneself is an especially important factor in facilitating growth.

## **HOURS/DAYS OF OPERATION**

The facility is open, staffed, and provides services 7 days a week, 365 days a year. Contact can be made with facility staff at any time around the clock for emergency services. Business hours are considered to be 9:00am to 5:00pm.

## SIENA HOUSE PROGRAM DESCRIPTION

The Siena House D&A program is a long-term, male-only treatment program for individuals with severe addictions referred from the Pennsylvania Department of Corrections (DOC), Bureau of Community Corrections (BCC), and the Pennsylvania Board of Probation and Parole. The Siena House Program provides services to a maximum of 49 clients. The program and staff implement a specific treatment methodology to meet the individual's needs. In all cases, intensive treatment and continuing care planning occurs.

Siena House D&A utilizes established assessment criteria for admission, continuing stay review, discharge, and level of care changes. The length of stay at Siena House D&A is determined and based on the client's accomplishment of treatment goals and progress on assessed needs. Each client participates in developing specific treatment plans based on their bio-psychosocial assessment, which includes a strength/needs assessment, diagnostic summary and treatment goal determination.

Siena House's philosophy demands priority attention to the individual's treatment for chemical dependency. During the course of treatment, staff will make every effort to coordinate services with outside agencies and parties integral to successful treatment and ongoing recovery. Staff will also assist in addressing essential needs, such as legally required appointments/hearings, obtaining basic need items, identifying and securing medical service follow-up, etc., as long as doing so will not defocus the individual from their primary treatment goals. Clients are expected to promptly notify their primary counselor of legally required appointments and/or court notification.

Coordination of treatment services, while utilizing a team approach, are primarily as follows:

Medical Services:	Medical/Nursing Department
Clinical/Treatment Services:	Clinical Department
Admin/Financial/MA Services:	Administrative Department
Transport/General Services:	House Managing Department
Screening/Admission Services:	Administrative/Management Department

## ADMISSION CRITERIA

1. Admission is open to males 18 years of age or older who meets the Pennsylvania Client Placement Criteria for Level 3C (long term medically monitored inpatient rehab) chemical dependency services
2. General psychiatric stability without risk of lethality
3. General medical stability with the ability to perform activities of daily living and self-care. Individuals prescribed controlled substances for medical issues may be denied admission.

All admission and discharge decisions are subject to the approval of the Program Director or designee. Screening is performed prior to admission and services are accessible 24 hours a day. Anyone not admitted will be informed of the reason for denial and referred accordingly. Services are provided without discrimination.

A Voluntary and Informed Consent to Treatment is reviewed with all new clients and must be signed for admission.

The Informed Consent to Treatment form addresses the following aspects:

- Statement of client's voluntary consent to treatment at Gaudenzia.
- Agreement to the provision of emergency care.
- Client's right to refuse medication
- Client's right to be informed of medication side effects
- Client's right to an interpreter if needed
- Conditions of confidentiality and release of client information.
- Monitoring of mail
- Awareness of admission and discharge criteria.
- Whether or not the client accepted a copy of the consent.

The Consent to Treatment shall be maintained in the client record. A copy of the consent shall be offered to the client.

# PHASES OF TREATMENT

The phases of treatment at Siena House, including a brief outline of service description, are as follows:

## I. ADMISSION & ORIENTATION (1-7 days)

1. Intake: review releases/consent to treatment, initial screening & assessment, information on advanced psychiatric and medical directives
2. Receipt of a buddy, room assignment, introductions, facility tour, and orientation group
3. Assignment to a primary counselor
4. Participation in program activities including individual counseling, groups, etc...
5. Nursing assessment & physical examination
6. Bio-psycho-social history and assessment: interview with assigned counselor designed to collect information relevant to development of the person-centered treatment plan/goals, and identifying problem areas/barriers to recovery process needing addressed in treatment and aftercare planning
7. Individualized treatment planning: goals for treatment course developed in collaboration between counselor and client derived from assessment, and the individual's identified strengths, needs, abilities, and preferences
8. Completion of Orientation tasks & test
9. Family/Significant other(s) involvement in treatment encouraged
10. Counselor begins preliminary discharge and aftercare planning

## II. INTENSIVE TREATMENT (7-75 days)

1. Develop an educational plan and attend GED classes (if appropriate)
2. Assignment as a buddy for other new clients
3. Assignment of program responsibilities/therapeutic job functions
4. Weekly individual counseling sessions
5. Continued participation in program activities and work on individualized treatment goals
6. Write a life history, participation in Morning Meeting by bringing activities, papers, etc.
7. Family/significant other(s) encouraged to attend Family Session/Program
8. Client attendance at AA/NA/Double Trouble meetings
9. Monthly treatment plan update and revision subsequent to progress review
10. Referral for job readiness, educational services, financial management, etc...
11. Presentation of Relapse Prevention/Re-Entry Plan to community
12. Presentation of Re-Entry Proposal to counselor
13. Clarification of aftercare recommendations with counselor

## III. TRANSITION PLANNING/PREPARATION (75-90 days)

1. Continued participation in all program activities/IC sessions/role-modeling for new clients
2. Completion of individualized treatment goals, review individual progress over treatment stay
3. Finalization of transition/aftercare plan with support of family, significant other, and/or sponsor

## IV. AFTERCARE/COMPLETION (90-180 days)

1. Participation in program completion ceremony
2. Application of aftercare plan (attend 12 Step meetings, ongoing treatment, employment, etc.)
3. Attendance in Continuing Care Group (as applicable)

## **TREATMENT COMPLETION DISCHARGE and AFTERCARE**

Aftercare planning, which is initiated as soon as possible following admission, assures that the client has a sense of direction and is aware of available resources to support ongoing recovery post discharge. Clients should submit a home plan to their counselor as soon as possible; clients with no viable home plan will be provided other suitable housing opportunities.

Those clients who demonstrate they have internalized being an addict, have exhibited authentic behavior change, and have been actively utilizing recovery concepts will be considered for completion. Clients who do not meet completion criteria, have recent program infractions and/or have not completed learning experiences or treatment plan goals, and who meet PCPC criteria for continued stay will be recommended for continued stay.

### **Criteria for Completion of Treatment**

1. Successfully completed all phases/aspects of the treatment program.
2. Adequately achieved all treatment goals and is recommended by the clinical team for completion discharge.
3. Has a written, personalized recovery management plan, and an aftercare plan which addresses: appointments and/or referrals for ongoing treatment, continuing care support groups, medical and psychiatric services as appropriate, involvement in 12 step support groups, a job or educational programming, stable drug-free living arrangements, and future goals.
4. Meets PCPC criteria for another level of care.
5. Approval of the Program Director or designee.

## **TERMINATION - UNSUCCESSFUL DISCHARGE**

For effective treatment to occur, an individual must be: appropriate for the program, willing and able to participate in treatment, and motivated to allow for changes in attitude and behavior. Siena House utilizes a progressive process of intervention prior to treatment termination. This allows the client to put into effect the adage of “learning from one’s mistakes”.

Termination is an extremely serious measure, and as such, will be utilized as a therapeutic tool, with the utmost of care, when all other reasonable measures to retain the client in treatment have been exhausted. Decisions regarding termination will balance considerations of whether or not the client would continue to benefit from treatment with overall concerns of safety. While Gaudenzia is governed by a strict set of regulations, we do not superimpose a single corrective model for infractions. Due to our belief in individualized treatment, most cases of agency rule-breaking will be addressed based on their individual merits.

Clients are advised their discharge status will be considered incomplete/unsuccessful for the following reasons:

1. Client leaves the facility against staff advice or absconds.
2. Incarceration or arrest.
3. Acting out/destructive/violent behavior towards another resident, staff or property.
4. Unauthorized possession and/or use of illegal/unauthorized substances.
5. Client noncompliance with program rules, and/or resistance to progressive disciplinary interventions.
6. Violation of BCC Universal Set of Rules as per BCC Response Matrix.
7. Failure to follow treatment plan objectives.

## **TRANSFER –THERAPEUTIC DISCHARGE**

In certain cases, an individual may not be appropriate for treatment at Siena House, and will be discharged prior to completion for the therapeutic benefit of the client. Clients may be transferred or therapeutically discharged for the following reasons:

1. Determination upon initial assessment, according to PCPC criteria, indicating the client meets another level of care.
2. Compromised medical or psychiatric status necessitating transfer to hospital or other facility.
3. Manifestation of behavior that is deemed by the clinical team to be psychologically or physically dangerous to themselves or others, or that the clinical team believes to warrant a higher level of care.
4. Administrative transfer to another facility.
5. Inappropriateness of treatment modality and/or failure to demonstrate adequate progress with treatment goals following extensive review and clinical recommendation for discharge.

Regardless of discharge outcome, a client progress report is required on all mandated clients.

## **STAFF MANAGEMENT OF ESCALATION/RISK**

Throughout the day within the TC, client's moods, attitudes, and behaviors are assessed on a continuous basis. In keeping with the philosophy that all behavior is communication, staff is responsible for identifying any changes or signs of agitation and thereby intervening early to avoid a crisis. When clients are identified as being at risk for harm to self or others, staff will respond/intervene with de-escalation techniques. Possible techniques/interventions include: redirection, separation and/or isolation for short period of time, active listening/allowing client to express feelings, offering a constructive outlet for aggressive energy, community member support/feedback managed and facilitated by staff, and/or temporary hold, if necessary, until appropriate referral can be arranged or risk is void. Siena House will assess all potential risks and will refer clients to Crisis Services through Dauphin County as necessary. Because Gaudenzia does not engage in use of force, seclusion, or restraint, external emergency services will be contacted as warranted. Physical acts of violence will result in contact with the local police, PBPP, and BCC, as well as discharge from the treatment program.

## **ACCESS TO HEALTHCARE**

The facility shall ensure that each adult receives a health screening after admission. The screening may be conducted by a licensed physician, CRNP, or Licensed Nurse. If at the intake screening there are indications or complaints of an illness or condition requiring immediate medical or dental attention, arrangements shall be made for treatment or further physical examination.

Clients may request to see the nurse to address medical issues or complaints by filling out a request slip and sending it up the chain of command. The client may be referred to see the Doctor, CRNP, or Psychiatrist for non-urgent needs. For assessed urgent medical issues and emergencies, clients will be referred to local hospitals. Clients are required to furnish staff all hospital paperwork upon return to the facility in order to provide continuity of care.

## **FOLLOW-UP and GRADUATION**

Siena House will attempt follow-up services with all clients regardless of discharge status. Clients are encouraged to maintain contact and to inform staff of any contact information changes/recovery goal progress. Clients completing the treatment program are encouraged to attend Re-Entry Group. For those individuals attending Re-Entry Group, clients who maintain recovery/aftercare goals may be invited to participate in a completion party/speaker presentation to the treatment community.

Clients who meet Graduation criteria are invited to participate in the graduation ceremony after successful completion of the application and evaluation process. Graduation criteria include maintaining: sobriety for a minimum of one year, stable independent living arrangements in the community for at least four months, stable employment and/or enrollment in an educational program, good legal standing, and active 12 step group attendance with sponsor involvement. Additionally, a graduate candidate must be evaluated with positive vote established by graduation evaluation committees in the areas of recovery stability, goals accomplished, future plans, relationships - family/friends, and support systems.

Consideration is given to total performance throughout the treatment episode with particular emphasis placed on the application of what has been learned. On becoming a graduate, the individual is considered to have satisfactorily completed all treatment recommendations on all levels of care.

## **STAFF CODE OF ETHICS**

The primary obligation of agency staff is to ensure quality services to clients in treatment. The Clients are our number one priority and should be treated with respect at all times based on our program and staff code of ethics.

1. A staff member should maintain all client information in the strictest of confidence with regard to all applicable federal, state and local laws.
2. A staff member should be familiar with any applicable client bill of rights and should at all times respect this bill of rights.
3. A staff member should respect all clients by maintaining a non-possessive and professional relationship with the client.
4. No client should be discriminated against on the basis of race, creed, religion, sex, national origin, affectional/sexual preference, age, disability, political affiliation, previous criminal record, or status with regard to public assistance.
5. A staff member should recognize that the best interests of the client may be served better by referring or releasing him/her to another agency or professional.
6. A staff member should not engage in a sexual or romantic relationship of any kind with a client. Any relationships with graduates of Gaudenzia should be discouraged until at least one year after graduation.
7. Clients should be compensated for any work performed personally for a staff member.
8. Clients should not be exploited for personal gain by a staff member.

## **CLIENT BILL OF RIGHTS**

The Board of Directors and Staff at Gaudenzia, Inc., endorse the civil and legal rights and liberties of clients with the expectation that observance of these rights will contribute to more effective care and greater satisfaction for clients and program staff. The following rights are affirmed:

1. The right to considerate care without regard to age, race, creed, sex, ethnicity, color, national origin, marital status, sexual orientation, disability, religion, political affiliation, or limited English proficiency.
2. The right to obtain current information concerning his/her diagnosis, treatment goals, and prognosis in terms that the client can be reasonably expected to understand.
3. The right to examine one's own record within the guidelines approved by the agency in accordance with Federal regulations 42 CFR, and rebut any information in their record by inserting a counter statement of clarification or correction.
4. The right to receive information necessary to give informed consent prior to the start of any treatment.
5. When significant alternatives for treatment exist, or when the client requests information concerning alternatives, the client has the right to such information in a timely manner.
6. The right to refuse treatment to the extent permitted by law, to discharge one's self at any time, and to be informed of the consequences of his/her action.
7. The right to every consideration of his/her privacy concerning his/her treatment program. Client information shall be maintained as confidential unless disclosure is permitted by law and/or with documented, signed client consent.
8. The right to expect that within our capacity we will make a reasonable response to the request for a service and provide an evaluation, service, or referral as indicated by the nature of the case, including but not limited to legal entities, self-help support, and advocacy.
9. The right to be involved and receive complete information prior to a transfer.
10. The right to know about follow-up contact procedures post discharge.
11. The right to expect reasonable continuity of care, to know when and where appointment times and services are available, both in our program, in the community, and /or concurrently.
12. The right to know about any fees, payments, or surrendering of valuables, to examine and receive an explanation of his/her bill, and protection from exploitation regardless of funding status.
13. The right to expect to be informed by staff of the health, treatment, and other service requirements following discharge.
14. The right to be informed of written facility rules and regulations prior to admission.
15. The right to appropriate assessment and referral for or provision of management of pain.
16. The right to have one's religious beliefs respected.
17. The right to communicate by mail, telegram, phone, or other means of private communication, except when such is detrimental to the therapeutic process and reflected in the treatment course. At minimum mail will be distributed weekly, though generally daily. All mail must be opened in staff presence and screened for contraband.
18. The right to be treated with dignity and respect, and free from neglect, corporal punishment, abuse, physical restraint, seclusion, involuntary confinement, and retaliation. All staff must adhere to a corporate code of ethics and professional licensure standards. Code of ethics details may be requested from staff.
19. The right to nutritious food, safe and adequate lodging, physical exercise, and provision for personal hygiene.
20. Clients have the right to register complaint and file a grievance related to their treatment experience and to expect investigation of said concerns or infringements

## **COMPLAINT, GRIEVANCE, and APPEAL PROCESS**

Any client or family member has the right and is encouraged to express his concerns to staff through respectful, constructive written or verbal communication so that issues may be resolved through the course of treatment. Clients should first utilize house tools to address their issues and/or complaints.

Should a client not be satisfied with this resolution, a client may utilize a Siena House Grievance form to file a complaint, grievance, or appeal to any treatment direction or action with which they disagree. Such concerns shall be submitted in writing to the assigned Primary Counselor for resolution.

If the problem is not mutually resolved, or the grievance is related to the Primary Counselor, the issue should be presented to the Program Supervisor. The Supervisor may elect to meet directly with the client as necessary to bring about resolution. The Supervisor should reply within 3 business days of the grievance, and should communicate if additional time is necessary to resolve the grievance.

The process will continue up the facility and organizational chain of command involving the Program Director, Division Director, etc...until some resolution is achieved.

Grievances/appeals unable to be resolved at the supervisory level and facilitated up the chain of command will be allotted 10 business days for response.

For treatment termination appeals, the facility's Division Director must be contacted via telephone or in writing within 30 days of treatment termination.

Clients should make every attempt to resolve any issues/complaints utilizing Siena House's in-house procedures outlined above. However, clients may utilize a DC-ADM 804 to file a grievance at any time, which shall be submitted directly to the Program Director who forwards it to the Facility Grievance Coordinator for processing in accordance with DOC policy. DC-ADM 804 Grievances are available by request to the Supervisor.

### Note

Special accommodations will be made for those persons who have difficulty writing or communicating in English. No client shall be subjected to discriminatory or negative repercussion/retaliation in response to filing a complaint or grievance.

## **DAILY SCHEDULE**

The daily treatment schedule in the Siena House program is structured to meet the treatment needs of the individuals involved. Clients are expected to be present, on time, and to participate in all aspects of programming. Schedule changes may occur due to the evolving treatment needs of the community, and such changes will be communicated using the chain of command.

NO changes in the daily schedule will occur without the Program Supervisor or Program Director's approval.

Outside activities are scheduled, as available, as well as attendance at outside NA/AA meetings. Each client's participation in outside activities and meetings is determined by the primary counselor and supervisory staff. Clients approved for outside activities must meet the following criteria: has completed orientation and has been in treatment a minimum of 2 weeks, has not had any infractions/misconducts, and is actively working on their treatment goals.

## PROGRAM BEHAVIORAL EXPECTATIONS/RULES

The Therapeutic Community operates with the belief that the individual grows stronger through the support and honest feedback of one's peers. Because the actions of an individual impact other community members, each client is expected to assume responsibility for his/her fellow client's recovery in addition to his/her own. When a client is aware of any violation of program rules, or issues detrimental to the treatment process, he has a responsibility to challenge the violator appropriately utilizing the TC tools, and communicate it to staff for correction. Privileges may be restricted and/or revoked for violation of program rules or procedures, and progressive disciplinary action taken for failure to comply including notification to PBPP/BCC of the infraction. Any sanction/privilege revocation is time-limited, based on the individual's behavior, with restoration being dependent on clinical evaluation of client response to the intervention.

1. Clients must attend/participate in all program activities and complete treatment assignments as directed.
2. Clients must cooperate with staff searches of person and belongings.
3. Verified threats and/or acts of physical violence, and possession of weapons/instruments intended to harm or intimidate others are prohibited and will result in immediate discharge.
4. Possession of unauthorized prescription or over-the-counter medications, illicit or legal drugs, or alcohol is prohibited and will result in immediate discharge. Any and all substances need to be surrendered to nursing staff immediately upon entry to the facility.
5. Intimidation, sex, inappropriate touching, sexual harassment of any kind, jeopardizing client/staff/facility safety and security, and continued noncompliance with program rules is not permitted and may also result in discharge.
6. Clients may not engage in romantic or sexual written, verbal, or physical contact of any kind with peers while in treatment. Contact of a sexual nature is also not permitted with visitors.
7. Clients may not "contract", lend, borrow, give, steal, receive, or trade any items to other clients, including money, cigarettes, clothing, food, haircuts, etc...
8. Clients should follow the Chain of Command to communicate to staff.
9. Clients may not send to or receive mail from any current or former client while in any Gaudenzia facility. Additionally, Clients will not be permitted to send or receive correspondence from inmates in correctional institutions or persons participating in treatment programs unless the correspondent is a family member or special permission for written contact is granted by the client's primary counselor and the DOC.
10. Client incoming mail is distributed 1-5 times/week, and must be opened in front of staff and inspected for contraband. Outgoing mail, limited to 1 piece of mail per week, must be submitted to the primary counselor prior to being posted. Outgoing mail may be subject to search for security reasons.
11. Clients use of obscene or profane language, coarse joking or gesturing, verbal abuse of peers or staff, and possession of pornographic materials is prohibited.
12. Clients may not accept any item from visitors or peers without prior staff inspection and approval. Food and beverage items are prohibited.
13. Clients may not exit the building or leave the grounds without staff approval and must sign out when approved to exit the building.
14. During off site activities, client may not leave the group or designated area without staff approval.
15. Clients will be required to submit a urine sample for analysis upon request from staff.
16. Clients must attend all medication runs unless otherwise directed by a nurse.
17. No food or beverages may be hidden and/or taken outside of the dining area.
18. Tobacco use is not permitted inside the facility or vehicles. Tobacco use is permitted only during specified times with staff approval and only in designated outside areas.
19. Floor inspections will occur each morning to assure that clients maintain the cleanliness of their rooms and common areas according to posted protocols.
20. Clients shall maintain healthy personal hygiene.

## **PROGRAM BEHAVIORAL EXPECTATIONS/RULES (continued)**

21. Questions and requests to staff shall be submitted according to established schedules and procedure.
22. Clients may not go "off floor" without staff approval.
23. Clients should refrain from telling "war stories" of past alcohol and/or drug use, criminal acts/behavior, or otherwise glamorizing addiction/criminal lifestyle as doing so jeopardizes individual recovery processes.
23. Clients are not permitted to gamble, play cards, dice, or engage in any other gambling related activity.
24. Clients shall wear modest attire with adequate personal support at all times. The following items are prohibited: wearing sunglasses inside, head coverings, muscle shirts/tank tops, see-through/torn/revealing clothing, and items representing substance use/sex/profanity/gangs/death/nudity or otherwise deemed distracting from treatment/recovery. Clients are expected to comply with staff direction to change any item of clothing.
25. Clients may not maintain in their possession: cash, medications, cell phones, beepers, audio devices, electronic equipment, credit/bank cards, or any items not identified on the client "allowable items" list. Valuable items, money, bank cards, etc. shall be locked in safe-keeping, accessed upon request, and returned upon discharge. For unplanned discharges, clients may need to return to facility during access hours to retrieve their valuables. Access is limited to M-F: 9am to 4pm.
26. Clients may have a maximum of \$100.00 cash on account at the facility to purchase approved medications or other items of need through the "sundries request" process. All cash and valuables shall be given to staff for placement "on account" and safe keeping. Approval of requests for sundries purchases are subject to prior payment of fees owed to the facility. Clients may obtain information regarding financial obligations, medication costs, co-pays, etc...from the administrative office.
27. Clients may not watch television except during specified "news hour" times or during special conditions approved by the supervisor or the program director.
28. Clients shall remain in their own assigned rooms between the hours of scheduled "lights out" and "on floor" unless otherwise directed by staff. No client is permitted into a room not assigned to them.
29. Clients may give input, suggestions, and feedback to staff via completion of a weekly "Community Meeting Client Feedback" form which sets the agenda for Community Meeting, by completing a written communication slip and/or request slip submitted to staff on duty/assigned counselor or placed under the Supervisor's office door, by writing a formal encounter slip, by completing a formal proposal, and/or through completion of the client survey upon discharge from the program.

Clients are also expected to comply with the DOC/BCC "Universal Set of Rules (USOR)", which are reviewed and signed at admission and attached in the addendum section of this manual.

## PRIVILEGES/INCENTIVES

Privileges are earned as a reward for client adherence to program rules/procedures and progress in treatment. Clients must complete the Orientation Phase of the program in order to be eligible for privileges (except for the initial 24 hour call and tobacco use). Restrictions and/or revocation may be instituted in accordance with learning experiences and as consequences for instances of noncompliance. All disciplinary actions are time-limited. Privilege restoration is dependent upon clinical evaluation of positive individual behavioral response. Siena House also employs other motivational incentives, or reinforcers, which are discussed in the "Tools of the TC Environment" section.

**Tobacco/Smoke Breaks** - Specific tobacco/smoke breaks have been scheduled into the day.

**Noncompliance with tobacco use rules/protocols will not be tolerated and will result in consequences including the forfeiture of tobacco/smoking privileges.** Consistent with the concept of community, we believe that our behavior never affects only self, thus unreported tobacco rule violations may result in suspension of smoking privileges for all clients.

**Telephone Calls** – All telephone use is monitored by staff and requires the written approval of a counselor, and/or supervisor. Each client has the right to one phone call within the first 24 hours after admission. Provided that all steps are properly followed, clients may be eligible for one weekly personal call. Business calls will be approved as appropriate, but kept to a minimum. Clients approved for calls will be provided access to a phone and limited to ten minutes. Clients need to have a pre-paid calling card in order to make a long distance call. Calls will not be facilitated without approval. Unapproved client use of telephones while out of the facility on escort, at appointments, etc... is prohibited, and will be subject to disciplinary action.

**Escort** – On occasion, clients may be selected as escorts for peer appointments/activities. Clients and escorts are expected to remain in the approved area, only, when out of facility. Leaving the designated area without authorization may result in an incomplete discharge from the program.

**Requests for Outside Services, Activities, or Trips** - Clients may attend special events, meetings, and appointments with the approval of the Program Director or designee, and approval of PBPP. Clients may request special event attendance by submitting a written "request slip" to their Primary Counselor. All requests will be evaluated individually and will only be approved if adequate therapeutic relevance and need is demonstrated. Clients must also be misconduct free for 2 weeks to be eligible.

**Visitation** – Clients may be eligible for visitors on Sundays with counselor and supervisor prior approval of all visitors (see "Family Program and Visitation"). Clients must also complete the Orientation Phase of the program/Family Session with Counselor. Family Sessions are held with potential visitors and can take place at the facility or via telephone call.

**Outside AA/NA/Double Trouble Meetings** – Staff may facilitate client attendance at various outside support group meetings, as staffing/scheduling permits. Approval for outside meeting attendance is dependent on individual behavior, treatment progress, and supervisor approval. Clients must also be misconduct free for 2 weeks to be eligible. Staff will monitor client behavior to assure respect for Siena House, its service providers, and the community.

**Clients shall adhere to all program rules and procedures, as well as the following:**

1. Clients shall sit as a group, remain with designated escort, attend to the speaker, and comply with all staff direction.
2. Clients shall not use any phone, or communicate in person or by phone with anyone outside of the meeting or appointment, including former clients who have left treatment, known users, etc...
3. Clients shall not use meetings or appointments to establish contact with family or friends. Unexpected family/friends encountered at a meeting or appointment should be asked to avoid where you will be while you are in treatment. Staff should be notified of such contacts.
4. Clients are not permitted to ask for or accept candy, gum, cigarettes, soda, money, gifts, or cell phone use from anyone at meetings, activities, or appointments.
5. Clients must notify staff when utilizing the restroom and must take a peer escort.
6. Clients may have one cup of coffee at the meeting.
7. Clients shall utilize 12 step meeting attendance as opportunities to establish contacts with recovering people, obtain names/phone numbers of support sources, and look for a sponsor.

## **ALLOWABLE PERSONAL BELONGINGS**

### **Allowable:**

- Clothing (7 complete changes worth) – must be appropriate with no rips, tears, drug/alcohol references or other inappropriate sayings/images. Clothing should also be modest and properly fitting. NO cut-off shirts/shorts/pants allowed.
- Hats, maximum of 2 (cannot be worn inside facility)
- New/unopened, alcohol-free, non-aerosol toiletry/hygiene items (essential toiletry/hygiene items are available at Siena House)
- Recovery-oriented books, religious reading material (kept in room only)
- Photos of family/friends, if appropriate (no nudity, alcohol/drug references, etc.)
- Unopened/factory sealed cigarettes – no loose or rolling tobacco or chew allowed

### **Allowable, but secured**

*\*any of these items will be properly secured and logged by staff\**

- Razors for shaving, nailclippers, tweezers, etc...
- All jewelry (except for wedding rings, surgically implanted items, or approved religious items)
- Money: no more than \$50 in cash, secured in safe (any additional money over this amount must be converted to the form of a money order)
- Personal valuables such as: cell phones, wallets, checkbooks, keys, etc.
- **MEDICATION: CLIENT SHOULD BRING ALL PRESCRIPTION MEDICATIONS**  
Medication is submitted directly to the facility nurse who ensures the legal validity and dosage of the prescribed medication.

### **Not-Allowable**

*\*any of these items brought in are either given to family members of client to remove from premises, disposed of properly, or stored in belongings bags in storage areas\**

- Sharp objects (pins, screwdrivers, silverware, wire hangers, knives, etc.)
- Glass objects (picture frames, bottles, mirrors, etc.)
- Inappropriate photos or other materials (nudity, partying, etc.)
- Own pillows, blankets, or other related furnishings
- Condoms/other sex-related items
- Items/substances of abuse: aerosol cans, alcohol pads, vanilla, glue, etc.
- Drugs or drug paraphernalia
- Weapons of any kind
- Non-recovery literature
- Food and/or Drinks of any kind
- Aerosol products of any kind
- Cologne and/or oils
- Mouthwash with alcohol
- Opened packs of cigarettes/tobacco, chew, rolled cigarettes, and/or rolling papers of any kind
- Electric/electronic devices (e.g. cell phones, music players, shavers, computer/tablet, electronic cigarettes, etc.)

*\*Items that are not listed on the Gaudenzia Inventory Sheets need permission from a supervisor to be brought into the facility\**

## **DRESS CODE**

While “on-floor” clients are expected to be fully dressed wearing proper daytime attire at all times, which also includes wearing socks and shoes. Clothing that is overly loose or tight, revealing/falling off, or otherwise deemed inappropriate will not be allowed. Clients will be required to change any clothing deemed inappropriate.

\*Tank tops are NOT considered proper daytime attire.

\*Pajamas, sleepwear, tank-tops, slippers, shower shoes, etc. are NOT allowed during “on-floor” hours.

\*Clients may only use the bathroom or shower room to disrobe/change clothes, and may not undress in bedrooms.

\*ID/Name Badges must also be worn at all times

## **FAMILY PROGRAM and VISITATION**

**Family Sessions** - Family members may be present at intake for interview and initial orientation. Key family support members identified by the client are encouraged to participate in a family session with the client and his/her primary counselor. Counselors will provide information to family members, upon request and client consent, on resources and supports to enhance the client's recovery process and re-entry into the community.

All clients are entitled to sessions with their families during their treatment at Siena House. These sessions are designed to help orientate the family to the Siena House treatment modality, and to discuss how family members have been affected by the client. A session is held with the client and family upon the client's admission, whenever possible, and monthly, when possible. Additional sessions may be held at the client's request, and at the discretion of the primary counselor.

**Family Program:** The Family Program, which provides education, support, and resources for family members, occurs every Sunday beginning promptly at 2pm until 3pm just prior to visits. In order for visits to occur, the approved visitors must attend the Family Program before every visit.

**Visitation:** Visitation is held on Sunday afternoons from 3pm to 4pm for clients eligible and approved to receive visits. Clients are eligible for visitation following successful completion of the Orientation Phase and completion of 14 days in treatment. This privilege is limited to immediate family members only; exceptions to this rule must be approved by the client's primary counselor and supervisor.

**Approval of Visitors:** Clients must complete their request for visitor approval on the Visitor List form. This form is turned in to staff by noon every Tuesday for counselor/supervisor review. For visitors to be approved, the client must be eligible for visitation, a family session must occur with the requested visitor prior to the visitation date, and the approved visitors must attend the Family Program prior to every visit.

### **Visitation Guidelines**

No visitor will be permitted entrance without meeting all approval requirements. Visitor failure to comply with the following conditions will result in revocation of visitation privileges:

1. Must present photo identification.
2. May not bring any drugs or alcohol on Siena House property and may not be under the influence. Anyone known for or suspected of active substance use will be denied entrance.
3. May not bring purses/bags, wallets, cell phones, cameras, electronic equipment, food, beverages, or weapons of any kind into the facility.
4. May not give anything to clients directly. All items must be given to a staff member for inspection and approval.
5. May not engage in physical/sexual contact or behavior with client or anyone else.
6. Must sign in and out of the facility on the Visitor Log.
7. Must adhere to visitation times and may not visit without prior arrangement by staff.
8. Must remain in designated visiting areas (dining room or front lawn on occasion) unless otherwise directed by staff.
9. Must comply with all program rules and procedures.
10. Must clear the metal detector and search.
11. Must respect client confidentiality.

## **GROUP ACTIVITIES and THERAPY**

The purpose of group is to share your personal experiences in a safe and caring environment and to receive constructive feedback to promote personal growth. Each client must complete a feedback sheet at the conclusion of each group, prior to exiting the group area unless otherwise instructed by staff. Group attendance is a vital, necessary component of the treatment process. Attendance at all groups/activities is mandatory unless otherwise approved by staff. Failure to attend and/or participate in groups/activities is considered noncompliance with the treatment program and treatment goals. Siena House utilizes a variety of group formats to address client treatment needs. The following descriptions include the types of groups offered:

**Data Sessions** - Sessions designed to inform, describe and explain the meaning of certain terms, procedures and theories pertaining to the Siena House environment.

**Orientation Sessions** - Groups designed to inform and explain the meaning, purpose, expectations, and theories pertaining to the terminology, policies, and procedures in the program environment and operations.

**Seminars** – Educational groups designed to stimulate thinking, broaden perceptions, and exchange ideas and opinions about a wide range of topics from addiction to comprehensive strategies for healthy living.

**CBT Groups** - Educational groups to help understand thinking errors, develop social skills and develop positive outcome decision making skills.

**Pre-Morning Meeting** – Group designed to prepare for Morning Meeting where the Pull-Up Board and all papers are screened, communications are received on the attitudes, actions, and concerns about the community and its members. Attendance is considered a privilege.

**Morning Meeting** - Structured group where an attitudinal tone/mood and goals are established for the day. This group format includes motivators/inspirations, client presentations, opportunities to openly discuss problems and provide feedback, self- evaluation, positive peer input or “push-ups”, and a means to solicit help to initiate positive change.

**Encounter or Slip Group** - Clinical process group initiated by encounter slips where community members make each other aware of negative behaviors/attitudes and express their feelings in a group setting. Through this process, a person’s attitudes, which underlie the behavior, are confronted, and demands are placed on the individual to change attitudes/behavior determined to be negative and self-defeating.

**Static Group** – Clinical group held with the same group of people over a specified period of time. They are designed build trust by allowing clients to freely express themselves and their concerns.

**Departmental Group** – Sessions designed to build teamwork, planning and communication, and to deal with issues that affect the efficient operation and interaction of a particular department.

**Department Head Group** - An encounter group for supervisors of specific departments or areas. A staff member is in attendance to observe the overall progress of these individuals, especially pertaining to leadership ability and group interaction.

**Re-Entry Group** - Group designed to deal with issues related to the process of entering the outside community, and feelings which arise from it.

## **GROUP ACTIVITIES and THERAPY (continued)**

**House Meeting** – Daily (and also as needed) meeting where the community has an opportunity to discuss specific events, trends or problems occurring in the treatment environment, or to be informed of issues related to the treatment community/process.

**Community Meeting** – Weekly meeting with supervisory staff where community members have an opportunity to directly speak with supervisor/director regarding questions, issues, and concerns. An agenda must be presented to supervisory staff at least 1 day prior to the meeting.

**GED Class** - Educational class for clients to work towards obtaining a GED, or to better their education. Attendance is mandatory for all clients without a high school diploma or GED.

## **GROUP BEHAVIORAL EXPECTATIONS/RULES:**

1. Group members shall conduct themselves in a manner that demonstrates respect towards their peers and the group facilitator/counselor, and reflects their commitment to achieving personal growth and contributing to the growth of others.
2. Clients shall comply with the directions of the group facilitator/counselor at all times, and abide by the “Group Norms” which are read prior to each group.
3. Clients may not leave group unless approved or directed to do so by staff. Personal needs should be addressed prior to the start of group.
4. Cross-talking, side-talking, insulting/demeaning others, profanity, sleeping, or other disruptive behavior is not permitted.
5. Members shall respect the confidentiality of all participants. Information disclosed in group should not be taken outside of the group, except to inform staff of emergency or serious, imminent danger.

## **TOOLS of the TC ENVIRONMENT**

Recovery is about change. The Therapeutic Community’s primary goal is to encourage and foster personal growth. Identifying and changing addictive and negative patterns of behavior is essential to this process. The TC represents a structured environment with defined moral, ethical, and behavioral boundaries. Change occurs within this community of concerned people working together to help themselves and each other. Peer pressure is often the catalyst that converts criticism and personal insights into positive change. Insight into oneself is gained by learning through experience, failure, success, and experience of the consequences, which occurs as individuals and the community as a whole.

Just as a carpenter uses specific tools to successfully build a finished project from raw materials, so too, the Therapeutic Community (TC) model of treatment relies on key principles and tools to rebuild broken lives. The success of your treatment at Siena House depends on the attitude and receptivity with which you embrace the tools of the treatment environment.

## **TOOLS OF THE TC ENVIRONMENT (continued)**

**Cardinal Rules** – Rules designed to protect the TC. Violation of these rules will result in termination/discharge from the treatment program. Cardinal rules are:

*No unauthorized use of drugs or alcohol*

*No threats of violence*

*No acts of violence*

**Chain of Command** – A system of communication which utilizes an organized hierarchy designed to provide structure, generate respect for others, and delay impulsivity and/or the desire for immediate gratification. All communication must go up and down the chain as follows:

*Worker*

*Ram Rod*

*Expeditor*

*Department Head*

*Shingle Expeditor*

*Chief Expeditor*

*Troubleshooter (when applicable)*

*Senior Coordinator*

*Staff*

**Phases of Treatment** – A simple to complex progression of the treatment episode from admission to discharge, which promotes the development of greater individual and communal responsibility.

**TC Phrases, Terms, and Language** – Common words and sayings which represent core values, principles, beliefs, and practices used in the Therapeutic Community treatment setting.

**Challenging** - To question a decision, someone's behavior, or situation that is perceived to be unsatisfactory. A challenge is a question to a community member that is responded to ONLY with a "yes" or "no" answer in order to keep the member honest.

**Confrontation** - Presenting a member or group with a description of their behavior and its effects with a request that they explain and/or change the behavior. Confrontation is more in-depth and may allow for an appropriate dialogue between members.

**Education** – During orientation, new members are made aware of the attitudes/behaviors expected within the TC, and of the rules/structure of the program.

**Verbal Pull-Up** – A verbal notification of the displayed unacceptable behavior, and a reminder of the acceptable behavior. They are given immediately when the behavior occurs, are kept to one sentence long, and can be used on a group of members or an individual member. The only acceptable response is "thank you".

**Written Pull-Up** – A written notification of the displayed unacceptable behavior, and a reminder of the acceptable behavior. These are written and placed in the pull-up box when a member continues to display inappropriate behaviors, and are read aloud by a staff member within a group setting. The only acceptable response is "thank you".

## **TOOLS OF THE TC ENVIRONMENT (continued)**

**Encounter Slip** – Throughout the day in the TC, it is not unusual for a peer to do something or say something that another peer may respond to by feeling hurt, angry, frustrated, annoyed, or other feelings. People do not always treat each other or behave as they should, and a key to the change process is understanding how one's behavior affects others. During addiction, we lose the ability to appropriately deal with feelings, and the encounter process is the pivotal group for individuals to re-learn this skill. Any time that feelings occur as a result of another's behavior, an encounter slip should be dropped.

**Special** - A mini encounter group between two or more TC members who are in constant conflict. When a special is requested, a staff member facilitates this process, which is geared towards resolution of the conflict and/or issue.

**Closed House** – When the community becomes corrupt or negative, members are acting out inappropriately, and/or the atmosphere within the TC becomes unhealthy and not geared toward recovery, supervisory staff may decide to close the house for the safety of all members. During this time, all program activities cease, except individual and group therapy, and TC members work on putting their focus back on recovery and using the tools of the TC.

**Learning Experience** – A therapeutic direction or task given to address inappropriate behavior and rule violations, and help the individual work through problem areas to promote corrective action/change in behavior.

**Therapeutic Job Roles** – Clients may be given a job role or assigned to various functional task groups as part of their treatment process. Roles assigned provide an opportunity to enhance individual strengths, increase personal responsibility and accountability, develop a healthy attitude and self-image by contributing to one's peer community, and foster positive work habits.

**Departments:** Each department is responsible for maintaining some aspect or area needed for the total functioning of the facility. All clients are assigned to a specific department. They are:

1. *Maintenance*
2. *Kitchen*
3. *Orientation*
4. *Communications*
5. *Business*
6. *Expeditor*
7. *Transportation*
8. *Laundry*

**Reinforcers** – Tools of the TC environment used as motivational incentives.

**Push-ups** – verbal or written praise for a member displaying positive behavior and/or right living

**Slogans & Philosophy** – Reinforcers for concepts of right living

**Privileges** – Benefits/freedoms given to individual members or the group associated with positive progress in treatment phases

**Promotions** – Movement within the hierarchy up the chain to encourage progress, growth, and role modeling

## **TOOLS OF THE TC ENVIRONMENT (continued)**

**Horse Concept** – If two or more people make the same statement or confront you on the same behavior or attitude, check it out, it just might be true. If three or more people share the same opinion, it's true. The horse concept states:

If one person says you are a horse: Ignore it  
If two people say you are a horse: See if you have a tail  
If three people say you are a horse: Saddle up

**Dust Ball Theory** – If you have a dust ball under your bed and ignore it, it will become larger until finally it explodes out from under your bed. If you have minor issues that you keep inside and fail to deal with, they will grow until they become so large you explode with feelings.

**Unwritten Philosophy** – A concept or idea that represents a critical element of right living, which describes how a particular behavior or attitude is taught in the TC. These slogans are used to guide personal growth and provide a way of life for recovering individuals; they are meant to give clients a motto to live by and reflect upon during each day, and are used as themes for each day's Morning Meeting.

**HONESTY  
ACT AS IF  
BLIND FAITH  
NO FREE LUNCH  
GOING THE EXTRA MILE  
THINK BEFORE YOU ACT  
COMPENSATION IS VALID  
TO BE AWARE IS TO BE ALIVE  
GUILT WILL MAKE YOU TILT  
GIVE IT AWAY LIKE YOU GOT IT  
TRUST IN YOUR ENVIRONMENT  
CHANGE IS A PROCESS NOT AN EVENT  
WHAT GOES AROUND COMES AROUND  
RESPONSIBLE LOVE AND CONCERN  
NOTHING IS CONSTANT BUT CHANGE  
THE DANGERS OF RESERVATIONS  
CHALLENGING AND CONFRONTING  
YOU ARE YOUR BROTHERS/SISTERS KEEPER  
REMEMBER WHERE YOU CAME FROM  
THE IMPORTANCE OF ROLE MODELING  
YOU GET WHAT YOUR HAND CALLS FOR  
THE DANGERS OF NEGATIVE CONTRACTS  
ITS TIME TO PUT SOMETHING IN THE POT  
YOU HAVE TO GIVE IT AWAY TO KEEP IT  
DON'T JUST TALK THE TALK/WALK THE WALK  
NOTHING HAPPENS UNLESS YOU MAKE IT HAPPEN  
HANG TOUGH, FOR ONE DAY THERE WILL BE HAPPINESS  
IT IS BETTER TO UNDERSTAND THAN TO BE UNDERSTOOD  
BE CAREFUL WHAT YOU ASK FOR, YOU JUST MIGHT GET IT  
IF YOU THINK YOU'RE LOOKING GOOD, YOU'RE LOOKING BAD**

## HEALTH AND SAFETY GUIDELINES

Promoting general good health and safety is an important part of the Siena House program. This section is designed to explain a few simple principles we will ask you to study to help you maintain good health, be safe here, and protect others in the program from illness or injury.

### HEALTH:

**Prevention of Illness:** Working together in large groups of people you do not normally live with increases the risks of spreading colds, flu, and other infectious diseases. The best way to prevent the spread of infection is to wash your hands thoroughly:

- BEFORE preparing food and/or eating
- AFTER using the toilet, blowing your nose, covering your mouth for coughing/sneezing, and smoking

The best method for washing hands:

- Turn on faucet with paper towel
- Apply generous amount of soap & wash hands, under and around fingernails for at least 20 seconds
- Rinse hands off thoroughly while vigorously rubbing hands together
- Dry hands well with a clean paper towel, turn off faucets with paper towel, discard towel in trashcan

For sharing bathrooms and other common household furnishings and supplies, it is important to clean up after yourself before someone else uses the toilet, sink, tub, dishes, etc.

- After using tub, shower, or sink, you should clean them with a germicide we provide. If you are not able, staff will help you complete this task.
- All dishes, pots, and pans are sanitized according to kitchen protocol. Staff will show you how to properly do this.
- DO NOT share dishes, personal hygiene products such as deodorant, toothbrushes, toothpaste, soap bars, or razors with other clients. Doing so poses serious health risks to all persons involved.

### SAFETY:

Our staff is trained to help you protect yourself in all emergency situations. Please follow staff direction, and these guidelines to ensure your safety and the safety of your peers.

**Falls:** If you see a client fall, call for staff immediately and then move away so there is plenty of room for staff and/or emergency personnel to attend to the individual. For everyone's safety, it is important these guidelines are followed:

- Use safety markers after mopping or any time there is moisture on the floor to alert others to the risk
- Keep doorways free and clear of obstacles & debris
- Maintain general facility tidiness. Do not leave coats, sweatshirts, folders, personal items, etc... lying around.
- Maintain awareness of your fellow peers and report any strange behavior/health concerns to staff immediately

## **HEALTH AND SAFETY GUIDELINES (continued)**

**Fire:** If you wake up to the sound of a fire alarm and your door is closed, feel the bottom of the door before you open it. If the door is cool, leave immediately. Be prepared to bend low or crawl if you are able, because smoke and heat rise. If the door is hot, escape through a window. If you cannot escape, hang a sheet outside the window to alert a fire fighter to your presence. If your clothing catches on fire: stop, drop, and roll until the fire is out. Running only makes the fire burn faster.

### **Evacuation Routes (for fire, bomb threat, flood, hazardous spill/release, etc.):**

-The primary evacuation route is to assemble on the sidewalk across the yard, which is opposite the south wing of Siena House and in front of the Concept 90 building, with a secondary meeting point at the farthest end of the parking lot.

-The secondary evacuation route is to assemble on the sidewalk along Azalea Drive.

\*Follow all staff direction, as routes may be adapted dependent upon the emergency.

**Tornado, Earthquake:** Stay away from windows, doors, and outside walls. Go to the basement using the stairs from the kitchen. If you cannot get to the basement, crouch against an inside wall, interior hallway, or closet. Cover your head with your arms.

**Severe Thunderstorm with Lightening:** Stay inside the facility or vehicle. Do not use bath, shower, phones, or appliances.

### **Fire/Evacuation Drills**

Unannounced fire drills will be held at least 3 times each month, and other evacuation drills on occasion, in order to familiarize clients with the proper procedure for evacuation of the facility. The following is the procedure for all clients to follow during a drill.

1. The staff on duty will make a thorough check of the facility, announcing the drill to all clients and waking any clients who may be sleeping in the dorms.
2. All clients will exit the facility by the route designated on the Fire Escape Route sheets which are posted throughout the facility, in each office, and in all bedrooms.
3. The Shingle Expeditor must take the Trip Log and Visitor Log with him upon exiting the facility.
4. When the staff on duty has completed the facility check and returns to the designated area, the Staff are to immediately take a roll call of the clients and visitors and report to other staff any person who is not accounted for.
5. No client may re-enter the facility at any time for any reason, until staff permission is given to enter the facility after an emergency evacuation.

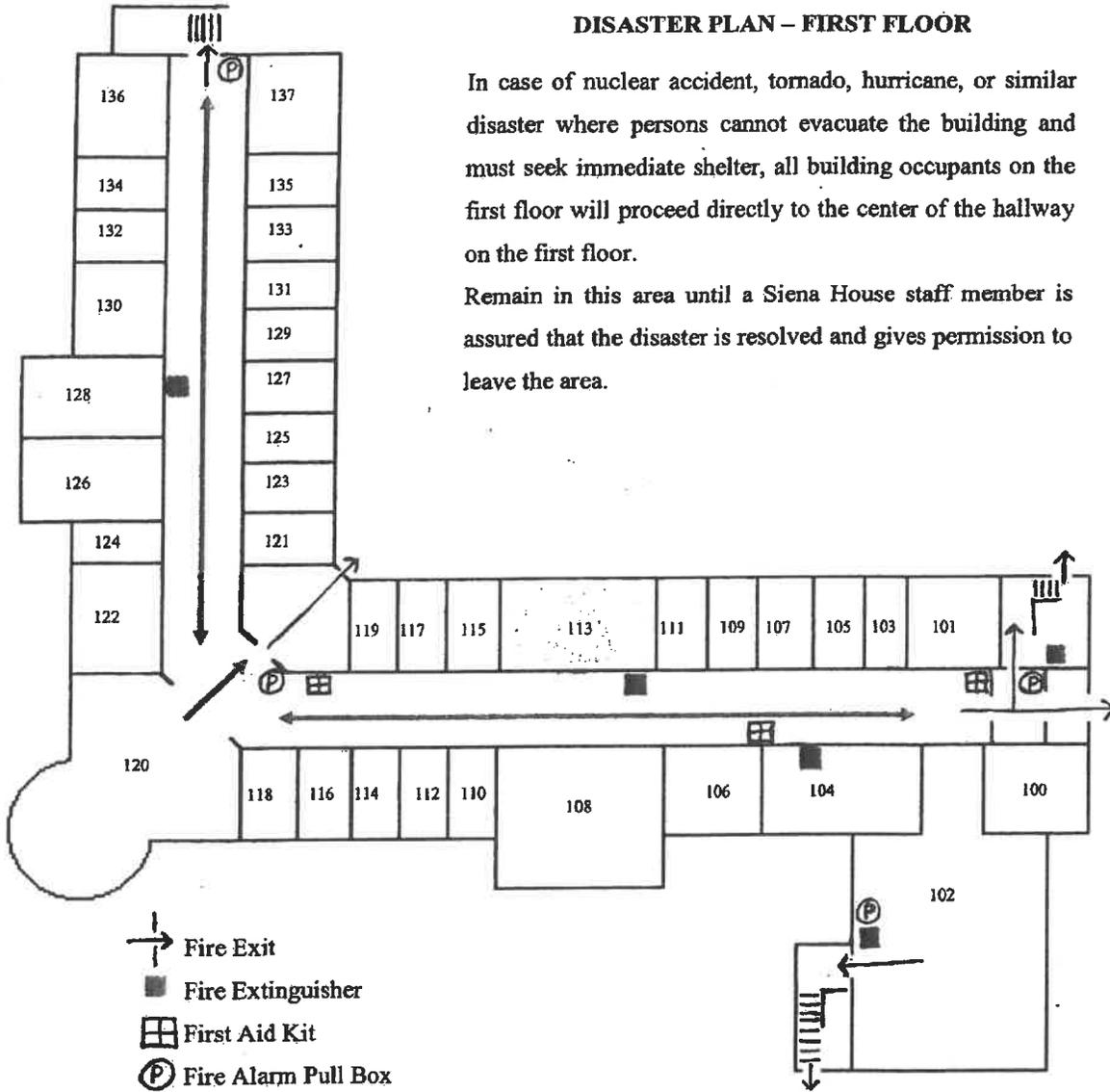
Working together, we can all improve the health, safety, and well-being of everyone at Siena House. Doing your part adds to a more fulfilling experience, and benefits everyone.  
Safety is no accident!

# SIENA HOUSE FLOOR PLAN

## DISASTER PLAN – FIRST FLOOR

In case of nuclear accident, tornado, hurricane, or similar disaster where persons cannot evacuate the building and must seek immediate shelter, all building occupants on the first floor will proceed directly to the center of the hallway on the first floor.

Remain in this area until a Siena House staff member is assured that the disaster is resolved and gives permission to leave the area.



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# ADDENDUM

# **SEXUAL ABUSE/SEXUAL HARRASSMENT - PREA**

**What is sexual abuse and sexual harassment?** The following definitions are a part of the Department of Corrections' policy, as well as part of the federal Prison Rape Elimination Act (PREA).

Sexual abuse includes –

- 1) Sexual abuse of a resident by another resident; and
  - 2) Sexual abuse of a resident by a staff member, contractor, volunteer, intern, or individual who has business with or uses the resources of the Department.
- a. Sexual abuse of a resident by another resident(s) includes any of the following: when the victim does not consent, is forced to participate in a sexual act by clear or implied threats of violence, or is unable to consent or refuse:
- 1) contact between the penis and the vagina or the penis and the anus, including penetration, no matter how slight the contact is;
  - 2) contact between the mouth and the penis, vagina, or anus;
  - 3) penetration of the anal or vaginal opening of another person, no matter how slight the contact is, by a hand, finger, or object; and
  - 4) any other intentional touching, either directly on the skin or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.
- b. Sexual abuse of a resident by a staff member, contractor, volunteer, intern, or individual who has business with or uses the resources of the Department includes any of the following acts, with or without the consent of the resident:
- 1) contact between the penis and the vagina or the penis and the anus, including penetration, no matter how slight the contact is;
  - 2) contact between the mouth and the penis, vagina, or anus;
  - 3) contact between the mouth and any body part where the actor has the intent to abuse, arouse, or gratify sexual desire;
  - 4) penetration of the anal or vaginal opening, no matter how slight the contact is, by a hand, finger, or object, and is unrelated to official duties or where the perpetrator has the intent to abuse, arouse, or gratify sexual desire;
  - 5) any other intentional contact, either directly on the skin or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the perpetrator has the intent to abuse, arouse, or gratify sexual desire;
  - 6) any attempt, threat, or request by an perpetrator to engage in the activities described in paragraphs 1) – 5) of this section;
  - 7) any display by a perpetrator of his or her uncovered genitalia, buttocks, or breast in the presence of a resident; and
  - 8) voyeurism by a perpetrator.
- c. A properly conducted pat search will not be considered sexual abuse.

## **Sexual Harassment**

- a. repeated and unwelcome sexual advances, requests for sexual favors or verbal comments, gestures, or actions of a derogatory or offensive sexual nature, by one resident directed toward another; and
- b. repeated verbal comments or gestures of a sexual nature to a resident by a staff member, contractor, volunteer, intern, or individual who has business with or uses the resources of the Department including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

## **Zero Tolerance Policy**

The DOC takes a very strong stance against the sexual abuse and/or sexual harassment of those under the supervision of the Department.

- ♦ Anyone who engages in, fails to report, or knowingly condones sexual harassment or sexual abuse of a resident shall be subject to disciplinary action and may be subject to criminal prosecution.
- ♦ A resident, employee, contract service provider, visitor, volunteer, and/or any individual who has business with or uses the resources of the Department is subject to disciplinary action and/or sanctions, including possible dismissal and termination of contracts and/or services, if he/she is found to have engaged in sexual harassment or sexual contact with a resident.
- ♦ A claim of consent will not be accepted as an affirmative defense for engaging in sexual harassment or sexual abuse of a resident.

## SEXUAL ABUSE/SEXUAL HARASSMENT – PREA (continued)

It is important to remember that while you are incarcerated, no one has the right to force or pressure you to engage in sexual acts. You do not have to tolerate sexual abuse or pressure to engage in unwanted sexual behavior regardless of your age, size, race, or ethnicity. Whether you are straight, gay, lesbian, bisexual, transgender, gender non-conforming or intersex, you have the right to be safe from unwanted sexual advances and acts.

### How To Make a Report of Sexual Abuse or Sexual Harassment

If you have experience unwanted sexual abuse or sexual harassment, or if you have witnessed an act of sexual abuse or sexual harassment, the Department has established multiple ways for you to make a report. It is important that you tell a staff member as soon as possible if you have information regarding sexual abuse or sexual harassment. You do not have to name other residents or the staff member to receive assistance, but specific information may make it easier for staff to help you.

- ♦ **Verbal Reports** - You can tell a corrections officer, counselor, Unit Manager, Chaplain, Psychologist, teacher, or any other staff member you trust. Staff members are required to inform the Department of all reports of sexual abuse or sexual harassment, but the information will only be shared with those that have a need to in order to make decisions concerning the victim's welfare and for law enforcement/investigative purposes.
- ♦ **Written Reports** – You have the right to make a written report. A written report can be given to the Supervisor or Director who will address this request in a timely manner. You may also write directly to BCC with your report. The reporting address is posted on client bulletin boards.

### What the Department Will Do In Response To a Report of Sexual Abuse or Sexual Harassment

Once the abuse is reported, there are several things that the Department will do to keep the victim safe and give the victim help to deal with the abuse.

- ♦ **Investigations** - The Department and/or other appropriate law enforcement agency will conduct an investigation. The purpose of the investigation is to determine the nature and extent of the abuse. You will be asked to give a statement during the investigation. If criminal charges are brought, you may be asked to testify during the criminal proceedings.
- ♦ **Medical Assistance** – The Department wants to make sure that you or the victim is safe and healthy. For that reason, you will be taken to the medical department for a medical examination. If the report is made within 96 hours of the abuse happening, a forensic examination will take place to try to collect any possible evidence that may be present. Because of this, there are several things to keep in mind.
  - Even though you may want to clean up after the abuse, **it is important to see medical staff BEFORE you shower, wash, drink, eat, smoke, change clothing, or use the bathroom.**
  - Medical staff will examine you for injuries, which may or may not be readily apparent to you.
  - Appropriate medical treatment will be given that may include transport to a hospital. Upon your consent, the hospital staff can also test and provide treatment for sexually transmitted infections, possible exposure to diseases such as HIV and Hepatitis, and gather any physical evidence of abuse.
  - Females may be tested for pregnancy at the hospital when appropriate.
- ♦ **Counseling Programs for Victims** – If you have been the victim of an abuse by staff or a resident(s), you may seek counseling and/or advice from a psychologist or chaplain. Crisis counseling, coping skills, suicide prevention and mental health counseling are all available to you. In addition, you may request to speak with an outside, independent rape crisis counselor. Most people need help to recover from the emotional effects of sexual abuse.

Remember.....Sexual abuse is a serious crime. The Department will investigate all reported sexual abuse and sexual harassment incidents. While you are incarcerated, no one has the right to pressure you to engage in sexual acts. You do not have to tolerate sexual abuse or pressure to engage in unwanted sexual behavior. You have a right to be safe and free from ALL sexual abuse and sexual harassment.

## Community Corrections – Universal Set of Rules

*All clients, upon admission, review, initial and sign BCC's Universal Set of Rules as additional behavioral guidelines for treatment at Siena House.*

Our goal is to provide individuals with a safe opportunity to successfully re-enter the community while assigned to a DOC operated/contracted facility. Basic security measures are enforced for the protection and safety of all who enter the center and live in our community.

**NOTE:** Resident will initial each rule and sign at the bottom for acknowledgement.

1. I will not possess or use any type of weapon. \_\_\_\_\_
2. I will not engage in physically assaultive/destructive behavior. \_\_\_\_\_
3. I will not threaten an employee or other person with bodily harm. \_\_\_\_\_
4. I will not engage in any behavior that threatens the safety and security of the center. \_\_\_\_\_
5. I will not sexually harass or sexually assault/abuse another person. \_\_\_\_\_
6. I will comply with the search of my person, vehicle and/or property. \_\_\_\_\_
7. I will not interfere with drug interdiction efforts ( Urinalysis, Breathalyzer, K9,etc. \_\_\_\_\_
8. I will not possess **actual or suspected** alcohol, illegal drugs, unauthorized drugs, drug paraphernalia or **mind altering synthetic substances.** \_\_\_\_\_
9. I will not engage in any sexual acts with others or sodomy inside the center. \_\_\_\_\_
10. I will not leave the center without authorization (LWA) or fail to return (FTR) from authorized absence. \_\_\_\_\_
11. I will comply with all sections of the PA Crimes Code, **vehicle code and local ordinances.** \_\_\_\_\_
12. I will not use alcohol, illegal drugs or unauthorized drugs. \_\_\_\_\_
13. I will comply with **all treatment plans**, board/field conditions and/or sanctions imposed by the PA Board of Probation and Parole **and/or the Department of Corrections.** \_\_\_\_\_
14. I will not use abusive, obscene or inappropriate language directed to or about another person. \_\_\_\_\_
15. I will **complete assigned tasks, follow center rules/directions and comply with interventions/sanctions given by staff.** \_\_\_\_\_
16. I will not go to unauthorized locations and I will return to the center when expected or directed. \_\_\_\_\_
17. I will not violate the Clean Indoor Air Act (I won't smoke inside center). \_\_\_\_\_
18. I will not possess contraband or any other item not approved by the PA DOC inside the center. \_\_\_\_\_
19. I will notify the center of any change in my employment status or schedule and provide paychecks/**pay statements** to the center for verification of work. \_\_\_\_\_

