



Hanton House

Resident Handbook

69 Clinton Street
Chelsea, Massachusetts 02150

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HANTON HOUSE MISSION

Hanton House assists adults seeking recovery from co-occurring substance use and mental illness in leading happy, healthy and fulfilling lives as members of their community through individualized, evidenced based and compassionate treatment.

HOURS OF OPERATION

Hanton House is a residential treatment facility that is open 24 hours a day, seven days a week, 365 days per year. The program is staffed 24 hours a day.

EQUAL OPPORTUNITY POLICY

No resident will be denied admission to the Hanton House on the basis of race, religion, color, sex, gender identity, sexual orientation, disability status, national origins, ancestry or the fact that they have been terminated from another facility.

ASSISTIVE EQUIPMENT POLICY

Hanton House complies with all applicable Federal and State laws and regulations relative to the use of assistive equipment, including trained assistance animals.

The Hanton House will allow any resident entering the house who requires personal care assistance (PCA) to arrange such services.

Individuals at the Hanton House who require separate transportation due to a physical disability will be supported in acquiring a safe transportation alternative.

HANTON HOUSE ADMISSION POLICY

All prospective residents **MUST** have a screening with the Intake Coordinator, or a designee, prior to entering Hanton House to determine eligibility and appropriateness for the program.

At the time of the interview, the program will be explained to the applicant. The applicant will be offered a copy of the Resident Handbook and encouraged to review prior to acceptance of a bed.

If the applicant is deemed appropriate for acceptance to the Hanton House, the applicant will be scheduled to enter the program. If there is a waiting list, the applicant will be placed on the waiting list. Priority may be given to those who are responsive to outreach efforts with Hanton House while on the waitlist.

A resident will be asked to sign consent to treatment form, a release for an emergency contact, and primary care physician release of information to NSMHA prior to or upon resident transfer. Refusal to provide signed releases for an emergency contact or primary care physician will be documented in the resident's record.

The program may not deny admission to an individual solely based on their medication prescribed. The program does not require a designated amount of medication for admission or residents who lack current prescription refills and the program must work with residents to coordinate medication refills. The program may not deny admission to an individual who withdrew from

treatment against clinical advice on a prior occasion, relapsed from earlier treatment or filed a grievance regarding an action or decision of the Hanton house.

The Program shall comply with all applicable state and federal anti-discrimination laws such that the Provider equally evaluates all potential admissions regardless of the source of payment, and may not deny admission on the basis of disability, race, color, ethnicity, religious creed, national origin, sex, sexual orientation, gender identity,-age, genetic information, ancestry, or status as a veteran.

The program may deny admission to individuals who refuse to provide information necessary to complete an assessment and treatment plan, provided the Licensed or Approved Provider shall maintain a log of applications denied, reasons for denial and referrals made, and shall make this documentation available to the Department for inspection.

RESTRICTIVE CRITERIA FOR ADMISSION

Services cannot be provided at the Hanton House to residents who:

- Do not meet ASAM criteria for 3.1-3.5 level of care
- Does not meet diagnostic criteria for a mental health disorder
- Display behaviors or exhibit symptoms that may endanger the health and/or wellbeing of staff members or other residents.

RESIDENT RIGHTS

The Hanton House guarantees these rights, and shall provide for translations for residents who do not read in English.

- Residents may terminate treatment at any time.
- Residents are free from physical and psychological abuse.
- Residents have the right to confidentiality and their record's secured.
- Residents will have access to treatment provided on a non-discriminatory basis, which may involve the development and/or implementation of accommodations needed to ensure equitable access, so that services can be provided without regard for ability, race/ethnicity, gender identity, sexual orientation, religion, age, or language spoken
- Residents will not be denied the right to shower, bathe and meet personal hygiene needs in a reasonable manner, at a reasonable time.
- Residents are never subject to strip searches or body cavity searches.
- Residents may exercise choices regarding participation in religious services of their choosing and have the freedom to practice their religious faith.
- Residents have the right to request referral to a facility which provides treatment in a manner to which the resident has no religious objection.
- Residents have access to their record in the presence of staff unless there is a determination that access to parts of the record could cause harm to the resident. They may challenge information in their record and insert a letter of clarification that will remain in the permanent record.
- Residents have the right to obtain a copy of their records.
- Residents have the freedom from coercion.

- Residents will be treated in a manner sensitive to their needs which promotes dignity and self-respect.
- Residents will have drug screens conducted in a manner which preserves their dignity and, when the drug screen is by urine sample, accommodates any medically confirmed inability to give urine by providing for an alternate effective means of screening such as oral swab.
- Residents may have visitors at scheduled times. Visits by attorneys and personal physicians will not be limited.
- Residents will have access to regular physical exercise at times defined by the clinical team.
- Residents have control over their appearance on program premises; however the program may prohibit attire which interferes with treatment.
- Residents may receive sealed letters.
- Residents may be given regular and private use of the telephone. During evaluation phase, telephone use is monitored.
- Residents have the right to file a grievance with NSMHA and/or BSAS for any actual or perceived violation of rights. The grievance policy is posted on site.
 - NSCS Grievance/Privacy Complaint Line: 617-912-7736

PROGRAM RULES

Any violation of the following rules is subject to consequences up to and including discharge from the program.

- NO violence or threats of violence or indirect threats of violence toward other residents and/or Staff and/or property. This includes any kind of intimidating behavior.
- NO weapons, drugs or unsafe materials to be used or brought on the premises.
- NO stealing
- NO sexual relations or physical contact or intimacies of any kind are permitted between residents (i.e. hugging, touching, sitting on another's lap, horseplay, etc.)
- NO smoking or use of any tobacco products is allowed in the house.
- NO major deviation from planned activities.
- NO unscheduled visitation of any kind (except with physicians and attorneys).
- NO use of derogatory language.
- NO breach of confidentiality (individual or group)
- NO gambling or possession of scratch/lotto tickets.
- NO panhandling.
- NO behavior of any kind that relates negative/abusive lifestyle.

ENTERING THE PROGRAM

- Residents should come with clothing and toiletries. Failure to arrive without these items will never result in exclusion from services. However, the program may not be able to support a request to go retrieve belongings from another site once admitted to Hanton House.
- All residents are asked to provide an Emergency Contact.

EXITING THE PROGRAM

- Residents have the rights to terminate services and leave the Hanton House at any time.

- The Hanton House strongly advises all residents to follow the advice of treatment team and participate in a planned discharge, so the treatment team is better able to set you up with necessary services and supports.
- Discharge to a shelter is the last resort, and the Director of Addiction Services must be notified and approve discharge to a shelter.
- Once a resident has willfully left the property, they are considered to be discharged.
- When a resident leaves, they are expected to take their belongings with them. Any belongings left at the program must be picked up within 72 hours, unless an alternative time is arranged with staff. Only the resident or emergency contact can retrieve belongings. Should a resident want someone else to retrieve their belongings they should give explicit and clear consent and sign a release of information for that individual.
- The Hanton House is not responsible for any items left behind that are lost or stolen.

HOUSE RULES

- No televisions in the bedrooms
- Everyone is to be treated with respect. Gossiping, raising your voice, name calling, bullying or any other behavior considered to be disrespectful is not permitted.
- Residents should not “staff split,” meaning a resident is not to go to one staff person with a question and then go to another with the same question.
- Deviation from a planned programming, without prior approval from staff, is not permitted.
- Residents are not to meet significant others, family members or other non-program related people at house meetings, recreational activities or anywhere else unless approved by treatment team.
- Residents have a responsibility to maintain safety of the community at Hanton House. Awareness of unsafe behaviors should be reported to staff.
- Residents should be prepared to engage in treatment for their day when they come on the floor at the designated time.
- Residents must inform staff if they are planning to leave the house.
- Residents should never under any circumstances sign anybody other themselves in or out of the house, off the floor or in the Quest log.
- Food is only permitted in the kitchen and dining room, unless approved by staff in advance.
- The TV is permitted only during designated free times.
- There should never be more than one person at a time in a bathroom.
- Staff will check all items, bags and other packages before they can enter the house with resident present.
- Staff is subject to searching rooms and bags at any time. Residents must be present.
- Residents must ask to enter before entering either the staff office or the med room and be acknowledged by staff.
- Residents are not permitted to have candles or wax in the house at any time. This is a fire hazard.
- Boundaries should be maintained at all times, physical contact or any type of sexual relationship is considered a boundary violation.
- Holiday schedule days follow the same schedule as Saturdays, except there are no visits (unless special requested).

- Lending, borrowing or purchasing items for other residents is discouraged. If you feel it is necessary we ask that you notify staff so we all have an understanding of the agreement.

MEDICAL EMERGENCIES AND OVERDOSE RESPONSE

- If a medical emergency should arise, staff will contact 911 and get the resident proper medical care.
- The COE program has several Narcan kits located throughout the program building. In the case of a suspected overdose, staff are trained to administer Narcan and contact 911.

GROUPS

- Sleeping and/or eating during groups is not permitted. Water is permitted.
- Residents are expected to take care of all of their personal needs before and after groups. Residents should not leave the group unless it is absolutely necessary and they have staff permission.
- Residents are expected to be on time to group.

FAMILIES SUPPORT AND OUTREACH

- Residents are encouraged to identify members of their community including family and/or loved ones who will be supportive of treatment in the program.
- Hanton House offers a weekly family support group for members of the family interested in processing the resident's relationship to substances and assist in their role as caregivers.
- Residents will have a family process group each week to discuss family dynamics with peers.
- Residents will be given family support through case management.
- Supportive members of the resident's community are encouraged to participate with Hanton House's weekend visitation.

VISITS & DROP OFFS

- Visitors must be approved in advance by staff. Staff may request to meet or speak with visitor prior to approving a visit.
- Visits occur on Saturday or Sunday during approved times.
- All visitors must sign in the log provided at the front of the house. By signing in, visitors are agreeing to abide by Hanton House policies as outlined in the Visitors Log. Failure to do so may result in the staff asking a visitor to leave. Any visitor can be turned away if they are inappropriate, rude and/or appear intoxicated or inappropriately dressed.
- Residents may receive drop-offs (ie., clothes, money, etc.) on days and time approved by the staff.
- Items must be given directly to the resident and opened in front of staff for inspection. If a resident is not present, the drop off will be held in the staff office. Hanton House is not liable for any stolen or misplaced objects.
- Money Drop-offs: Resident will be given a receipt of the money being dropped off.
- Any and all food donations must be shared among all the residents.

PRIVILEGE MODIFICATIONS

- If residents are not following program expectations, it may result in modifying certain privileges.
- Residents will receive the following interventions prior to privilege modification taking place:
 - Verbal warning
 - Therapeutic intervention
 - Meet with clinical staff to discuss behavior
- Privileges can always be earned back with positive behavior and program participation.
- Any privilege listed under “Resident Rights” will not be modified by staff.

CELL PHONE POLICY

- Cell phones are a privilege. They are never permitted during structured programming, only during designated free time.
- If cell phones are found to be used during groups or house meetings you can lose cell phone privileges for a period of time.
- When cell phones are in possession of staff/been turned in they will be locked in the safe.

RECREATION

- Residents are never restricted on exercise. However, residents may be restricted on time/location of exercise. For example, attending the gym is a privilege, should that privilege be revoked for any reason, you still have the right to fresh air and exercise on site.
- Residents can utilize the library at designated times or if approve.

MEALS & KITCHEN

- Oven and Stove should only be used during scheduled meal times. Microwave, Air Fryer, and snacks can be utilized during non-meal times.
- Hanton House will not restrict food. There will be healthy options available 24/7. However, residents are asked to notify staff before taking food from the fridge or pantry outside of scheduled meal times so food availability can be monitored.
- If you use or take the last of any item, it is your responsibility to log it on our food shopping list and notify staff.
- Breakfast, lunch, and dinner are each 30 minutes long. During lunch and dinner, residents should remain in the dining room. All residents should eat dinner together at the dining table.
- Gloves should be worn at all times when working in the kitchen. Hair nets or hats must also be worn at all times when working in the kitchen. If you leave the kitchen, a new pair of gloves must be worn upon returning.
- Removing anything from the produce storage area (basement) without permission from staff is considered to be stealing.
- Residents who have a snack and create dirty dishes and/or utensils are responsible for washing and cleaning up their own mess. No dishes are to be left in the sink.

LAUNDRY

- Residents will have designated times to complete laundry.

- Residents should not touch each other's laundry.
- All laundry baskets should be out of the laundry room no later than 10pm unless approved by staff.

SMOKING POLICY

- Hanton House DOES NOT allow smoking, vaping or dipping inside the building. Smoking inside can be cause for immediate discharge.
- Uses of tobacco items are restricted to outdoors during fresh air breaks.
- Tobacco use is discouraged. Any resident looking to quit or reduce their tobacco use will be fully supported by staff during this process.
- The program provides time for fresh air breaks during which the residents may smoke in designated areas outside the building where there are appropriate receptacles for disposal of the cigarettes.
- Fresh air breaks should be no longer than 15 minutes.
- When coming in from a fresh air breaks, the last resident in the house should lock the door.
- No smoking during fire drills.

BEDROOM EXPECTATIONS

- Residents are NOT allowed to go into each other's rooms. The only room that you should be in is your own.
- Beds should be made properly. Nothing should be lying out on beds. No items should be placed on top of closets. Nothing should be hanging from closet doors. All items should be off the floor, neat, and organized. This is a safety hazard and will be monitored by staff.
- Bedroom doors should **never** be locked and doors are always to be propped open when no one is in the room.
- Windows should be left shut unless approved by staff.
- Food (including candy) is not allowed in any resident room. The only allowable beverage in any resident room is water.

BED REST POLICY

- Bed rest is permitted anytime it is recommended by a Doctor. Documentation is required.
- Bed rest without Doctors recommendation (ex: resident feeling ill) should be requested to staff. If the illness or ailment is resulting in any prolonged bedrest need (>24 hours) the resident will be requested to consult a doctor.
- Unless the bedrest explicitly states otherwise, residents should still come onto the floor for medication and meals.
- If the resident is unable to come onto the floor for meals, it is the responsibility of the staff to check with residents on bed rest if they would like to attend the meal. Meals in Room may be granted under special circumstances.
 - Residents will be required to sign off on "Bed Rest Meal Log" indicating they received or refused a meal.

DRESS CODE

- All clothing should fit properly.
- Appropriate undergarments should be worn at all times.

- No hats, clothing or jewelry that has a negative or inappropriate connotation are allowed.
- No halter, T- strap (spaghetti strap) or strapless shirts are allowed.
- Shorts and skirts must be an appropriate length – staff may use their discretion.
- No revealing of one’s undergarments.
- Footwear –Residents MUST wear closed-toed shoes when working in the kitchen.
- Sandals are not allowed during kitchen or job function duties.

Staff may use their discretion at any time and request that a resident change any clothing that is deemed to be inappropriate. If asked to change, resident has right to appeal that decision with a Manager.

SHOWER POLICY

- Showers are encouraged daily. Residents are asked to not abuse their time in the bathroom. Shower’s should be done efficiently and should keep in mind others who need to use the shower. Residents should NOT exit the bathroom until fully clothed.
- Showers can be taken as long as it does not interfere with your scheduled treatment.
- Rinse out the shower, clean out the sink, and sweep up your hair when done.
- Remove all personal hygiene products and any personal items when finished.

TRANSPORTATION & DRIVING

- Residents without transportation will be given MBTA fare for travel to and from necessary medical and legal appointments. This does not include personal passes or individual 12-step meetings. Exceptions may be made with manager’s approval.
- Residents who have money must pay for their own transportation.
- Residents should request approval from staff prior to arranging rides with non Hanton House staff.
- Transportation in Hanton House van requires seatbelts to be worn at all times.
- No cell phones are permitted in the front seat of the van.
- There will be NO smoking in the van.
- When parked, the van must be locked at all times.
- Residents cannot drive the Hanton House van.

PASSES

Pass Length	Frequency	Minimum Phase
None	None	Evaluation
4 Hour Pass	Bi-weekly	Phase 1
4 Hour Pass	Weekly	Phase 2
4 Hour Pass	Weekly	Phase 3
10 Hour Pass	Bi-weekly	Phase 3
24 Hour Pass	Weekly	Phase 4
48 Hour Pass	Bi-Weekly	Phase 4

- No more than one pass per week, unless extenuating circumstances occur and staff have approved.
- If the pass is to be with someone the staff has not met, then a meeting should be scheduled with a staff person prior to the pass, either in-person or by video/phone at staff discretion.
- When writing out your pass request it should contain these details:
 - Location(s)
 - Who you will be with
 - Transportation (to and from)
 - The overall plan of the day(s)
 - Must provide phone contact info of who you will be with (if Applicable).

PASSES IN HOUSE

- Passes are permitted in house as long as it is outlined in your pass request and approved by Program Manager. We do strongly encourage you to utilize your pass to spend time outside the house and to engage in the community (i.e. see a movie, attend a meeting, go to the library).
- If you take a pass in house you are still expected to abide by house rules.

ELECTRONICS POLICY

- Music devices are allowed.
- Devices are expected to be at a respectable volume.

MEDICAL APPOINTMENT PROTOCOL

- Every attempt should be made for outside appointments to be scheduled outside of group times.
- The resident is required to bring back written documentation from all appointments stating the arrival time and departure time along with a discharge summary of the appointment.

MEDICATION ASSISTED TREATMENT

- Medically Assisted Treatment refers to the treatment of substance use disorder with certain medications.
- These medications have been proven to be effective in decreasing overdose, reduce cravings and relapse.
- Some of these medications include, but are not limited to: Suboxone, Vivitrol, Oral Naltrexone, Methadone, Buprenorphine
- All residents are encouraged to explore Medication Assisted Treatment with their prescriber to determine if they are appropriate for this treatment.
- Hanton House will provide psycho education on medically assisted treatment to residents as part of regular programming, but do not hesitate to reach out to a nurse, case manager, clinician or doctor about any questions you may have.

MEDICATION PROTOCOL

1. During medication times, residents should gather in the living room.
2. One-by-one residents will be called to the medication room.
3. The resident will stand on the opposite side of the med table where staff is sitting.
4. All medication and any changes will be reviewed a by clinical team member.
5. When bringing medication into the program, residents will count in all of their medications. Medications will be logged on current medication administration sheet and signed off by both resident and staff. Medication administration sheet must report med name, dosage, amount, frequency and route.
6. Count medication must be logged and counted at every administration on medication administration sheet when being taken.
7. When bringing back a new count medication, residents will count the new medication and add it to their existing count medication and update the medication administration sheet to reflect the new amount.
8. Staff will observe residents removing medication from their bag, check resident name and medication being taken. Staff confirms ingestion (by mouth check to ensure the resident is not cheeking).
9. Both staff and resident must sign off by initialing the box on the medication administration sheet.
10. Staff monitors locking of the med bag and that the bag and key are returned to the appropriate places.
11. Staff will always be present but all residents are entitled to privacy and confidentiality from other residents during the medication process.
12. Over the counter medications including Acetaminophen and Ibuprofen can be kept within the resident's med bag and administered upon request. All other over the counter medication will require a prescription.
13. The Nurse Manager is responsible for monthly review to ensure compliance.
14. If there are any missing medications, an Incident Report will be completed and staff will review protocol.
15. If medications need to be discontinued, it will to be documented in the Med Discontinued Binder and medication should be placed in the chemical disposal drawer of the filing cabinet.
16. Medication will be properly disposed of by Program Manager or Nurse Manager.

EMPLOYMENT / JOB SEARCH

- Residents will work with case manager regarding job search plan.
- When a resident would like to be approved for job placement, they must present these details for approval: Employer name, where the job is located, method of travel to and from, job details, position, how you will be paid.
- Residents are encouraged to seek employment opportunities that are conducive to their recovery. Employment opportunities that may produce additional challenges to your recovery will result in a meeting with the clinical team to express concerns and explore other options.

WORKER EXPECTATIONS

- Working residents are allowed a maximum of 40 hours within a 5-day week. Part time work will be encouraged with gradual progression to full time.

- Residents are encouraged to set up payment with Direct Deposit if possible
- If work conflicts with required aspects of programming (for example, toxicology screen or groups) you may be asked to make up that programming at another time.
- Worker expectations may be subject to change on an individual basis, as requested by the clinical team.

RECOVERY MEETING GUIDELINES

- Hanton House encourages residents to build community based sober support networks. A common way to do that is through sponsorship and recovery meetings, including but not limited to AA, NA, SMART Recovery, etc. Residents are encouraged to try attending meetings. If a resident feels that meetings are not helpful to their recovery, staff will meet with the resident to individualize methods to build community based sober supports, some other options may include attending the local recovery or community center, joining athletic teams, book clubs, church, etc.
- If you are a lower phase, you are to attend meetings with an approved resident (staff will approve).
- We do not give out house t-passes for elective outside meetings. Transportation to 'full house' meetings will be provided.
- All residents are expected to follow the meeting guidelines when attending an outside meeting.
- All residents are expected to arrive on time to meetings, should not speak out of turn during the meeting, and must return from breaks on time.
- In-house meetings are a required part of programming. Concerns about attending in house meetings should be brought to a member of the clinical team. Residents are expected to sit as a group at outside full house meetings.
- Residents are not to meet significant others, family members, or other non-program related friends at 12 Step meetings, unless approved by staff in advance.
- Residents should never receive anything from anybody at a meeting, except a phone number.
- It is expected that residents are to attend the **entire** meeting that they have selected.

SPONSORSHIP PRIVILEGES

- If you obtain a sponsor, staff will have to meet with them before you are able to attend an outside meeting with them.
- Sponsors may visit the house upon staff approval. Staff will approve the day/time. It should not interfere with any other group.

QUEST LAB PROCEDURE

- When Quest Labs comes into the building, all residents must be present in the living room.
- Residents will provide toxicology screens one at a time.
- No cleaning chemicals will be used at any time until the lab leaves the building.

HANTON HOUSE JOB FUNCTIONS

- Weekly job functions are to be assigned and discussed during Sunday Meeting group. Responsibilities begin that afternoon.

- Job functions must be completed and checked off before the times specified on this sheet.
- If you are out of the house for any reason, you must either get someone to step up for your job or the staff should give you permission to leave the job. If your job was left uncompleted, you must complete it after you arrive back at the house. Job functions will be checked by the staff, and there will be consequences if the job is not completed.
- If the House is out of any of the typical items, the staff must be made aware.

1st Floor Bathroom *(Daily)*

Wipe down all surfaces including sink and toilet in all bathrooms
 Sweep as needed
 Stock Paper towels and toilet paper
 Clean bathmat by shaking outside and washing as needed
 Take out trash and replace bags

1st Floor Pantry Closet *(Daily)*

Wipe down all surfaces
 Sweep as needed
 Stock shelves and organized

After Snack Clean Up *(Daily)*

It is your responsibility to wash any dishes left in sink
 Put dishes in and start the dishwasher
 Wipe down kitchen surfaces as needed
 Return any food or drink items to the produce area

Refrigerators *(Daily)*

Clean refrigerator in kitchen
 Check logs on all refrigerators and freezers to make sure they are being signed off

2nd Floor Bathrooms *(Daily)*

Wipe down all surfaces including sink and toilet in all bathrooms
 Sweep as needed
 Stock Paper towels and toilet paper
 Clean bathmats by shaking outside and washing as needed
 Take out trash and replace bags

Trash Clean Up *(Daily)*

Change and replace all trash bags in the house (not in the bathrooms)
 Empty out cigarette receptacle in smoking area

Stairways and Hallways *(Daily)*

Sweep stairs and landings on all floors
 Wipe down railings
 Mop as needed

Basement *(Daily)*

Make sure the common area is neat and straighten out all chairs
Extra chairs should be put away and trash picked up

Clean Van *(Twice per week)*

*Make the staff aware that you are exiting the building to perform this chore
Clean the entire van including interior, floor, windows, seats, and rugs
If anything is damaged, inform staff immediately

*****COVID CLEANER** *(Twice Daily: Morning and Evening)*

Use Clorox wipes or Lysol to:
Sanitize all doorknobs in the building
Wipe down all surfaces in common areas

Courtyard Sweeps *(Daily before it gets dark)*

*Make the staff aware that you are exiting the building to perform this chore
Sweep the entire smoking area/walkway
Remove and properly dispose of any cigarette butts and other debris

Coffee Clean Up *(Before and after every meal)*

Have coffee made before breakfast and lunch - You must plug in the coffee pot 30 minutes prior to meal time
Clean coffee pot and set up for next meal
Ensure that coffee area remains clean throughout the day
Restock sugar, creamer, and mugs as needed

Living and Dining Room *(Daily)*

Wipe down all tables including coffee / serving tables
Sweep the living room and dining room floor
Mop as needed

Gardening

Take Compost out 1x per day after dinner
(Twice Weekly for below tasks: before it gets dark)
*Make the staff aware that you are exiting the building to perform this chore
Pick up any trash on front and back lawn area
Remove any debris from bushes, fences and gate
Weed mulch area as needed

Indoor Plants *(Once per week)*

Clean out any dead leaves or shrubs, wipe down pots and stands, water if needed.
Water 1x per week

Rags *(Once per week)*

Make sure there is enough rags for cleaning next day. May have to cut rags from donation clothes

Recycling *(Daily)*

Ensure that all recyclables are rinsed out and cleaned
 Bag all recyclables and take bags to basement for storage until trash day

CRISIS MANAGEMENT

- Residents at times may experience an increase in symptoms, feel distressed or otherwise be in a crisis. There are a variety of supports and services available to residents who are experience this. Some, all or a variety of these interventions may be appropriate:
 - Residents may take some space in the bedroom or another designated safe, quite area of the house/property.
 - Residents may request to meet with staff individually to process and practice coping skills and de-escalation
 - Residents may complete a Risk Assessment, PHQ-9 or other measureable assessment to gain better understanding of phase of risk
 - On-call manager may be called to consult on additional supports and options
 - On-call psychiatrist may be called to consult on additional supports and options
 - Residents may call the BEST team. The BEST team can offer a variety of interventions not limited to but including
 - Telehealth or in person assessments
 - If a different phase of care is indicated, provide referral, transportation and care coordination in getting resident to other supports/programing
 - Safety planning
 - If there is an imminent risk of safety 911 will be called.

HANTON HOUSE PHASE SYSTEM

The following are expectations for all residents, regardless of phase in program:

- Attend all In-House groups and activities
- Complete weekly chores/job function
- Attend at least one case management session
- Attend all scheduled appointments

Phase	Goals	Benefits
Evaluation 2 Weeks	-Apply for Entitlement Benefits -Identify Primary Care Provider and set up appointment (unless recent proof of physical is provided) -Review House Manual and sign off stating you understand rules of program -Complete a treatment plan with a member of the treatment team -Determine budget goals for spending (store run, etc)	-Visitors, during approved visit times
Phase 1 30 Days	-Show active engagement in groups -Begin to use "I" statements (example, I feel) -Develop a housing plan with your case manager for after	-May go on a weekly half hour walk alone -Visitors, during approved

	Hanton House -Answer the question “What do I hope to gain from Hanton House?” - Review, revise or update your treatment plan	visit times - 2 outside meetings per week. -Bi-weekly 4 hour pass
Phase 2 60 Days	-Engage with a sober support (sponsor, recovery coach, etc) in the community you plan to keep in touch with post Hanton House -Identify triggers of your mental illness and substance use and write them down - Review, revise or update your treatment plan	-Attend 3 outside self-help meetings per week -May go on two 30 minute walks alone per week -Visitors, during approved visit times -Weekly 4 hour pass
Phase 3 90 Days	-Viewed as a mentor/leader within the Hanton House -Take an active role in modeling appropriate behavior for newer residents -Identify coping skills and/or supports to help manage triggers identified in Phase 2 -Develop a resume for potential employment or volunteer opportunities (or apply to educational/vocational program) - Review, revise or update your treatment plan	-Weekly 4 hour pass -Biweekly 10 hours pass (cannot be combined with 4 hour pass) -Attend up to 4 self-help meetings per week -Take up to three 30 minute walks alone per week
Phase 4 90 Days	-Complete a discharge plan with staff, which includes after care (individual therapy, psychiatry, recovery coaching, etc) - Review, revise or update your treatment plan - Start applying for employment	-Weekly 24 hour pass -Bi-weekly 48 hour pass (cannot be combined with 24 hour pass) -Three 30 minute phone calls per week -Attend up to 5 self-help meetings per week

SUCCESSFUL GRADUATION

- A resident is eligible to graduate when the resident has successfully met the criteria for all phases and they have devised an acceptable relapse prevention plan and made arrangements for transitioning back into the community.
- Graduation ceremonies are scheduled after approval by the clinical team. The resident must present a thorough aftercare plan at a Staff meeting. When the plan is approved, a graduation date will be scheduled.
- Residents are encouraged to invite family and support system friends to the ceremonies. Tributes are paid to the resident, a graduation certificate is awarded.

VOLUNTARY TERMINATION

- Prior to program completion, residents may elect to depart from the program. Staff may assist the resident in making alternative arrangements for housing. However, once a resident decides to leave the program, they are allowed to arrange pick up, pack their

belongings and then then leave the house. Residents are informed of the outpatient services available to them.

- Any resident who is prescribed medication will be given their supply of medication(s) along with funds. In circumstances where a manager/supervisor feels giving the resident their full supply of medications would present a safety risk, staff will recommend a 24-hour supply of medications be given and the rest of the medication be picked up by the resident the following day.

INVOLUNTARY DISCHARGE

- Residents who have broken program rules that impact the safety of themselves or others may be discharged immediately.
- Residents who are continuously non-compliant or disruptive to the program will be placed on treatment contract. The clinical team will remove the program intervention when the resident is demonstrating an improvement in their behavior.
- If no improvement is observed over a period of time, the clinical team may decide to discharge the resident. All discharged residents are notified of appeal process and welcomed to register for outpatient services.
- Any resident who is prescribed medication will be given their supply of medication(s) along with funds. In circumstances where a manager/supervisor feels giving the resident their full supply of medications would present a safety risk, staff will recommend a 24-hour supply of medications be given and the rest of the medication be picked up by the resident the following day.

FOR VOLUNTARY OR INVOLUNTARY DISCHARGE:

- Residents will receive their funds, medication, and all belongings upon discharge.
- If no money is available from a personal account, the resident may be given MBTA fare at staff discretion.
- Residents must call to make arrangements with management to return to the house during clinical hours to pick up any remaining funds.

MEDICAL DISCHARGE

- Beds will be held up to two weeks for residents in need of inpatient medical treatment.

TRANSFER OR REFERRALS

- If a resident is accepted into the Hanton House, but is found to be inappropriate for the program by the Clinical Team, the Hanton House Staff will refer the resident to a setting that can better meet the needs of the resident.

RE-ADMISSION POLICY

- Residents who are involuntarily discharged from the Hanton House may be considered for readmission on a case-by-case basis.
- The treatment team will assess the status of each applicant and the ramifications on the community within the program to determine the appropriateness for admission.