

Updated 7/22/24

# *Meridian House Resident Manual*

*Updated 7.22.24*



408 Meridian Street, East Boston, MA02128

617-569-6050

[sudreferrals@northsuffolk.org](mailto:sudreferrals@northsuffolk.org)

**TABLE OF CONTENTS**

MISSION .....2

WHAT TO EXPECT AT MERIDIAN HOUSE: A SUMMARY .....2

THERAPUTIC COMMUNITY .....2

EQUAL OPPORTUNITY POLICY .....2

ASSISTIVE EQUIPMENT POLICY .....3

ADMISSION POLICY .....3

RESIDENT RIGHTS .....4

CHAIN OF COMMAND .....6

THE SLIPPING SYSTEM (L.E'S).....6

RESIDENT BEDROOMS .....8

ACTIVITY LOGS .....9

VISITS & DROP OFFS .....9

PHONES AND TECHNOLOGY POLICIES .....10

CHILDRENS PHONE CALL POLICY.....10

MEALS & KITCHEN .....11

LAUNDRY.....11

SMOKING POLICY .....11

SIGNING OFF THE FLOOR .....12

BED REST POLICY .....12

MERIDIAN HOUSE DRESS CODE .....12

SHOWER POLICY.....12

THE BASEMENT .....13

TRANSPORTATION & DRIVING .....14

PASSES .....14

MEDICAL APPOINTMENTS .....15

MEDICATION POLICY .....15

EMPLOYMENT .....17

RECOVERY MEETINGS GUIDELINES .....18

SPONSORSHIP .....18

LAB PROCEDURE.....18

MERIDIAN HOUSE CHORES .....19

JOB FUNCTIONS.....22

SUPERVISOR ON BOARD (S.O.B.) RESPONSIBILITIES .....23

LEVEL SYSTEM .....26

TERMINATIONS .....31

MERIDIAN TERMS GLOSSARY .....32

## MISSION

Our mission at Meridian House is to support adults seeking recovery from substance use disorders in their goal to lead happy, healthy, and fulfilling lives. Our program provides the structure for individuals to become productive members of their community through specialized, evidenced-based, and compassionate trauma informed treatment. Specifically, Meridian assists individuals in changing their behaviors, and empowers them to take responsibility for their own decisions.

## WHAT TO EXPECT AT MERIDIAN HOUSE: A SUMMARY

Meridian House is a co-ed, residential treatment facility that is open and staffed 24 hours a day, seven days a week, and 365 days a year.

Meridian House is an enormous, beautiful, 18th-century mansion overlooking the Boston Harbor and the Tobin Bridge. Residents have gender-specific sleeping arrangements. Bedrooms are spacious singles, doubles, and triples. There is a kitchen and large dining room with a back deck which overlooks the harbor. Residents decide on the weekly menu and prepare their own meals as a house.

Programming is highly structured, and residents participate in clinical groups, self-help meetings, recreational activities, job functions/chores, case management sessions, etc. The Meridian House is “resident run,” and staff trust in resident’s leadership potential and capacity to recover. Autonomy is encouraged in many aspects of the program. Our staff is comprised of master’s level Licensed Social Workers, Licensed Alcohol and Drug Addiction Counselors, Certified Alcohol and Drug Addiction Counselors, Recovery Specialists, Case Managers, and a Nurse Manager. Staff is always available to guide and support residents as needed.

Meridian House believes the disease of addiction is one which manifests biologically, psychologically, socially, and behaviorally. Therefore, all aspects of the disease are treated and addressed. The program is intensive and challenging. At times residents may be encouraged out of their comfort zone, as staff work to point out behaviors and support individuals in addressing them. **This program is designed for those who are “sick and tired of being sick and tired,” and who are ready for enduring and meaningful psychological, social, and behavioral change.**

## THERAPUTIC COMMUNITY

Meridian House is a Therapeutic Community (TC). Therapeutic communities emphasize the importance of mutual responsibility, mutual accountability, structure we understand that many people do best in a structured environment, and participation in a group dynamic (social connectedness). Individuals can learn to be accountable for their choices because of the mutual responsibility they hold with their community. In a TC model, it is believed that all members of the community are mutually responsible for creating a positive and safe environment in which people can recover and thrive for behavior change to happen the whole community must hold each individual accountable for any attitudes and behaviors that are not conducive to positive environment. A TC can foster the development of relationships through positive social

interaction/social learning/learning and bonding healthy connections which can offer support during treatment and after an individual leaves the formal treatment environment.

### **EQUAL OPPORTUNITY POLICY**

No individual will be denied admission to the Meridian House solely on the basis of race/ethnicity, religion, gender identity, sexual orientation, ability, or for having been involuntarily discharged from another facility.

### **ASSISTIVE EQUIPMENT POLICY**

We want Meridian House to be open and welcoming to people of all levels of ability. Therefore, Meridian House adheres to all applicable Federal and State laws and regulations, as they relate to the use of assistive equipment; this includes following protocols around trained assistance animals.

The Meridian House will allow any resident entering the house who requires personal care assistance (PCA) to arrange these services with approval from the designated PCA.

Residents at the Meridian House who require specialized transportation due to a physical disability will be allowed phone time to arrange for a car chair, PT-1 or "The Ride".

### **ADMISSION POLICY**

Prior to admission, all prospective residents will be screened for program eligibility and appropriateness by the Intake Coordinator or designee.

This screening process will ensure that the individual is at least 18 years of age, meets ASAM criteria for 3.1 level of care, and does not display behaviors or exhibit symptoms that could endanger the health and/or wellbeing of other residents or staff members. Individuals with severe substance use and mental health disorders may be better suited for Co-Occurring Enhanced (COE) programming. In this case, the Meridian Intake Coordinator will help facilitate admission to Hanton House, North Suffolk's COE if appropriate.

The program will also be explained to the applicant during their initial screening interview, and they will be offered a copy of the Resident Handbook and a summary of Meridian House and encouraged to review it prior to accepting a bed. If a prospective resident is offered and accepts placement, their date of entry to the program will be scheduled. If there is a waiting list, they will be added to it, and priority may be given to individuals who are responsive to outreach efforts by Meridian House while on the waitlist.

At intake, residents will be asked to sign a form consenting to treatment, as well as a North Suffolk Mental Health Association (NSMHA) release of information for an emergency contact, and, if applicable, their primary care physician and/or probation/parole officer. Refusal to sign either type of release will be documented in the resident's chart.

The program may not deny admission to an individual based solely on the medication they are prescribed. Meridian House does not require residents to enter the program with a certain amount of medication on hand. The Meridian House will work with residents to coordinate any medication refills

that are needed. The program will not deny admission to individuals who, on a prior occasion left treatment against medical advice, relapsed, or filed a grievance against the Meridian House. We encourage residents to enter with a 30-day supply of medications if possible.

The program may deny admission to individuals who refuse to provide the information necessary to complete an assessment and treatment plan. The program will maintain a log of denied applications, reason for the denial, and referrals made; this documentation may be reviewed by the Department for Inspection as requested.

### **RESIDENT RIGHTS**

The Meridian House will translate the rights, rules, and program manual for residents who require it.

- 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.
- 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 freedom from coercion.
- Residents will be treated in a manner sensitive to their needs which promotes dignity and self-respect. Safe emotional environment.
- Residents will have drug screens conducted in a manner which preserves their dignity. Meridian House will accommodate any medically confirmed inability to give urine by providing for an alternate effective means of screening such as an oral swab.
- Residents may have visitors at scheduled times. Visits by attorneys, DCF 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 and send mail. Clients are required to have mail opened in front of staff
- 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.
  - NSMHA Grievance Line: 617-912-7986.
  - BSAS Confidential Complaint Line: 617-624-5171

## COMMUNITY SAFETY POLICY

Meridian House is committed to providing a safe emotional and physical environment for both staff, residents, and others who may enter the facility. Each of us is held mutually responsible for creating such an environment. Therefore, All Residents are required to agree and sign our Community Safety Policy. The policy reads as follows:

- I understand that North Suffolk Mental Health treatment facilities - including Meridian house, and outpatient clinics- are to be **Safe and Violence-free at all times**. Violence is defined as emotional/verbal and physical violence.
- I understand that raising my voice, emotional/verbal abuse, threats of violence (against staff or other persons served), may be grounds for discharge from services.
- I understand that physical violence – such as including physical attacks (directed at staff or other persons served), gesturing with the perceived intent to intimidate others, *willful* destruction of property, and/or any action that the treatment team considers to be threatening is grounds for discharge from services.
- I understand that North Suffolk Mental Health has a zero-tolerance weapon policy, and that weapons of any kind are grounds for immediate discharge from agency services.
- I understand that any conflict residents have with individuals outside of the program are not permitted on the premises.
- Sexual relations or physical intimacy/contact of any kind will illicit clinical response, which includes, but is not limited to: Boundary contracts, safety contract, or administrative discharge.
- Intimate physical contact is defined as hugs, prolonged physical contact, etc.
- Sexual harassment is defined as any kind of unwanted sexual remarks, “jokes,” gestures, etc.
- Sexual assault is defined as unwanted sexual contact.

Any violation of the community safety policy may result in administrative discharge. In addition to those outlined above, the following may also be considered a violation of the Safety against Violence policy, as they may compromise the safety of the program:

- Stealing.
- Possessing drugs, paraphernalia or unsafe materials being used or brought onto the premises.
- Distributing drugs, paraphernalia, or unsafe materials on premises.
- Smoking inside the house
- Slurs of any kind (Racial, gender, sexual, or any other identity-based slurs) directed at staff or other residents.
- Breaches of confidentiality

I understand that the treatment team reserves the right to complete a person search to help enforce safety and prevention of contraband/items listed above from entering in the house. By signing the *community safety policy*, I acknowledge that I am expected to engage in treatment in a way that promotes the safety of myself, and others around me, and that while there are specific behaviors listed above, the treatment team reserves the right to identify other behaviors not listed as a form of violence, and that those behaviors may be ground for discharge. In the case that the behavior does not lead to immediate discharge, note that continued participation in behaviors that go against the *community safety policy* may be grounds for immediate discharge.

***If you are unsure if a statement or behavior would fall under this policy, it is best to refrain from saying or doing it***

## CHAIN OF COMMAND

- Meridian House is a 30-bed facility. With that said, there are many different residents' needs throughout the day. In order to approach resident needs in an organized manner we ask that when a resident needs to speak with a staff member, to go to an upper-level resident who is the SOB (Supervisor on Board). This resident on board serves as the link between the residents and the staff. Resident SOB will then ask the staff SOB. This staff member functions as the 'go-to' for resident questions, requests, etc.

## THE SLIPPING SYSTEM (L.E's)

Meridian house has a strong focus on mutual responsibility, holding yourselves and peers accountable. The way we do that is through our Slipping System which is our behavior modification system/how we ensure good communication and ensure follow up to issues raised. Research shows that positive and negative reinforcement, as well as repetition, is what shapes behavior. This system allows the treatment team to track BOTH positive and negative behaviors and respond to them.

Slips are pieces of paper that staff and residents fill out if another resident is observed to be engaging in a positive or negative behavior, for it to be recognized and addressed. Any behavior or rule violation should be slipped. Filling out a slip involves documenting the date, time, individual, and details of the observed behavior. Slips are then reviewed by staff and read in House Issues Group along with the associated intervention.

The slipping system is one of the more challenging components of the program. Residents may have difficulty understanding the purpose of addressing so many behaviors, some of which seem minor. It is important for residents understand that this system is based on a large body of research on modifying behaviors. This research also indicates that it is important for the system to be consistent and timely. The repetition of slips and interventions is what leads to behavioral change. As a result, Meridian asks all residents to keep an open mind about the slipping system.

Slips should be written objectively, which means you should not include your opinions on the slip; instead, simply document what you saw or heard regarding the behavior.

## LEARNING ENRICHMENTS (L.E's)

ALL LE'S (including house LE's) are to be completed the day after they are assigned. LE papers must be handed in during House Issues group; for instance, if an LE is issued on a Monday, it must be done on Tuesday, if assigned Friday it must be done for Monday, etc.

- If a resident is unable to complete an LE in the appropriate time, they need to ask their individual case manager to "aware" it and watch them initial it on the LE sheet posted. If your case manager is out, you may ask another clinical staff to aware it.
- Overdue LE's can result in additional consequences including loss of privileges or inability to progress to the next level.

- If you would like to contest your L.E's you must speak with your case manager. If your case manager is not available, you may ask a clinical staff member to aware it until your case manager is present.

### **A&B's**

Residents who receive "above and beyond" slips (A&B) may be given a variety of different privileges for good behavior at staff discretion. Privileges may include an hour free time, extra hours on pass, get out of chore for a week, etc... Examples of positive behaviors are:

- Managing excellent Job Function or showing hard work.
- Two weeks of good jobs in House Issues.
- Stepping up to tasks that are not expected or asked of a resident.
- Role Model Behavior.

*All positive LE's that are over 30 days old will be removed from L.E sheet*

### **LOSS OF PRIVLEDGES (LOP)**

**\*Main goal is to take time to reflect on behaviors\***

- LOP status and privileges can vary according to behavior at staff discretion. These loses of privileges may include loss of phone calls (unless of an emergency) walks, etc. Calls to children, PO, DCF or lawyers will be allowed.
- Residents should request off LOP on the Level change sheet and write it on activity log. Residents must also have a written paper (at least 1 page) attached to their activity log about how they corrected the behavior and what they learned.
- Residents are allowed to go to house meetings and appointments.
- No store run will be allowed, only cigarettes and hygiene.
- Resident on LOP may be accompanied by a companion.

### **ALL DAY POLICY**

*The purpose of all days is to provide a learning experience where individuals can take the opportunity to remove self from day- to-day responsibilities to focus on self-reflection and personal growth.*

- All days can be done on Monday, Tuesday, Thursdays, and Fridays.
- Residents are expected to do their all day the day after it is given in house issues. Only under special circumstances can an all-day be awarded for another day. To aware an all-day it must be approved by case manager and signed on L.E sheet.
- On your all day you lose most privileges. This includes meetings, gym, and phone calls scheduled between 6am and 9pm. House will honor approved child phone calls and emergency use of the house phone.
- If you have a board shift on your assigned all-day day, you may aware it with your case manager for the following day.
- Residents must sign up for their all day the night before on the morning meeting sheet.



- Residents who have received an all-day must be on the floor by **6am**.
- Smoking is **ONLY** permitted at 5:45am, after meals and **scheduled** smoke breaks after you have written your paper and completed your all day. Failure to follow the all-day smoke schedule will result in further L.Es
- Residents should report promptly to overnight staff, who will give them an assignment for the first hour of the day.
- Residents will be given assignments by the SOB to be done during any free time for the first part of an all day. No other L.E's can be done on an all day.
- Residents on an all-day attend all groups and participate in any full house meetings in the evening.
- If you have an appointment, you will be temporarily off your All Day for the time you are out of the house and will continue the LE when you return home. If you are gone for an extended period of time, you may be asked by staff to make up hours of your all-day that were missed.
- At 8pm residents should be in the kitchen writing a three-page reflection paper on what they have learned during their all day. **All day's end at 9pm.**
- All day papers must be brought to the following house issues and read during that time to be removed from L.E sheet. If your paper is not reflective of the slipped behavior in which you received your all day, you may be told to redo your all day or paper.
- Working residents may do an all-day on the weekend with permission from their case manager if their schedule does not allow them to do so during the week. Residents must work with their case manager to come up with a plan if all days are done on the weekend. It is up to staff discretion if you will be allowed privileges (pass or meetings) if you have All Day to serve.
- If residents who are serving an all-day were bringing a lower level to a meeting, the lower may go with another resident, if it is brought to and approved by staff.
- If you have an all-day on a Friday, you are not allowed to go on store run. You may run across the street for cigarettes/hygiene with staff approval.

### RESIDENT BEDROOMS

Meridian House reserves the right for staff to enter and inspect a resident's room in the interest of health, safety, proper conduct of the residents, orderly and efficient administration of the residential system, and/or to maintain or repair the premises. **The resident will be present when staff enter and inspect their room. Exceptions to this may only be made with manager approval.**

- Entry may be made at any time, whether the resident is present, and without prior notice to the resident, if **health, safety, or emergency** circumstances warrant such entry.
- Entry may be made during normal hours, whether the resident is present, and without prior notice to the resident during non-emergency inspections and repairs.
- Residents will have 30 minutes to get ready for "passes," and 10 minutes to get ready for appointments and outside meetings, at staff discretion.
- Residents are NOT allowed to go into each other's rooms.
- Beds should be made by 7am on the weekdays and 9AM on the weekends/holidays.

Room follow-up is a time for residents to straighten up their rooms. Residents are expected to be in their room cleaning during this time.

- Beds should be made properly. Nothing should be on beds. No items on top of closet and nothing hanging from the closet door. All items should be off the floor neat and organized.

- Bedroom doors should **never** be locked, and doors are always to be propped open when no one is in room.
- Windows should be shut if you are not in your room.
- Food (including candy) is not allowed in any Resident room. The only allowable beverage in any Resident room is water.

### ACTIVITY LOGS

- All appointments, passes and visits must be documented on the activity log and require approval from case manager or Program Manager. Review of activity logs occur during weekly clinical meeting case manager may make exceptions at their discretion.
- **When requesting a level change, residents should write this request on their activity log, level change sheet and fill out level request checklist. For all level changes, responsibilities and privileges kick in immediately.**
- Residents must request money on their activity log to go on store run. All receipts from purchases **MUST** be kept and stapled to the following week's activity log.
- Meetings should be recorded on the resident's activity log. This includes the start and stop times, networking times (which is either 15 minutes before or after each meeting), location of the meeting (including town name), name of the meeting, who is going to the meeting, and the type of meeting (i.e., AA or NA).

#### **How a meeting should look on your activity log:**

*Name of meeting*

*Type of meeting (i.e. AA/NA/Smart Recovery, ect.)*

*L: (Leave time)*

*S: (Start time)*

*E: (End time)*

*H: (Home)*

*15 extra minutes networking (cannot be added to travel time)*

*Mode of transportation: (i.e. Bus, train, ride)*

*Who you are attending meeting with*

### VISITS & DROP OFFS

Upon completing 14 days from intake a resident may request visits. This must be approved by their Case manager. Residents are allowed to pick only one visiting time per visit day. Under extenuating circumstances, the clinical team may approve another visiting time. Prior to visits residents must fill in appropriate area on activity log and put individual's name and what time visits will be on Saturday. (Example: putting friends or family is not acceptable)

- Visitors may be required to meet with staff prior to being approved for a visit. In general, any non-family members need to be pre-approved by the assigned case manager.
- All visitors must sign in the log provided at the front of the house. By signing in, visitors are agreeing to abide by Meridian 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, and/or appear intoxicated.
- Residents may receive drop-offs (i.e., clothes, money, etc.) at staff discretion

- Items must be given directly to staff for inspection and will then be delivered to the resident. If the resident is not present, the drop off will be held in the staff office. Meridian House is not liable for any stolen or misplaced objects.
- Money Drop-offs: Residents will be given a receipt of the money being dropped off.
- Family members/friends/significant others are not allowed to bring food for clients unless it is enough for the whole house, and it is up to staff discretion. Only the program coordinator/program director/clients case manager can approve.

## PHONES AND TECHNOLOGY POLICIES

### *MP3/IPOD/DVD/VIDEO/MUSIC Devices*

MP3/iPod/DVD/video/Music devices are allowed with case manager approval. These devices must not be WIFI accessible. Volume must not be disruptive to the house, and you may be asked to adjust the volume to an acceptable level.

Utilizing these devices may not impede on residents' ability to engage in treatment. If these devices are making notable distractions or safety concerns, it is up to staff discretion if resident will be allowed to use devices.

### *TELEVISION*

Residents may watch television during designated times. Television with explicit violence, drug use and sex should not be viewed. TV is only allowed when it is free time on the schedule. If you are the last person to leave the room, please turn off the TV. Residents may watch TV or play video games from 6:00am-7:00am. Residents can watch the news from 6:00-7:45am.

### *CELL PHONE POLICY*

- The only residents who have cell phone privileges are those who reach level 2.
- Residents must sign in and out cellphones. Staff must be present when residents are picking up or returning cell phones.
- Residents with earned cell phone privileges are not allowed to let any other residents use or possess their phone at any time. **Any breaking of cell phone rule policies can result in loss of cell phone privileges.**
- Clients should not be on their phones during groups or meals.

Utilizing these devices may not impede on residents' ability to engage in treatment. If these devices are making notable distractions or safety concerns, it is up to staff discretion if resident will be allowed to use devices.

## CHILDRENS PHONE CALL POLICY

- To create a weekly child phone call, you must first speak with your case manager. They will speak with the guardian for approval and identify potential call times. Upon clinical approval you will be granted 3 child calls per week and added to the schedule posted in the office. These are in

addition to other calls. If you would like to increase your child phone calls- speak with your case manager. This is up to staff discretion

- Calls are max 15 minutes. Calls are to speak with only children. Misuse of this time may result in L.E's.

### MEALS & KITCHEN

- Gloves should be worn at all times when working in the kitchen. Hairnets or hats must also be worn at all times when working in the kitchen. If you leave the kitchen when you return new pair of gloves must be worn.
- Residents should NEVER access the kitchen through the serving window.
- Non-kitchen workers should ALWAYS ask for permission from the kitchen crew before entering the kitchen.
- Removing anything from the produce area without permission from either the Produce Supervisor or the Kitchen Supervisor is considered stealing.
- Residents who have a snack and create dirty dishes and/or utensils are responsible for washing and cleaning after themselves. No dishes are to be left in the sink.
- Residents who are assigned to the Kitchen Crew or Weekend Kitchen are allowed ½ hour off the floor to rest or shower.
- Kitchen crew will be asked to provide staff with a weekly menu on before Clinical meetings.

### LAUNDRY

- Residents can bring down their laundry between 6am-7am or by the end of room follow ups.
- Residents should not touch each other's laundry.
- Workers may use upstairs laundry room on weekdays for work clothes ONLY! Laundry supervisor, SOB or staff is to be made aware of it. Workers are expected to use the downstairs laundry when doing it on the weekends.
- Last load is to go in the dryer at 9pm. All laundry baskets should be out of the laundry room no later than 10pm- unless staff is made aware of it.
- Individuals whose job function is laundry may use the upstairs to do their personal laundry if it is on their assigned day and not during bedding times.

### SMOKING POLICY

**Meridian House DOES NOT allow smoking inside the building. Smoking inside can be cause for discharge.**

- **There is no vaping of any kind allowed.**
- The program provides time for smoke breaks during which the residents may smoke in designated areas outside the building where there are appropriate receptacles for disposal of cigarettes.
- There are no OPEN SMOKE BREAKS. Residents must follow the schedule.
- All smoke breaks are supervised by upper residents. Smoke breaks should be no longer than 15 minutes. It is up to staff discretion if smoke breaks must be monitored by staff.
- When coming in from smoke break, the last resident in the house must lock the door.
- There is no smoking during fire drills. Residents are to exit the house and cross over White St and stand by the gate.

### **SIGNING OFF THE FLOOR**

- Residents must sign up for bed when they are ready to go off the floor. Residents may come back onto the floor for medication, smoke break or a snack/water DURING designated times.
- Residents must sign up for bed before taking an evening shower.

### **BED REST POLICY**

Obtaining the proper information is important for both staff and residents to know how to prevent others from getting sick and manage residents' care. To be eligible for bed rest, residents must:

1. Have one of the following:
  - a. Discharge paper, which includes and recommendation of bed rest
  - b. Note or other form of written communication requesting bed rest from a licensed medical professional
  - c. Note or other form of communication from Nurse Manager
  - d. Staff discretion
2. If residents are unable, per doctor's orders to attend meals, the Meal Form must be completed to indicate a meal was provided or declined if applicable.
3. Residents on bedrest are allowed to smoke at breakfast, lunch, and dinner time scheduled smoke breaks.

### **MERIDIAN HOUSE DRESS CODE**

- No negative or inappropriate attire is allowed.
- No halter, T- strap or strapless shirts are allowed. Only properly fitting tank tops are allowed.
- Shorts and skirts must be an appropriate length – staff may use their discretion.
- No revealing of one's undergarments.
- No low-cut shirts.
- No showing of one's belly.
- No slippers or bed wear on the floor. Robes included
- No hats are to be worn in the house, except for the required hair covering when working in the kitchen. Hair MUST be covered at all times when working in the kitchen.
- Hats with no brim are permitted. Hats with a brim will not be permitted.
- Footwear – All shoes must fit properly. Residents MUST wear closed-toed shoes when working in the kitchen or on an all day.
- No high heels.
- Sandals are not allowed during kitchen, G.I., or job function duties.
- Sunglasses may not be worn inside.

### **SHOWER POLICY**

- Showers are encouraged to be taken daily and are for a maximum of ten minutes only, this includes total bathroom time.
- Showers can be taken after 7pm until 11pm (12:30am on weekends). Also, in the morning between 5am and 7 am M-F and 5am- 9am Saturday and Sunday. No showers are to be taken between the

hours of 11pm, (12:30am on weekends) and 5am. There are no showers during free time or off the floor time unless staff have approved.

- Once everyone is signed up for bed and the SOB closes the house for the night, they may take a shower.
- Hang up rug, rinse out the shower, clean out the sink, and sweep up your hair when done.
- Residents are encouraged to wear shower shoes.
- Remove all personal hygiene products and any personal items when finished.
- Make sure the water is completely off and is set to the main shower head. (Handicap shower head should NOT be on).

### **THE BASEMENT**

- The basement can be used as a space for recreation, games, TV, etc.
- Residents must not be downstairs alone on evaluation phase.
- Residents should not be in the basement past 9pm on weekdays and 10pm on weekends unless you have laundry or are finishing up with chores. Only SOB or Service crew supervisors will be permitted in the basement outside of these times.
- During free time and after 6pm and weekends there should be no resident in or beyond produce unless SOB, kitchen, service crew or Produce are informed. The first chain of command is Supervisor on Board.

### **GROUP ROOM RULES**

- Door must remain slightly open at all times unless a private meeting is going on with staff
- No lying down on floor
- No putting items on chairs to reserve seats
- No reserving seats, if you leave the room the seat is free. Unless you are going to the bathroom- (Aware your seat)
- No food or drinks other than water is allowed
- No shoes on the furniture
- No feet on the table
- The last resident to leave the room should turn off the TV
- SOB is responsible for closing down room each night by tidying up chairs and making sure room is clean
- No sharing chairs
- a light should be on at all times
- no sleeping
- please be mindful of what is on the television, if anyone is uncomfortable it should be changed.

If any of these rules are not followed it should be slipped.

### CO-ED

- There should never be a man/woman in the room together alone. Residents shouldn't be in the kitchen, living room, or any other areas of the house alone with a member of the opposite sex.
- When companionship, there must be two individuals of the same sex present.

### TRANSPORTATION & DRIVING

- Residents who have money must pay for their own transportation to appointments. Lower-level residents must pay for their companions if they have the financial means.
- Residents may not accept rides in any vehicle at any time from anyone without prior staff approval.
- Any resident who is responsible for driving the van must sign a release form to allow the Agency to perform a Registry of Motor Vehicle check and they must attend the Agency Driver Safety training prior to driving the van. Eligible residents are those who have a valid MA driver's license and are Level 3 or higher.
- All parking tickets or motor vehicle violations are the responsibility of the driver and occurrences of such must be reported to Staff immediately.
- Seatbelts MUST be worn at all times, by all passengers and by the driver.
- NO smoking in the van.
- When parked, the van must be locked at all times.
- The gas tank in the van should be always half-full at a minimum. Drivers should fill the gas tank on the North Suffolk Meridian House account at the Mobil station at the foot of the Meridian Street Bridge.
- Drivers of the van are not to pick up hitchhikers.

### PASSES

*See level description for pass eligibility and length of pass*

- Passes should be detailed with travel plans and be approved by your case manager or program manager. Passes are only allowed every other week and pass weeks are subject to clinical team discretion.
- When writing out your pass request it should contain these details:
  - What city you will be traveling to, who you will be with how you are getting there and back. If you are going shopping where that will be. You must provide phone contact info of who you will be with (if Applicable). Plan A and Plan B should both consist of these details. Your pass may not be approved if it is missing information.
- Clarify with your case manager if you are meeting with others that they are a healthy sober support.

## ***PASSES IN HOUSE***

- Passes are permitted in house if it is outlined in your pass request and approved by your case manager. Meridian House strongly encourages 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. Smoke breaks must be taken in accordance with scheduled house smoke breaks.

## **MEDICAL APPOINTMENTS**

- The resident is required to bring back written documentation from all appointments stating time of arrival and time of departure from the scheduled appointments. As well as discharge summary.
- Residents should make every attempt to make appointments outside of scheduled group times.

## **MEDICATION POLICY**

(Up to date as of 3.31.21)

### ***MEDICATION STORAGE***

The Meridian House has a designated locked medication room on the first floor. Only medication-related supplies, and records/information relevant to medication administration, are stored in this room.

Resident's over-the-counter (OTC) medications must be in their original container, have the original label with directions for use, and be factory-sealed. Resident's prescription medications must be in separate containers and have a pharmacy label.

All medications are stored in either a locked container with separate sections, or in separate, locked containers, all of which are to be clearly labeled with the individual's name. The exception to this would be for medications used to treat acute episodes, such as asthma attacks or allergic reactions, in which case the resident shall retain these medications. Medications on person are still expected to be taken as prescribed. Medications requiring refrigeration are stored in a locked box or compartment inside of the medication room refrigerator and a small, locked refrigerator can be designated specifically for medication storage as needed.

All medications are double-locked, as a result of the lock on the medication room door, and the locks on the medication containers themselves. Medications that must be counted due to their abuse potential are triple-locked (see details below), as they must be stored in a locked box within a locked box, or, a locked box within a locked refrigerator, behind the locked medication room door.

### ***COUNTABLE MEDICATION***

Countable substances include the following: Vistaril (Hydroxyzine), Catapres (clonidine), Neurontin (gabapentin), Suboxone (buprenorphine), Wellbutrin (bupropion), Benadryl, Ultram, Gablofen (baclofen) , Loperamide, Benzodiazepines, Opioids, Naltrexone, Strattera, Adderall, Vyvanse, and Amphetamines.

In the event that a substance is determined to be abuse able and/or carry a safety risk to the patient, but is not on the countable substance list, it can be added following review and approval by a senior manager. All countable substances are counted every time the medication is administered by the resident/observed by staff that has been trained in the "Meridian Medication Policy." Whenever possible, all countable



substances should be stored in tamper-proof containers, i.e. blister packs. The count and administration of countable substances is documented in the resident's binders, which are stored in the medication administration area.

The documentation process is as follows:

1. Staff must note the number of pills/films counted by the resident and verify that it matches the number previously documented on the count sheet. Staff must then subtract the number of pills/films administered to and taken by the resident and document the remaining total.
2. If an error is found, the staff person must draw a line through the error, write "error," and initial beside it. A brief explanation should also be written regarding the nature of the error and, if available, any information about why it occurred. The staff should then rewrite the entry on the next line on the page.

New prescriptions must be written in at the top of the medication sheet, on the line titled "RX\* \_\_\_\_\_."

### ***MEDICATION PROTOCOL FOR RESIDENT LEAVE OF ABSENCE***

In the event that a resident's Leave of Absence (LOA) is less than 72 hours long, medications for LOA's are to be prepared by the individual's pharmacy whenever possible.

If this is not possible, the following procedures are to be followed by program staff:

1. Separate containers must be used for each type of medication.
2. Tamper-resistant containers should be used whenever possible.
3. Once the amount of medication needed for the LOA is determined, it should be transferred from the original card/bottle directly to the LOA container.
4. The LOA container should be labeled with all necessary information, which is determined using the original medication card/bottle, and must include at least the following:
  - a. Individual's name
  - b. Name and strength of medication
  - c. Directions for use, including dose, frequency of administration, etc.
  - d. Prescribing provider
  - e. Date(s) to be dispensed
  - f. Any special instructions (i.e. to be taken with food, etc.)
  - g. Amount of medication in the container
  - h. Pharmacy name and phone number

For LOA's that last more than 72 hours or for LOA's where length of time and/or return to the program is uncertain, resident should be sent with all of their medications. This should be documented on the medication log and in the medical record (eHana), and the individual's prescriber should be notified.

### ***MEDICATION REFUSAL***

If a resident refuses to take a medication, they should notify Meridian Staff and their prescriber as to their reasoning. Ongoing communication should take place to prescriber to determine next steps for the prescription. All residents are encouraged to take medications as prescribed.

### ***MEDICATION ADMINISTRATION***

Medication must be self-administered by the resident, unless the licensee employs qualified health care professionals that are authorized to administer medication.

### ***NEW RESIDENT/ADMISSION TO PROGRAM***

Upon admission the resident will count in the presence of staff the number of pills, or if medication is in liquid form, the approximate the amount of liquid. Staff will document these amounts.

### ***PROGRAM DISCHARGE***

Upon discharge, whether planned or unplanned, the resident should be given their medications. In the event of a safety concern associated with providing the resident with their medications, it may be recommended that the resident be given only 24 hours' worth of medication and return the following day to pick up the rest.

## **EMPLOYMENT**

### ***JOB SEARCH***

- Work with case manager regarding job search plan and having a plan about your job search plan for the week.
- When a resident would like to be approved for job placement the resident must present these details for approval: Employer name, where the job is located, method of travel, job details, position, how you will be paid.
- Once a resident presents this plan to their case manager, it will then have to go to clinical rounds before being approved. (Similar to if you are leaving a job to go to another job and giving two weeks' notice). The clinical team needs to review the job proposal to ensure it does not interfere with contractually required parts of programming.

### ***WORKER EXPECTATIONS***

- Residents are required to participate in a minimum of required programming per insurance and state regulations. This includes 5 clinical groups per week.
- Workers are allowed to be on the floor 30 minutes prior to leaving for work.
- Residents are required to adhere to all Massachusetts labor laws.
- You are allowed \$40 weekly on your person; any additional funds must be requested.
- You have a 3-week period from 1st day of employment to establish a bank account. If you have barriers to establishing a bank account, please seek out your case manager for support to help you develop an individual plan. Staff will help you with budgeting skills which may include requesting pay verification, confirming your bank account balance, and discussing money saved for aftercare.
- Workers are allowed ½ hour off the floor when returning home from work.
- Workers are allotted 2 days a week to sleep in till 9am if their work schedule does not allow them to do so during the weekend. Days must be documented on activity logs and approved by case manager.
- Worker expectations are subject to change on an individual basis, as requested by clinical team.
- Generally speaking, your priority should remain your recovery, and your treatment should be prioritized above employment.
- The first part of job search is for residents to work on their resume and get it approved by their case manager and to complete one mock interview with a recovery coach. These steps must be

completed prior to working. Residents can attend on site job interviews that are on their activity log and can utilize the iPad or other resources to look for employment.

### **RECOVERY MEETINGS GUIDELINES**

- You are allowed 2 hours maximum for travel time going to and from meetings; if you leave early or come back late you may be subject to learning experiences. All travel times should be justified.
- If you are a lower level, you are to attend meetings with your mentor of their choice. If your mentor is on LOP for the week, dropped or on an All Day, you may change your meeting. Clinical staff must approve this change on your activity log. Then you must seek out communications supervisor to have that resident make change on both outside meeting lists (staff office & dining room)
- Meridian House under most circumstances does not give out house t-passes for outside meetings.
- Refer to the level system to determine the number of and types of meetings required, as well as companion requirements if any.
- All residents are expected to follow the guidelines of the Fellowship and the Meridian House Program Rules when attending an outside meeting. This includes being respectful and punctual in your attendance at outside meetings.
- House Meetings are meetings that everyone attends. If you have concerns about a particular meeting, you must discuss with case manager.
- 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 recovery meetings unless approved by Program Manager.
- Residents should NEVER receive anything besides phone numbers from anybody at a meeting.
- Meridian House encourages upper levels to utilize off hour meetings (weekend and weekday mornings) due to busy schedules. You may work with staff to find times to help support these requests.

### **SPONSORSHIP/RECOVERY SUPPORT**

- If you obtain a sponsor or recovery support, they will need to meet with staff before you are able to attend an outside meeting with them.
- Sponsors/recovery supports may visit the house if approved by case manager.
- Once your sponsor/recovery support is staffed you are allowed 1 additional 15-minute phone call per week after evaluation phase week 2 is completed.

### **LAB PROCEDURE**

- Residents will donate one by one and inform SOB when they have donated.  
Once resident finishes with donation they will go back to SOB to inform him/her that they completed giving a urine sample. If they do not provide one, they will go to the back of the line.
- If lab is here during med time you still may get your meds just inform the SOB of what you are doing.
- No Chemicals should be used at any time until the lab leaves the building.

## MERIDIAN HOUSE CHORES

Weekly chores are to be assigned and read aloud during resident rap each Sunday. Chore responsibilities begin the following morning. Chores must be completed and checked off before the times specified on this sheet. SOB must be made aware that your chore is complete and give you permission before it is checked off.

If you are out of the house for any reason, you must either get someone to step up for your chore or the SOB must give you permission to leave the chore aware. If your chore was left aware you must complete it within 30 minutes of returning home. Chores will be checked by the SOB and there will be learning enrichments if the chore is not completed properly.

### ***1st Floor Bath (Nightly 8-9PM)***

- Wipe down all surfaces including sink and toilet in both bathrooms.
- Sweep as needed
- Stock Paper towels and stock 3 rolls of toilet paper in each bathroom
- Take out trash and replace bags.

### ***1st Floor Utility Closet (2x daily)***

Closet must contain the following items, which are to be obtained from the supply closet through the service crew supervisor:

- 10 Rags (At least)
- 9 Rolls of toilet paper (At least)
- 3 Packs paper towel
- 3 Bottles "Fast and Easy" Cleaner
- 3 Bottles bathroom cleaner
- 3 Boxes medium gloves
- 3 Boxes large gloves
- 2 Buckets
- 2 Scrub brushes
- 2 Brooms
- 2 Dustpans
- 1 Roll large trash bags (At least)
- 1 Roll small trash bags (A

### ***2nd Floor Utility Closet (2x Daily)***

Make the SOB aware that you are leaving the floor to complete this chore.

Closet must contain the following items, which are to be obtained from the supply closet through the service crew supervisor:

- 10 Rags (At least)
- 9 Rolls of toilet paper (At least)
- 3 Packs paper towel
- 3 Bottles "Fast and Easy" Cleaner
- 3 Bottles bathroom cleaner
- 3 Boxes medium gloves
- 3 Boxes large gloves

- 1 Vacuum
- 1 Bucket
- 1 Scrub Brush
- 1 Brooms
- 1 Dustpans
- 1 Roll small trash bags (At least)
- 1 Bottle hand soap

**2nd Floor Bath** (*Morning 7:45-8:15 AM*)

- Make the SOB aware that you are leaving the floor to complete this chore.
- Wipe down all surfaces including sinks and toilets in all 3 bathrooms.
- Sweep as needed
- Stock paper towels and 3 rolls of toilet paper in each bathroom
- Take out trash and replace bags.

**3rd Floor Bathroom** (*Nightly 8-9PM*)

- Make the SOB aware that you are leaving the floor to complete this chore.
- Only residents living on the 3<sup>rd</sup> floor may complete this chore
- Wipe down all surfaces including sink and toilet
- Sweep as needed
- Stock paper towels and 3 rolls of toilet paper
- Take out trash and replace bag

**After Snack Clean Up** (*Nightly 9-9:30PM*)

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

**Barrel & Ash** (*Nightly 8-9pm*)

- Change All trash on milieu, shredder in front office and empty out cigarette butts in courtyard

**Back stairwell** (*Nightly 8-9PM*)

- Sweep stairs and landings on all floors.
- Wipe down railings
- Mop as Needed

**Basement** (*Nightly 8-9pm*)

- Make sure common area is neat and straighten out all chairs are away and trash is picked up. Video games and TV area neat. No items should be surrounding heating/ AC unit within 2 feet.

**Breakfast Put-Out** (*Weekdays 6:50-7AM*)

- Set up breakfast by putting out cereal, oatmeal, breads, fruit, bowls, spoon etc....
- After breakfast return food items to produce area

**Clean Bathmats** (*Morningx3 week 7:45-8:15AM*)

- Clean bathmats from every bathroom by shaking outside and washing as needed

**Clean Large Hall and FOH** (*Nightly 8-9PM*)

- Sweep all hardwood floors including foyer, hall, and group room.

**Clean Mops** (*Nightly 8-9PM*)

- Chore should be performed in the sink in the basement laundry room.
- Mops should be cleaned with a solution of detergent (Fabuloso) and water
- Clean each mop individually, wring out, rinse, and hang to dry.

**Clean Van** (*Friday and Sunday by 6PM*)

- Make the SOB 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

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

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

**Dining Room** (*Nightly 8-9PM*)

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

**Front Closet** (*Nightly before bed*)

- Remove all items from front closet and give them to staff
- Write slips to the house for each item left in the closet overnight.
- Ensure that the closet is clean

**Gardening** (*Twice Daily: Before 10AM and before Dusk*)

- SOB Must be made aware that you are exiting the building to complete this chore
- Pick up any trash on front lawn area
- Remove any debris from bushes, fences and gate

**Plants** (*By 7:45AM*)

- Clean out any dead leaves or shrubs; wipe down pots and stands, water plants as needed.

**Rags** (*Nightly 8-9pm*)

- Make sure there are enough rags for cleaning next day, may have to cut rags from donation clothes

**Recycling** (*Saturday before 6PM*)

- Ensure that all recyclables are rinsed out and cleaned

- Bag all recyclables in the bins under coffee / serving tables
- Take bags to basement for storage until trash day
- On Saturday take redeemable cans and bottles to Shaw's return with the money and receipt and give to staff

#### *Refrigerators (Anytime)*

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

### JOB FUNCTIONS

Supervisors are responsible for overseeing, delegating, and participating in all aspects of their job function.

During Job Functions, Residents should remain in the area appropriate to their job. Residents should not be eating or drinking coffee during job function time. If you do not have an assignment or have already completed your assignment, see the appropriate supervisor.

### *COMMUNICATIONS RESPONSIBILITIES*

**\*\*\*\*\*No Meridian House paperwork should be discarded or shredded at any time without the permission of staff**

- **House Issues:** Take notes of each resident's LE's; update LE sheets as needed. These should be posted on the day the LE's are given.
- **Resident Population Sheet:** Update as needed. This needs to be done when new Residents arrive, when Residents leave, or when any changes are made to job functions, case manager, mentor, or room assignments.
- **Activity Logs:** Distribute blank logs to residents on Sunday mornings. Collect all completed logs by 10:30 PM Monday night and give them to staff by Wednesday AM for their clinical meeting. Following Clinical, go through the new activity logs, compile needed data, such as pass, visit, and meeting lists, and have the new activity logs in the activity log binder in the office by 11PM Wednesday evening. If necessary, the Activity Log binder may be handed in to staff on Wednesday morning and then taken back out on Thursday to compile the needed data.
- **Sign In/Out Sheets:** Keep supplied. Provide fresh sign in/sign out sheets; file the old ones.
- **Approved passes:** Maintain a weekly list.
- **Sobriety Dates:** Add new Residents on to the calendar at the morning meeting.
- **Birthdays:** Add new Residents on to the calendar at morning meeting.
- **Sign-up for the Night:** Ensure an adequate supply of sheets in the logbook. File old ones.
- **Slips:** Check the container for an adequate supply of blank slips. If the supply is low, notify the S.O.B. so that the task of replenishing them can be assigned.
- **Resident Rap:** Type up and post Resident Rap by Monday evening; edit and turn it in to staff by 9am on Wednesdays.
- **Phone Logs:** Provide new phone logs each week; file the old ones.
- **Supervisor Schedule:** Post Supervisor schedule on Sunday night; give staff a copy and file the old one. .,

*Comms is responsible for posting documentation in the kitchen area and in the staff front office.*

### ***PRODUCE RESPONSIBILITIES***

- Inventory must be done every day. The completed inventory list must be given to the kitchen supervisor weekly. The list should indicate what foods are available for use so meals can be appropriately planned.
- Basement Food Storage Racks: It is the responsibility of produce to ensure that the racks in the basement are neat and well-organized. All items must be properly labeled with the date of their receipt at Meridian House. All canned goods must be dusted regularly. Produce **MUST** ensure that there is **NEVER** any open food anywhere in the basement.
- Putting away produce/food from produce run and food shopping: All food should be put away in the proper place neatly and added to the inventory list. All items must be properly labeled with the date of their receipt at Meridian House.
- Rotate produce/bread: Must rotate produce and bread so that the oldest food is used first, to ensure as little waste as possible. Produce is responsible for removing moldy food.
- Refrigerator, Walk-In, and Freezer: All must be kept clean.

Produce Residents are a minimum of one of the following:

- Level Two
- One additional resident – not on evaluation status

\*Produce Run – All residents are to rotate this chore. Residents on produce run must leave the house no later than. 6:00 AM.

### ***PROCURING RESPONSIBILITIES***

- Obtain donations: Contact local businesses/companies to request donations for the program. Explain to these businesses that our program is tax exempt. Forward tax-exempt forms as needed/requested. Residents in procuring may have access to the fax machine and Internet as needed upon staff approval.
- Contact local businesses/companies to request donations for fundraising, raffles, and monetary donations for the recreation fund.
- Document: All calls made **MUST** be documented (log time and recipient of call). All donations received **MUST** be logged; this list should be turned in monthly to the program coordinator so that each business may receive the required acknowledgements.

### **SUPERVISOR ON BOARD (S.O.B.) RESPONSIBILITIES**

**Only an upper level or staff should answer the door. The SOB should ask the staff on board to answer the door. CONFIDENTIALITY MUST ALWAYS BE MAINTAINED – NEVER RELEASE ANY INFORMATION REGARDING ANY PERSON. NEVER ACKNOWLEDGE IF ANY SPECIFIC PERSON IS HERE/IS A RESIDENT. DO NOT LET ANYONE IN EXCEPT FOR CURRENT**



**RESIDENTS AND CURRENT STAFF. IF IN DOUBT, ASK THE VISITOR TO WAIT ON THE STOOP AND GET HELP FROM THE STAFF ON BOARD.**

<b>Shifts: Monday - Thursday:</b>	A.M. shift is 7am to 3pm P.M. shift is 3pm to 11pm
<b>Friday:</b>	A.M. shift is 7am to 4pm  P.M. shift is 4pm to 12pm
<b>Saturday:</b>	A.M. shift is 9am to 4:30pm P.M. shift is 4:30pm to 12:30 am
<b>Sunday:</b>	A.M. shift is 9am to 4pm P.M. shift is 4pm to 11pm

- Must be on the floor at 6:50am during the week and 8:50 am on the weekends. SOB MUST inform staff that they are on the floor and on the board. All residents MUST inform the SOB and staff that they are on the floor.
- The SOB must have their name posted on the board whenever they are on board. Their name MUST be taken down whenever they are not available.
- The SOB MUST make staff aware of the need for any companions. SOBs may tentatively assign companions; staff must give their approval. Companions should be in the morning with staff SOB for the day.
- SOB informs staff on board when residents are leaving the house for any reason other than outdoor chores.
- The SOB must be aware of the location of all residents at all times.
- The SOB brings resident questions and issues to the staff on board; if it is possible for them to answer a general question, they should do so.
- The SOB is responsible for securing the house before bed and before leaving the house for any full-house event during which there will be nobody at the house. All doors and windows must be locked and secured. Door alarms should be on as appropriate. All coffee pots must be turned off. When the house is secure, the SOB must let the staff on board know; if it is time for bed, the SOB will also let staff know that everyone is signed up for bed and will take their name off of the board. All house lights should be turned off before bed.
- BEFORE leaving the house for any full-house event (or any event where there is not a one-on-one companion assigned), including house meetings, the SOB is responsible for assigning upper-level residents to be the designated companion for specific lower-level residents. The SOB will communicate with these designated companions during the time out of the house.
- All donations must be logged on the sheet at the front of the house. All drop-offs MUST be given directly to the staff on board. During visit times, ALL VISITORS MUST READ THE VISIT POLICY AND SIGN THE VISIT LOG. The Visit policy (see attached) should be easily visible in the log. If the SOB questions the sobriety of any visitors, they should IMMEDIATELY notify the staff on board. Ensure that all visitors are on the visit list and have been approved.
- The SOB should always ask the staff on board before allowing any resident to go to their room *for any reason*.

- Call for medication at the appropriate times – check with the staff on board first to ensure that they are available.
- Assign after-meal chores. These chores should be rotated down the pop sheet.
- Check all chores (after-meal and weekly). If they are done improperly, inform the resident of the problem and ask them to fix it; the chore should then be re-checked.
- Check LEs for completion and initial/date them when completed.
- When changing shifts, the exiting SOB and the incoming SOB should meet to discuss where all the residents are and which residents are doing LE's that day. SOB's should slip any residents who have not completed LE's on time.
- Turn in all time-in/time-outs, IDs, and any other paperwork immediately to staff upon the return home of any resident. If a resident returns with prescriptions or medications SOB must bring client to staff to hand them in.
- Take a head count of residents when leaving as a full-house (or large) group. For any event outside of the house, the SOB is responsible for dividing up the residents into small groups with individual upper-level SOB's for each group. The entire group SOB's are responsible for communicating with the original SOB.
- In the event of a fire alarm, SOB should grab the sign-in/sign-out board on the way out and do a head count by the traffic light on the corner. IMMEDIATELY INFORM STAFF OF ANY MISSING RESIDENTS.
- On trash days (usually Sunday night and Wednesday night) ensure that the trash and recycling are out.
- Announce all smoke breaks and all meals
- Write the staff and resident SOB on the white board of the front of the house.
- Announce groups and have the residents pull up five minutes before the group is to begin.
- Upper residents must take at least one SOB shift per week.
- AT SHIFT CHANGE: SOB's should meet and review the location of all residents; LE sheets should be signed off on when appropriate; urine donation log should be reviewed; slips should be written where appropriate (i.e., if a resident hasn't donated or hasn't completed an LE). SOB's must report to staff that they are on board at the beginning of their shift.
- SOB shut down of house should begin around 10:45pm on weekdays and 12:15am on weekends

### ***KITCHEN SUPERVISOR***

Reports to staff from 7:00AM to 7:00 PM, Monday through Friday. Reports to SOB at all other times.

### ***KITCHEN CREW***

Reports to the Kitchen Supervisor. If they are not available, they will report to the Supervisor on Board.

### ***COMMUNICATIONS SUPERVISOR***

Communication Supervisor reports to staff between 7:30 AM – 6:00 PM, Monday through Friday.

Communication person reports to the Supervisor on Board before 7:30 AM and after 6:00 PM.

\*\*\*If there is no Supervisor on the floor the residents report directly to staff

## LEVEL SYSTEM

All phases are individualized as needed. Below are descriptions of the average lengths of each phase, as well as the typical components of a phase. However, the treatment team is committed to meeting the needs of each individual and recognize some changes or accommodations of phase requirements may happen, and some individuals will complete phases faster or slower than the average. If you feel certain components of a phase need to be amended to meet your needs it should be 'Special Requested' and will be reviewed by the treatment team.

### *Evaluation (Eval.) Phase*

Average Length: 2 weeks

Important Information:

- During the Eval. Phase, a resident cannot hold any money on their person besides for store run.

Privileges:

- May attend all Full House recovery- based meetings, church, house events, and recreation
- One unsupervised personal 15-minute phone call (over the course of Eval)
- One emergency drop-off (this can happen a time that is convenient for the family/friend doing the drop-off)
- May have visit after 14 days
- Smart watches are not allowed

### *Level 1*

Average length: 4 weeks

Privileges:

- May attend all Full House recovery-based meetings, church, house events, and recreation
- May attend the gym
- Two ½ hour walk with companion (level 3 or higher- unless approved by clinical staff)
- May request to attend 1 outside meetings with upper level or companion. Must go to both house meetings.
- May request a weekly visit by including name and phone number on the activity log

- May schedule one 15-minute phone call per week
  - On weekdays, phone calls may be scheduled before 7:30 AM and after 5:00 PM. On Saturdays, phone calls may be scheduled from 9:30 AM to midnight. On Sundays, phone calls may be scheduled from 9:30 AM to 6:00 PM and from 8:00 PM to midnight.
  - Phone calls should be made only during free time, NOT during groups, chores, job functions, or meals unless of emergency, in which there is a resident phone on the desk under the stairs near the staff offices
  - An additional phone call to a sponsor can be made weekly with approval from your case manager
- May prepare for job search by completing a resume and reviewing with their case manager, as well as completing two mock job interviews
- Smart watches are not allowed

## *Level 2*

Average Length: 6 weeks

Privileges:

- May attend all Full House recovery-based meetings, church, house events, and recreation
- May attend the gym
- May sign up to use a tablet for 45 minutes per week
- May use the computer at the public library
- May request a weekly visit by including name and phone number on the activity log
- One ½ hour walk per week
  - Walks are to be taken alone (not with other residents or people in the community). No phone calls are allowed during these walks. The purpose of these walks is to be with self and reflect on your recovery.
  - Residents should be respectful while in the community.
  - Walks may be taken between 6:00-7:00 AM, 4:00-5:00PM, and on weekends during free time.
- May request 2 outside meetings approved by staff. Must go to both house meetings per week.
  - May schedule one 15-minute phone call per week
    - On weekdays, phone calls may be scheduled before 7:30 AM and after 5:00 PM. On Saturdays, phone calls may be scheduled from 9:30 AM to midnight. On Sundays, phone calls may be scheduled from 9:30 AM to 6:00 PM and from 8:00 PM to midnight.
    - Phone calls should be made only during free time, NOT during groups, chores, job functions, or meals, unless of emergency, in which there is a resident phone on the desk under the stairs near the staff offices
    - An additional phone call to a sponsor can be made weekly with approval from your case manager.
  - May carry up to \$10 at any time
    - To request money from their personal funds (including requests for transportation money), residents should use the money request form attached to their activity log. Money will be handed out on Fridays.
    - If requesting additional money, case managers can use their discretion to decide how much money residents should be allowed. If additional money is denied, residents

may appeal the decision to the Program Manager in writing. Residents must retain their receipts for ANY purchases and hand in on activity log

- May participate in job search
- May keep cell phone/smart watch on their person from breakfast meds until dinner meds on Fridays, Saturdays and Sundays.
  - Before a resident may keep a cell phone on their person, they must meet with a recovery coach to review all contacts/social media to remove anything unsafe or triggering. Until a resident completes this process, they may not keep a cell phone on their person.
  - Cell phones may NOT be used during groups.
  - Cell phones may be used during chores and job functions as long as the chores and job functions are still being completed fully. For example, a resident should not be slipped for using their phone during job functions, but they should be slipped if their job function is not completed.

### ***Level 3 (Upper Level)***

Average Length: 10 weeks

- May attend all Full House recovery-based meetings, church, house events, and recreation
- May attend the gym
- May sign up to use a tablet for 45 minutes per week
- May use the computer at the public library
- May request a weekly visit by including name and phone number on the activity log
- Three ½ hour walks per week
  - Walks are to be taken alone (not with other residents or people in the community). No phone calls are allowed during these walks. The purpose of these walks is to be with self and reflect on your recovery.
  - Residents should be respectful while in the community.
  - Walks may be taken between 6:00-7:00 AM, 4:00-5:00PM, and on weekends during free time.
- May request 5 unsupervised recovery-based meetings. ( 2 outside staff approved meetings)  
Must go to one house meeting per week.
- May schedule two 15-minute phone calls per week
  - On weekdays, phone calls may be scheduled before 7:30 AM and after 5:00 PM. On Saturdays, phone calls may be scheduled from 9:30 AM to midnight. On Sundays, phone calls may be scheduled from 9:30 AM to 6:00 PM and from 8:00 PM to midnight.
  - Phone calls should be made only during free time, NOT during groups, chores, job functions, or meals unless of emergency, in which there is a resident phone on the desk under the stairs near the staff offices
  - An additional phone call to a sponsor can be made weekly with approval from your case manager.
- May carry up to \$20 at any time
  - To request money from their personal funds (including requests for transportation money), residents should use the money request form attached to their activity log. Money will be handed out on Fridays. Case managers can use their discretion to decide

- how much money residents should be allowed. Residents must retain their receipts for ANY purchases and hand in on activity log.
- May apply for approval to drive the van
  - May act as a companion to lower-level residents to outside appointments, meetings, etc.
  - May request weekend ½ day (6 hours) passes with approval from the clinical team.
    - Passes are allowed every other week.
    - If the pass is being used to meet with someone staff has not met, then a meeting should be scheduled with staff before the pass.
  - May keep their phone/smart watch on person from breakfast meds until dinner meds 7 days a week,
    - Before a resident may keep a cell phone on their person, they must meet with a recovery coach to review all contacts/social media to remove anything unsafe or triggering. Until a resident completes this process, they may not keep a cell phone on their person.
    - Cell phones may NOT be used during groups.
    - Cell phones may be used during chores and job functions as long as the chores and job functions are still being completed fully. For example, a resident should not be slipped for using their phone during job functions, but they should be slipped if their job function is not completed.
  - May work with clinical team approval

#### ***Level 4 (Upper Level)***

Average Length: 10 weeks

Privileges:

- May attend all Full House recovery-based meetings, church, house events, and recreation
- May attend the gym
- May sign up to use a tablet for 45 minutes per week
- May use the computer at the public library
- May request a weekly visit by including name and phone number on the activity log
- Four ½ hour walks per week
  - Walks are to be taken alone (not with other residents or people in the community). No phone calls are allowed during these walks. The purpose of these walks is to be with self and reflect on your recovery.
  - Residents should be respectful while in the community.
  - Walks may be taken between 6:00-7:00 AM, 4:00-5:00PM, and on weekends during free time.
- May request 5 unsupervised recovery-based meetings. ( 3 outside staff approved meetings, and two personal meetings) Client must attend one house meeting per week.
- May schedule three 15-minute phone calls per week
  - On weekdays, phone calls may be scheduled before 7:30 AM and after 5:00 PM. On Saturdays, phone calls may be scheduled from 9:30 AM to midnight. On Sundays, phone calls may be scheduled from 9:30 AM to 6:00 PM and from 8:00 PM to midnight.
  - Phone calls should be made only during free time, NOT during groups, chores, job functions, or meals, unless of emergency, in which there is a resident phone on the desk under the stairs near the staff offices
  - An additional phone call to a sponsor can be made weekly with approval from your case manager.

- May carry up to \$30 at any time
  - To request money from their personal funds (including requests for transportation money), residents should use the money request form attached to their activity log. Money will be handed out on Fridays. Case managers can use their discretion to decide how much money residents should be allowed. Residents must retain their receipts for ANY purchases and hand in on activity log.
- May apply for approval to drive the van
- May escort lower-level residents to outside appointments, meetings, etc.
- May request weekend day (12 hours) passes with approval from the clinical team
  - Passes are allowed every other week.
  - If the pass is being used to meet with someone staff has not met, then a meeting should be scheduled with staff before the pass.
- May keep their cell phone/smart watch on their person from breakfast meds until 8:30 pm, 7 days a week.
- May work

### ***Level 5 (Upper Level)***

Average Length: 8 weeks

Privileges:

- May attend all Full House recovery- based meetings, church, house events, and recreation
- May attend the gym
- May sign up to use a tablet for 45 minutes per week
- May use the computer at the public library
- May request a weekly visit by including full name and phone number on the activity log
  - Five ½ hour walks per week
    - Walks are to be taken alone (not with other residents or people in the community). No phone calls are allowed during these walks. The purpose of these walks is to be with self and reflect on your recovery.
    - Residents should be respectful while in the community.
    - Walks may be taken between 6:00-7:00 AM, 4:00-5:00PM, and on weekends during free time.
  - May request 6 unsupervised recovery-based meetings per week. ( 4 outside house approved meetings, 2 personal meetings)
  - May schedule four 15-minute phone calls per week
    - On weekdays, phone calls may be scheduled before 7:30 AM and after 5:00 PM. On Saturdays, phone calls may be scheduled from 9:30 AM to midnight. On Sundays, phone calls may be scheduled from 9:30 AM to 6:00 PM and from 8:00 PM to midnight.
    - Phone calls should be made only during free time, NOT during groups, chores, job functions, or meals. unless of emergency, in which there is a resident phone on the desk under the stairs near the staff offices
    - An additional phone call to a sponsor can be made weekly with approval from your case manager.
- May carry up to \$40 at any time
  - To request money from their personal funds (including requests for transportation money), residents should use the money request form attached to their activity log. Money will be handed out on Fridays. Case managers can use their discretion to decide

- how much money residents should be allowed. Residents must retain their receipts for ANY purchases and hand in on activity log.
- May apply for approval to drive the van
  - May act as a companion to lower-level residents to outside appointments, meetings, etc.
  - May request weekend overnight (24 hours) passes and weekend 2-day (36 hours) passes with approval from the clinical team
    - Passes are allowed every other week.
    - Before going on a 2-day (36 hours) pass, residents must go on two overnight (24 hours) passes first.
    - If the pass is being used to meet with someone staff has not met, then a meeting should be scheduled with staff before the pass.
  - May keep their cell phone/smart watch on their person at all times
  - May work

## **TERMINATIONS**

### ***SUCCESSFUL GRADUATION***

A Resident is eligible to graduate when the Resident has successfully met the criteria for all phases of the level system, they have devised an acceptable discharge plan and has met the goals (or plans to continue the goals) of their individualized treatment plan. Graduation ceremonies are scheduled after approval by the clinical team. The Resident must present a thorough aftercare plan at a Staff meeting. If 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, and the residents and guests are served refreshments.

### ***SUCCESSFUL COMPLETION***

Meridian House recognizes that even residents, who don't graduate the program, make substantial progress in their recovery, and accomplish certain treatment goals. Sometimes residents may have made substantial progress in the program and their recovery but have not yet met all the criteria for graduation. In these circumstances residents can special request to successfully complete.

### ***VOLUNTARY DISCHARGE***

Prior to program completion, Residents may elect to depart from the program. Staff may assist the Resident in making alternative arrangements for housing. Residents are informed of the outpatient services available to them. Meridian Aftercare plan is completed and sent with resident in hand. This outlines community resources and upcoming aftercare appointments, such as recovery coaching, psychiatry, MAT, therapy, etc. Voluntary discharge can also occur if client leaves the house for a



prolonged period of time with/without notifying staff of their whereabouts and not providing documentation.

### ***ADMINISTRATIVE DISCHARGE***

Residents who have broken program rules may be discharged administratively. Administrative discharges can be immediate/unplanned if there is a serious safety concern or imminent risk of a serious safety concern. Other behaviors may result in a discharge, but not before the treatment team had demonstrated effort to support you in changing problem behaviors and engaging appropriately in treatment. This may be in the form of individual sessions, support plans, treatment plan adjustments, treatment team meetings, etc.

### ***MEDICAL DISCHARGE***

Beds will be held up to two weeks for Residents in need of inpatient medical treatment. Residents may not return to the Meridian House if their medical condition requires a higher level of care than we can offer.

### ***TRANSFER OR REFERRALS***

If a Resident is accepted into the Meridian House but is found to be inappropriate for the program by the Clinical Team, the Meridian House Staff will refer the Resident to a setting that can better meet the needs of the Resident. The Resident will not be eligible for any privilege increases in the time period before their transfer; however, they will continue to be expected to follow all rules and policies

## **MERIDIAN TERMS GLOSSARY**

- Back and forth: an argument or bickering.
- Chain of Command: residents should follow the chain of command by going to the Resident on Board first with questions or concerns.
- Slip: a small piece of paper used to document behaviors.
- Staff split: when a resident goes to one staff person and then goes to another staff person with the same issue or question, in hopes of getting a different response or causing confusion.
- Deviation: not participating in planned or required parts of programming, without staff permission or a valid excuse.
- Negative contracting: when a resident supports, validates, or helps with hiding negative behaviors, rule violations, or safety issues.
- SOB/staff feedback: if direction is given to a resident by the SOB (see definition below) or staff, and the resident then pushes back on that feedback or makes another rude comment. If a resident does not agree with the direction, they should “concern slip” it, bring it to Conflict group, and/or bring it to their case manager.
- Concern Slip: a slip that is not necessarily on a specific behavior or rule violation rather is written out of concern for the individual. For example, “Sitting alone a lot, not participating in

groups.” In this case, a resident may be worried about the person and want to bring that to their attention.

- On the floor: means a resident is not in their room/ participating in programing.
- Off the floor: means a resident is in their room/ not participating in programming
- Upper Level: as leaders in the community, upper levels have more privileges and more responsibilities in the house than residents at lower levels.
- SOB (Staff on Board): this staff member functions as the ‘go-to’ for resident questions, requests, etc.
- Resident SOB: the resident on board serves as the link between the residents and the staff SOB.
- Vindictive Slipping: when one resident slips another because they are frustrated, mad, or trying to get back at someone for something.
- Slip Stalking: watching over someone’s shoulder as they write a slip.
- Companion: A senior resident who escorts residents to appointments or events.