

# THE BRIDGE

## House Manual

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# THE BRIDGE

## Welcome Statement

*We would like to welcome you to The Bridge and Mom and Me program. We are grateful to become a part of your journey as you continue to move forward with making changes in your life. We are here to guide you to a new way of living life differently without drugs and alcohol. This handbook is for you to be able to become familiar with our program and to allow you to review any of the following information as often as you need to. Please know and remember that you are the reason why we are here and we are more than happy to help provide understanding if there is anything that seems unclear or that you don't understand. We hope that your time at The Bridge is everything you need it to be to return to your family, your community and the life that you deserve.*

*With Love, Dignity and Respect,*

*The Bridge Staff*

Mission Statement “The mission of The Bridge is to provide a holistic substance abuse recovery program for women and their families in a safe and nurturing environment.”

Goals The Bridge, Inc. is a therapeutic community for women who are recovering from alcohol and drug addiction and has implemented an educational model for living skills appropriate to recovering women. Our goal is to facilitate re-socialization of Bridge residents, returning them to their families and communities as healthy, confident, contributing members. For over twenty-five years, we have been reaching out to the women in Nebraska who are ready to make a commitment to life. We believe that The Bridge, Inc. is the type of facility that affects the quality of life of women with chemical dependencies, thereby affecting their families, work associates, churches, schools and community.

The Bridge, Inc. serves adult women across the state of Nebraska (and surrounding states) with particular focus on women residing in the Region III area of Nebraska. We offer a residential Therapeutic Transitional Community for adult women, and Aftercare services for adult women. We are a private, non-profit agency, although our Therapeutic Community programming is overseen and partially funded by Region III.

## Philosophy and Program

The goal of The Bridge, Inc. is to offer women in recovery from alcoholism and/or drug addiction a therapeutic community treatment center in a secure residential setting. The program shall be carried out in a manner beneficial to the individual's self-esteem and personal dignity. Daily living in a family atmosphere is aimed at helping to develop a sense of normalcy and belonging in a non-threatening alcohol and drug free environment. Special emphasis is placed on the individual resident's needs in recovery; stressing development of her own identity, identification of assets and skills, development of additional skills, increased motivation, improved self-image, and the setting of realistic life goals. A desired outcome of treatment is for the resident to establish a functional sobriety, allowing her to re-enter the community of her choice. Other desired outcomes include reductions in health, legal and financial problems, and improved relationships.

The spiritual and cultural needs of all residents are respected, and their growth encouraged. The philosophy and program of Alcoholics Anonymous and Narcotics Anonymous are vital parts of the program. Other viable approaches in the field of addictions counseling are also utilized to compliment the recovery process. Aftercare and follow-up services are provided and are seen as important parts of the continuum of care.

The majority of residents entering The Bridge have just completed inpatient treatment for alcohol and/or drug addiction, and this included completion of a physical examination. The Bridge, Inc. will obtain a copy of the examination report with the signed consent of the resident. Any resident not having had a physical exam in the last 12 months will need to do so by 2 weeks after admission. Any outpatient medical treatment will be continued as needed. All medications will be self administered under the supervision of staff.

The resident's first two weeks (14 days) of residency will be used as a period of orientation, giving an opportunity to become acquainted with both staff and other residents. A detailed tour of the house, a review of the house manual, and advisement of the daily schedule will be completed at this time. The resident will have a primary counselor assigned at the time of admission as well as a technical support staff member as a case manager. During these 14 days, the resident is allowed no male (other than biological family members) or romantic female contact. The new resident may only leave the facility with a senior resident or staff, unless specifically approved by Bridge staff. Attendance and participation in individual and group counseling, House Meeting, Wrap-Up, and AA and/or NA meetings begins at the time of admission.

Psychological or psychiatric testing may be given during this orientation period as determined by the Clinical Director of The Bridge. Through the cooperation of Vocational Rehabilitation, vocational testing will also be done as needed.

Each resident is expected to begin an active effort in securing employment or career preparation within a reasonable period of time, as directed by her counselor. Financial responsibility is an important component not only to the program but also to long-term sobriety. The services of Nebraska Job Service and Central Community College can be used to meet these needs. Those not in the work force due to disability will be required to secure a minimum part-time volunteer

position within two weeks of admission. The resident may obtain assistance in these matters from her counselor and other staff.

Residents are encouraged to take part in other community activities such as church and appropriate self-help groups and activities. As a part of treatment, residents are required to participate in recreational activities and explore the important use of leisure time in recovery.

An Individual Treatment Plan is completed with each resident within two weeks of admission, and can be modified to meet changing needs. Resident self-evaluation and staff evaluation forms completed upon admission are used simultaneously to help the resident monitor her growth. This process will provide the opportunities to participate in her own recovery plan. Staff and the resident review each Treatment Plan at least monthly. All treatment, discharge and aftercare plans meet program certification standards of the Nebraska Department of Health & Human Services.

## Community Involvement

The Bridge, Inc. draws from a variety of local and area agencies for representation on the Board of Directors, including colleges, hospitals, churches, treatment centers, and private businesses. The Board currently includes professionals in the fields of mental health, education, law, religion, health care and other business.

The staff may direct residents with other needs to other service providers. Some of them include: AA and NA, Central Community and Hastings Colleges, Nebraska Health and Human Services, Hastings Family Planning, Mary Lanning Memorial Hospital, Primary Care, The Lanning Center, Workforce Development, Vocational Rehabilitation, YWCA and YMCA, Catholic Social Services and Goodwill. Agencies directly participating in a resident's treatment are given maximum support and cooperation in their efforts. They are provided with all pertinent information including a Treatment Plan, Discharge Summary, and Aftercare Plan, with the written consent of the resident.

## Location of the Facility

The Bridge is located in a residential area of Hastings, Nebraska. The agency has two spacious day rooms for our residents, a large kitchen, laundry room, basement for storage, updated bedrooms, employee offices and a group therapy room. The facility is over 10,000 square feet in size with a large front yard and large fenced in back yard.

The location of the facility is of prime importance as a statement to both the community and the residents. To the community, it is a statement that the residents can be contributors to their neighborhood and community. To the residents, it is a statement that they are respected and can continue the recovery process in an atmosphere of normalcy.

## Resident Rights

### Non-discrimination

All clients are served without regard to race, religion, national origin, economic status, age, disability, marital status or admission status.

### Psychological Enhancement

Residents have the right not to be verbally abused or psychologically harassed. Staff is responsible for continually monitoring their own interaction with residents, to enhance the residents' self-concept. The residents can expect that the social atmosphere of the house be free of procedures, expressed attitudes, and communication patterns that are derogatory to their dignity and self-respect.

### Physical Intervention

Physical intervention with a resident can only be used to prevent the resident from harming herself, another resident, and/or a staff member. The degree or amount of intervention used should only be that which is required to control the destructive behavior. The duration of intervention is limited to the time it takes for the client to get her own behavior under control. A verbal explanation for the intervention is given to the resident at the time of the intervention and written documentation will be placed in the client's file.

### Confidentiality of Information and Records

Standard practices of the agency are taken to ensure confidentiality of client files and include:

1. All current files are kept in locked file cabinets in the Counselors' offices.
2. All discharged files are kept in locked file cabinets in the basement.
3. Information in client files is only released with the written consent of the resident, or as allowed by federal confidentiality regulations.

### Physical Care and Sanitation

Residents are entitled to a physically safe environment, free from hazards including communicable diseases.

Resident facilities are to be clean and sanitary, especially kitchen and bathroom areas. The facility shall meet all state and federal regulations on safety and sanitation. In addition, staff and residents shall maintain high standards of personal hygiene.

Residents with communicable diseases are expected to show extreme caution and responsibility to ensure safety of the staff and other residents.

### Food Program

The Bridge, Inc. is a participant in the Emergency Food and Shelter National Board Program. As a requirement for participation, this is notice for residents that the rules for acceptance and participation in the Food Program are the same for everyone without regard to race, color, national origin, handicap, age or sex. Any person who believes she has been discriminated against in the Food Program should write to: Administrator, Emergency Food & Shelter National Board Program 701 N. Fairfax St. Suite 310 Alexandria, VA 22314-2064.

### Civil Rights

Clients have the right to communicate freely with any person by sealed mail, private phone or personal visits. In order to allow for respect for other residents and staff, and as therapy dictates, this will be done during scheduled times. Limitations are imposed in cases where these contacts are in opposition to the program philosophy and/or are impediments to the resident's individual recovery program.

### Religious and Political Freedom

Residents are free to hold whatever religious and political beliefs they choose. In addition, residents are free to engage or refuse to engage in any political and/or religious worship of their own choosing. However, any and all religious and political activities must be done around the schedule at The Bridge, Inc.

### Legal Rights

Residents have the right to file personally or by counsel, petitions or applications for writs of habeas corpus for the purpose of challenging the legality of such subject's custody or treatment. Residents have the right to be considered legally competent for all purposes, unless they have been declared legally incompetent.

### Resident Involvement in Treatment Plan

Every resident has the right to participate in the development of her therapeutic goals, and discharge and aftercare planning with her counselor. Residents also have the right to participate in the review and/or modification of these plans. Treatment plans are maintained in client's files.

### Right to Treatment

Every resident has a right to treatment, regardless of the treatment status of her spouse or partner. All residents are free to determine a course of treatment and/or aftercare, without consent or approval of their husbands or partners.

### Refusal of Services

Every resident has a right to refuse services, unless such services are required to be given pursuant to a court order. To exercise this right, the resident is required to verbally inform her counselor of her refusal of services. The agency may refuse services at the end of the orientation period based on a resident's behavior and for the benefit of the other residents. The resident being refused services is given a written explanation for the refusal.

### Counselors and Technical Support Staff

Each resident will be assigned a primary counselor, receiving at least two one-hour individual sessions per week. Family counseling will also be available, as needed. Each resident will also be assigned a Technical Support Staff to assist with such issues as education about Bridge rules and expectations, help with employment issues, legal issues, budgeting, credit, and savings plans as well as preparation for transition.

### Budgeting Issues

Food stamps will be used communally, along with meal planning, shopping and cooking. Individual budgets will be implemented with staff assistance to address payment of past obligations, current expenses and savings.



# The Bridge, Inc.

## Organizational Code of Ethics

Understanding the complex nature of the helper-client relationship, The Bridge, Inc. strives to maintain the highest ethical standards within a residential treatment setting. The agency recognizes it is crucially important to provide quality ethical services throughout its program.

Human resources who include personnel, Board of Directors, students, volunteers and consultants are required to read, understand and sign the Organizational Code of Ethics (further referred to as the “Code”) during their orientation to The Bridge, Inc.

Clients are informed of program rules, policies, client rights and the Organizational Code of Ethics during their intake and orientation to the Agency. Clients will be provided with written copies for their reference during their treatment stay.

The Bridge, Inc. policy stipulates that all credentialed/licensed employees abide by their respective professional codes of ethics as well as the “Code”. All other human resources are required to adhere to the “Code” as outlined in this Agency policy. All personnel are expected to operate in an ethical manner, whether personally, or when performing clinical, clerical, business and marketing functions within the Agency and its program. It is The Bridge, Inc.’s policy to not operate outside of your “scope of practice” and to do no harm to clients or other personnel.

The Bridge, Inc. relies upon the following Core Values to promote the kind of relationship within which services can best be carried out and to give guidance in decision-making situations.

### Core Values:

- Integrity
- Honesty
- Compassion
- Progressive
- Respect
- Hope

## Codes of Conduct

### 1. Business Practices

- Personnel will not be involved in non-approved business transactions that conflict with The Bridge, Inc.’s mission.
- Personnel will not falsify business/billing records.

### 2. Marketing Practices

Personnel will not market professional services other than those for The Bridge, Inc., during hours of employment for the Agency.

### 3. Service Delivery

#### a. Conflicts of Interest

Conflict of interest, for purposes within this policy, is defined as “a situation in which an employee has a private or personal interest that might affect his/her ability to be objective in his/her position.

- Personnel will not use their professional relationship for personal interests.
- Personnel will not receive benefits in exchange for influence or to unfairly assist another person.
- Personnel will not use The Bridge, Inc. property for private advantage.
- Personnel will not establish outside employment or moonlighting that is in direct competition with The Bridge, Inc.
- Personnel will not be engaged in any business transactions with clients.

#### b. Exchange of Gifts, Money, and Gratuities

- Personnel will not accept, give, or exchange gifts, money, or gratuities with persons served or their families, unless authorized to do so by the Director on behalf of The Bridge, Inc.

#### c. Personal Property

- Personnel will respect and safeguard personal property of the persons served, visitors, personnel and property owned by The Bridge, Inc.

#### d. Setting Boundaries

- Personnel will not develop a personal, sexual, dating or romantic relationship with a client during the provision of professional services or within five (5) years following the termination of professional services.
- Personnel will not intentionally have contact with a client outside of the work environment during the provision of professional services or within two (2) years following the termination of professional services.

### 4. Professional Responsibilities

- Personnel will not under any circumstances psychologically, financially, physically, verbally, emotionally, sexually abuse/harass, humiliate, neglect or retaliate against personnel, persons served or guests.
- Personnel will respect the privacy of persons served and not share information obtained while working with them.
- Personnel will show genuine interest in all persons served and do hereby dedicate themselves to their best interests and helping them help themselves.
- Personnel will not refuse to provide professional services to anyone on the basis of race, color, creed, age, sex, religion disability or nationality.
- Personnel is committed to provide the best quality of service to those who need my assistance as a professional.
- Personnel will not provide services that they are not licensed or certified to provide.
- Personnel will provide professional assistance to others based upon level of education, training, experience and/or ability to do so.
- Personnel will maintain a professional attitude that upholds confidentiality towards persons

served, personnel and guests.

- Personnel will be honest, fair, consistent, and do what is right, always acting with professional integrity.
- Personnel will be honest about level of education, training, experience and abilities as they relate to job position.
- Personnel will work to be on time for all The Bridge, Inc. activities.
- Personnel will continually assess their personal strengths, limitations, biases and effectiveness.
- Personnel will dress in a manner that reflects The Bridge, Inc. in a positive way.
- Personnel will not possess, use or work under the influence of illicit drugs/alcohol when on duty.
- Personnel will not possess or use weapons while on duty.
- Personnel will not falsify clinical or agency records.
- Personnel will not steal, destroy property, or extort money from clients and/or personnel.
- Personnel will not destroy clinical records and/or business records before the scheduled timeline found in the policy and procedure manual
- Personnel will not misuse, misappropriate, or destroy agency property
- Personnel will not provide false information to the agency.
- Personnel will not participate in any criminal arrests/charges/allegation/convictions which may impact the reputation or integrity of the organization

## 5. Human Resources

- Personnel will respect the rights and views of other personnel, as well as persons served, and treat them with fairness, respect and trust.
- Personnel will be respectful of and work together with other personnel, as well as persons served.
- Upon leaving The Bridge, Inc., personnel will not share confidential information of persons served, personnel, or The Bridge, Inc. business.
- Personnel will treat all personnel, persons served, and guests with respect and dignity.

### Crisis/Relapse Prevention Plan

A crisis is anything that can interfere with your process of recovery/discovery. If you find yourself in a crisis and/or are having thoughts of using please contact the staff of The Bridge, Inc. immediately. Staff is available 24 hours a day, a counselor will be called if requested.

Upon admission, client's are given a Crisis/Relapse Prevention Packet. Please utilize the list of relapse warning signs given to you by the counselor and identify the signs that most fit yourself. Take time to review your personal warning signs with your primary counselor as well as evaluating yourself on a weekly basis to identify whether or not you are in a relapse pattern. The goal is to avoid relapse and learn from these crisis situations so we can strengthen your recovery together.

If needed, a team meeting will be set up to assist in looking at the client's need for continued recovery. This meeting will be a joint effort by staff and consults with others on client's treatment team to look at what is needed to avoid a crisis in the future.

## Client Fees Policy

The Bridge, Inc. will accept as payment in full Medicaid MRO and SA Waiver service reimbursements for those clients who are Medicaid-eligible. Private health insurance benefits are also accepted. The cost per day of Therapeutic Community Treatment is \$180.

Regarding residential treatment, The Bridge, Inc. is funded for four beds by Region 3 of the Nebraska Behavioral Health System. Clients who meet the financial eligibility as prescribed in the DHHS/Division of Behavioral Health Financial Eligibility Fee Schedule are eligible for these beds when available.

If a state-funded bed is not available and the prospective client is not Medicaid-eligible nor has private insurance benefits, it is the policy of The Bridge, Inc. to use a sliding fee schedule to determine discounts of our fees. Discounts are offered depending on household income and size, and are based on the federal poverty guidelines as determined and published by the Department of Health and Human Services. It is the policy of The Bridge, Inc. to provide essential services regardless of the client's ability to pay.

### Procedure

- ➔ Information regarding income and Medicaid eligibility (or its potential) will be gathered prior to admission to The Bridge, during the intake interview.
- ➔ Upon admission to The Bridge, income will be verified by means of copies of income tax returns and pay stubs.
- ➔ Clients who are accepted into The Bridge's residential program and appear to be eligible for Medicaid will be required to complete the enrollment process in a timely manner. Cooperation in all aspects of Medicaid enrollment is expected. Assistance is available from Bridge staff to meet the obligations involved in this process.
- ➔ Those seeking residential treatment:
  - ➔ 1) Who do not meet the financial need threshold for Region 3 beds
  - ➔ 2) Are not and cannot become Medicaid-eligible
  - ➔ 3) Qualify for Region 3-funded beds, but no beds are available
- ➔ May apply for fee discounts to The Bridge by completion of our Discounted/Sliding Fee Application.

The schedule of client fees will be reviewed and adjusted (if necessary) on an annual basis.

<b>2011 HHS Poverty Guidelines</b>			
<b>Persons in Family</b>	<b>48 Contiguous States and D.C.</b>	<b>Alaska</b>	<b>Hawaii</b>
1	\$10,890	\$13,600	\$12,540
2	14,710	18,380	16,930
3	18,530	23,160	21,320
4	22,350	27,940	25,710
5	26,170	32,720	30,100
6	29,990	37,500	34,490
7	33,810	42,280	38,880
8	37,630	47,060	43,270
For each additional person, add	3,820	4,780	4,390

SOURCE: *Federal Register*, Vol. 76, No. 13, January 20, 2011, pp. 3637-3638

### **Discounted/Sliding Fee Schedule**

Monthly Income Thresholds by Sliding Fee Discount Pay Class & % of Poverty					
Family Size	Minimum Fee	25% pay	50% pay	75% pay	100% pay
Poverty	150% or below	200%	250%	300%	350%
1	\$1361	\$1815	\$2269	\$2723	\$3176
2	\$1839	\$2452	\$3065	\$3677	\$4290
3	\$2316	\$3088	\$3860	\$4587	\$5405
4	\$2794	\$3725	\$4656	\$5588	\$6519
5	\$3271	\$4362	\$5452	\$6542	\$7633
6	\$3749	\$4998	\$6248	\$7497	\$8747
7	\$4226	\$5635	\$7044	\$8453	\$9861
8	\$4704	\$6272	\$7840	\$9407	\$10,975

The payment due for those below 150% of poverty is zero dollars.

Revised 04/07/2011

### **Rent Policy**

In an effort to better prepare our residents for their future, we collect rent at the rate of 30% of resident's net earned income from all sources. This pays for shelter expense, telephone, cable, garbage services, transportation (when appropriate) and the many other benefits that are provided to Bridge residents. Rent owed to The Bridge must be paid in full as a condition of successful transition from the program. If a resident leaves the program with a balance due, it must be paid within 14 days or the account will be turned over to an agency or attorney for collection

# Mom and Me Program

The Bridge can accommodate up to 2 dependent children, age eight (8) and under, who are in their mother's care while living in our therapeutic community. Programming for mothers with their children carries a heavy emphasis on pertinent parenting issues.

## Parenting Guidelines

As a parent you are your child's most important role model and source of support. This is especially true for children who have witnessed the effects of your addiction. Please use this opportunity to take care of yourself, to improve or enhance your relationship with your child and to help your child develop positive safety and coping skills. Substance abuse affects the entire family. As you heal, grow and learn new skills, so must your child. We are here to help you become the best parent you can be. Most recovering mothers admit that addiction robbed them of being the best they wanted to be.

## Children's Safety

Supervision: Infants, toddlers, preschoolers and school-aged children must be adult supervised/within your eyesight at all times, inside and outside, awake or asleep. When children are lying down to nap or go to bed at night, baby monitors may be used to listen for them.

Mothers must be with their children while they wait for transportation and/or are being transported to and from daycare, preschool and school. Children must have adult supervision while playing in playroom and playground areas, both inside and outside.

Infants and children must be in approved car seats and/or restraints at all times during any vehicle transportation.

A parent may ask a senior resident of the facility to watch their child while they tend to personal matters and appointments.

## Children's Emotional Needs

As deemed appropriate, individual and family counseling will be available to children whose mothers are in the Bridge and Mom and Me programs.

## Children's Services Coordinated with Other Programs

The Bridge/Mom and Me collaborate with local service providers for services not provided on site. These services include Primary Care, Adams County Health and Human Services, Adams County Immunization Clinic, CASA, Early Head Start, Healthy Beginnings, Hastings Public School Systems and Head Start.

## Daycare

At an age deemed appropriate by both staff and parent, children will be enrolled in offsite daycare services M-F 9:00-3:00 and/or while the mother is participating in programming and work. Staff will assist mothers in obtaining childcare that both the mother and child are comfortable with. A list of current licensed childcare providers is available in support staff offices

## Mealtimes

Children must be brought to the dining area and offered three meals per day and snacks. Breakfast and dinner will need to be within the scheduled times. Breakfast needs to be offered to children within thirty (30) minutes of the child waking up for the morning. Lunch is to be prepared and served between 11:00-1:00 as determined by each family's schedule. All snacks and meals must be eaten in the dining room at the tables.

## Children's Health

At The Bridge/Mom and Me health and hygiene are of great importance. To help cut down on illnesses and promote good hygiene, mothers and their children are to wash their hands after using the bathroom and before/after each meal. Mother's are responsible for ensuring that their child has had a bath every day and clean clothes.

All children should be clean and dressed before going to daycare, school or all other outings. This includes proper clothing, shoes and coat (as needed for weather conditions). Please also be sure your child has plenty of diapers, wipes and formula. If you are getting low on one of these items and will not be able to replenish supply on your own, please give staff ample notice. Children must be current on all immunizations. If immunizations are not current, staff will help you schedule an appointment with the Adams County Immunization Clinic or a physician. If you suspect that your child is ill or needs medical attention, it is the mother's responsibility to notify staff and contact the child's physician. Sick children need to stay in their rooms when they are ill so as not to spread illness, unless deemed unnecessary by a medical professional.

If your child is ill, please use the following procedure.

1. The parent will call the child's school or other scheduled arrangements and notifies them that the child is ill and will not be attending school/appointment/daycare.
2. If you suspect that your child needs medical attention, contact their physician.
3. If a physician sees a child, written documentation from the physician stating illness, treatment and precautions must be turned into staff immediately.
4. When your child is ill, the child must remain in their room. The mother is responsible for staying with the child and monitoring the increase or decrease of symptoms.

## Promotion of a Non-Violent Environment

No physical or negative discipline. Spanking has been shown to have negative effects on children. Therefore, only non-physical discipline is allowed at Mom and Me. Examples of non-physical discipline include redirection, natural/logical consequences, time out, taking away an object or privilege, validating feelings and/or other means of positive discipline.

Physical abuse such as spanking, pinching, hitting, slapping, jerking, kicking, pulling hair, squeezing, biting or any other form of physical abuse to any child will not be tolerated. Verbal or emotional abuse such as yelling, cussing, name calling, belittling, embarrassing, threatening or using scare tactics to correct your child or any child is not permitted. Counselors and staff are available to work with you on positive ways to discipline your children. Children can solve problems with other children in other ways besides using physical aggression. Teach children what they can do instead of being physical, i.e. ignore the situation, talk to an adults or staff, talk it out.

### Keeping the Facility Clean

Food and drinks are to be kept in the kitchen and dining areas only. Parents are responsible for cleaning up or making sure that their child cleans up after all snacks and meals when the child is finished eating.

Play dough, paint, markers, and crayons are to be kept and used in the playroom area only. Craft items are to be closely supervised by moms and put away after each use.

Soiled diapers will be tied up in plastic bags and placed in outside garbage containers. Wet diapers must also be discarded in outside garbage containers. Rooms must be kept organized and clean. Please take pride in your home and pick up after your children (meals, toys, clothing).

### Children's Educational Needs

School age children must be enrolled in the Hastings Public School system within two business days of residency at the Bridge/Mom and Me. Counselors and staff are available to assist families with enrollment.

Encourage your child to ask you or staff for help should he or she have questions or problems with schoolwork.

### Quiet Time

Nap or quiet time: Children should be laid down for naps as it is appropriate with his/her age and personal schedule.

Bedtime Hours:	Weekdays	8:30 Pre-school and under 9:00 School age children
	Weekends	9:00 Pre-school and under 9:30 School age children

Family time is 6:00-8:00 pm. This is a good time for children to go on a walk, watch a movie, draw or read with their parents.

The North Dayroom is designated for children and their mother's for television viewing and other family time.



## Client Input

Input from clients is highly valued by The Bridge and is used to improve the program where needs are identified. Input can be given in a variety of ways: putting suggestions/comments in the box located in the phone room, participating in client satisfaction surveys, the weekly Advisory Meeting and in group and individual sessions.

## Grievance Procedure for Residents and Family

Most frequently, when problems arise, solutions or resolution can be reached informally between yourself and the Bridge, Inc. personnel. When this informal process does not reach a solution, a more formal procedure is followed.

The first step in the formal process is a written complaint. The written complaint is to be submitted on forms located in the phone room forms file and can also be obtained from The Bridge, Inc. personnel. This form is to be submitted to the Director. Any complaints will be investigated immediately and you will be given a written response within five (5) working days of receiving the complaint.

The next step, if you had a complaint that was not successfully resolved, is to file a written grievance. Such grievance must be filed within seven (7) days of receipt of the written response to the initial complaint. The written grievance is to be submitted on forms also located in the phone room and/or from The Bridge, Inc. personnel. The grievance is to be submitted to the Director. Any grievances will be investigated immediately and you will be given a written response within five (5) working days of receiving the grievance.

The next step, if you had a grievance that was not successfully resolved, is to file a written appeal. An appeal must be filed within seven (7) days of receiving the written response to the grievance complaint. The written appeal is to be submitted on forms located in the phone room and/or from The Bridge, Inc. personnel. The appeal is to be submitted to the Director who will then forward it to The Bridge, Inc. Board of Directors President. You will be given a written response within fifteen (15) working days.

You may submit a complaint about The Bridge, Inc. to the Nebraska Department of Health and Human Services for an external review. We do prefer that you first exhaust all of the above-mentioned procedures prior to this, because a solution to your complaint can usually be found by using these methods. Information on how to submit a complaint to Nebraska DHHS is posted in the resident's phone room.

# Admission Policies

## Order of Admission

Referrals for Region 3-funded beds will be considered for admission in the following order:

1. IV drug users who are pregnant;
2. Other pregnant substance abusers
3. Other injecting drug users
4. Women with dependent children
5. Mental Health Board Commitments
6. All other individuals

All other referrals will be considered on a first-come first-served basis at the discretion of the Clinical Director.

## Admission Criteria

1. All applicants must have completed some form of primary addiction treatment within the last twelve months prior to admission. A release form from the primary care facility will be signed so The Bridge, Inc. has access to all pertinent information, including physical and psychological testing and discharge summary.
2. All applicants must be ambulatory and capable of self-care.
3. All applicants must have a minimum of 30 days of sobriety (alcohol and drug free) at the time of admission.
4. All applicants must be potentially employable, and/or willing to continue their education for career preparation. All applicants out of the work force due to disability must be potentially able and willing to do volunteer work.
5. All applicants must be willing to comply with the program of The Bridge, Inc.
6. Applicants must complete an intake screening in person or over the phone with staff prior to admission. (Adjustments may be made to this if an individual is incarcerated.)
7. At time of admission all medications and personal belongings will be checked in with staff.

## Length of Treatment

1. This program is aimed at treating each resident as an individual with individual needs; therefore the length of stay is variable.
2. The projected length of stay is eight (8) to twelve (12) months.

## Personal Property

Residents are responsible for their own personal property. Upon entering the program, the resident will sign a statement of responsibility. Purchasing of personal insurance (i.e., renter's insurance) is allowable and encouraged.

Personal property and medications belonging to a resident and left at The Bridge upon her discharge will be disposed of after thirty (30) days. We will forward your mail for thirty (30) days if you leave a forwarding address. Beyond that time frame all mail will be marked return to sender. The Post Office will not let a change of address occur from our agency to a private address, your personal address will need to be changed with any person or agency you expect to receive mail from.

## Medical Policy

### Medical and Health Care

Formal agreements have been made with medical facilities in the Hastings community, licensed by the Nebraska Department of Health & Human Services or under the control and operation of the federal government, to meet acute or emergency health needs of the residents. Upon request, a listing of some doctors, dentists, eye doctors, and lawyers will be made available to the resident.

### Medical Bills

All medical fees, including prescriptions, physicians, exams, surgeries, ambulance services, and hospitalizations are the responsibility of the resident. When needed and possible, staff will assist in obtaining financial assistance from other entities for these services.

## Relationships/Dating Policy

The Primary Goals of treatment at The Bridge, Inc. are to establish a functional sobriety and develop adequate life skills. Treatment at The Bridge, Inc. requires considerable time and energy, with the focus being on the resident and her recovery.

Romantic relationships require time and energy, which can detract from treatment. Specifically, starting a new relationship too soon or focusing too much on a current relationship can interfere with reaching the goal of recovery. Therefore, guidelines are in place to assist the resident in gaining self-awareness and ensuring readiness to begin dating or resume active participation in a current relationship.

1. Male contact or romantic female contact is strongly discouraged. This includes but is not limited to dating, socializing, receiving or initiating mail or telephone.
2. For married couples or those who are already in healthy, established relationships, the frequency and focus of your relationship will become part of your treatment plan. The purpose of your stay here is to work primarily on your sobriety and not on your relationship.

## Medication Policies

1. All necessary medication will be secured on the premises and monitored according to the Nebraska Health and Human Services requirements, with the exception of birth control pills and vitamins. Birth control pills and vitamins are the responsibility of the resident, but must be checked by a staff member on admission and/or if purchased at other time during the residency.
2. Reasonable and responsible use of non-narcotic over the counter medications is permitted.
3. Dispensing of medication will be according to the following procedure (as approved by Nebraska Health and Human Services):
  - A. All residents are required to have their medications checked and logged into medication logbook by a staff member upon admittance to the facility. Staff will keep accurate logs of medications used by each resident.
  - B. All medication except birth control pills and vitamins will be secured under lock and key in the tech office.
  - C. Daily – residents are responsible for contacting staff that will allow them access to their medication. Staff will observe and both parties will initial the medication log to document that the meds were received.
  - D. Residents are responsible to maintain an adequate supply of secured medications and to responsibly handle their supply.
  - E. The resident is responsible for planning ahead to cover the extended times of holidays and overnight passes.
  - F. Anyone found to be misusing or abusing her prescription medications will face possible discharge.
  - G. All medications left unclaimed 30 days after termination from The Bridge and any medications that are discontinued or left over from a medication change will be destroyed in accordance with current recommended procedures.

## Passes

For residents first 30 days of residency, she must have an approved pass by staff to leave the facility and/or to have visitors.

The resident must fill out the pass completely and give it to staff to be signed.

After hour calls to counselors and all staff are limited to emergencies only.

Passes for unusual events (such as a request to leave town or to have visitors) should be filled out enough in advance that it can be discussed at staffing on Wednesday afternoons.

The pass should be posted on the residents' bulletin board until the activity is completed. The resident should then take it down and turn it into the technical support staff.

1. Overnight passes, at the rate of one per month, may be granted after two (2) months of residency at The Bridge.
2. Two-night overnight passes, at the rate of one per month, may be granted after four (4) months of residency at The Bridge.

## Standard Pass

At a resident's 30-day review she can request a standard pass for her daily activities, such as AA/NA, work, church, stores, etc. Those things that are approved by staff and her counselor should be written on a pass form, signed by a staff member and permanently posted on the residents' bulletin board.

## Phone Passes

For a resident's first 14 days a phone pass should be completed and signed by staff for each call a resident makes as well as logging the phone call on the phone log.

After 14 days, unless stated otherwise, phone passes won't be needed. All phone calls will be logged.

## Orientation

During a resident's first fourteen (14) days, she will complete an orientation period.

Expectations during orientation include:

- A. A senior resident or staff member must accompany the resident when she leaves the house except for AA/NA meetings, job searching and appointments.
- B. The resident is allowed phone and mail contact with immediate family members only. Visitors should be approved by staff.
- C. Letter writing is limited to immediate family members only.
- D. All new residents must receive permission from a staff member and have signed telephone call pass to make calls.
- E. After the client's 14-day orientation period, the staff will review the client's progress and compliancy.

For the first 30 days until you receive a standard pass, you are required to complete a pass when leaving the facility, including all AA/NA meetings, unless staff is present the entire trip.

A pass must be filled out by staffing on Wednesday for any resident requesting guests to visit the house, requesting to leave with a guest, requesting overnight absences from the house, or going out of town.

After a resident's satisfactory 30-day review, standard passes may be written for work, community service, regularly scheduled visits with children and residents other daily activities.

The standard pass gives privileges agreed upon between the resident and the primary counselor. Resident will sign in and out each time they are out of The Bridge.

When you are placed on restriction, the standard pass is revoked, and you have to have a signed pass each time you leave The Bridge, except for work and AA/NA meetings.

When out on a pass (specific or standard) you must adhere to all conditions of the pass.

If you violate the terms of the pass (time, destination, purpose), you will be subject to a warning, a "72," or discharge, depending on the severity of the violation and the discretion of the staff.

All passes must be completed fully and given to staff in advance. If house duties will be missed, include a plan for doing them before leaving on pass or for substitutes.

## Visitors

All in-house visitation is to be approved by appropriate staff members and residents. There will be no changes made on the visitation request without consent from the staff. Staff and the other residents must approve special visitation requests.

In order to protect the rights and privacy of the residents, the resident will notify staff and other residents when visitors are to be in the house. Specific information concerning date, time, and length of stay should be given.

## Telephone

The telephone in the residents' office is for the residents' use. As a courtesy to fellow residents, all calls are limited to fifteen (15) minutes. The timer must be used for all phone calls to assist in keeping to the fifteen (15) minute limit. A resident may make calls consecutively as long as it does not exceed the fifteen (15) minute time limit, but will wait thirty (30) minutes between phone sessions.

All phone calls must be logged in the client's phone log.

Incoming calls are discouraged after 11:00 p.m. Please inform your friends and family of this policy. Residents are not to use directory assistance, last call return service or other fee-per-use services. If assistance is needed in obtaining a phone number, please ask a staff member.

Use of cell phones is highly discouraged. However, use may be granted as deemed necessary by a client's counselor. All cell phones will be kept in a locked cabinet in the tech office and will be checked in and out through staff.

Information about current or former residents and staff is not to be given out over the phone. Refer any callers to the Director or other staff.

Phone calls may not be made or received during meetings, client ed., group, house cleaning, or supper. (Messages on answering machine may not be played during these times either.)

## Internet Policy

A computer is provided for resident use at The Bridge. Residents agree that they will not use the computer, network or internet resources for any of the unacceptable uses as outlined below:

Unacceptable uses of computer, network, and Internet resources include, but are not limited to the following:

- Use that violates State or U.S. law and regulations.
- Use for immoral, illegal or unethical purposes.
- Use that will cause harm to, or invade the privacy of, another individual.
- Creating or forwarding of chain mail or "spam" regardless of content.
- Posting agency information to external newsgroups, bulletin boards or other public forums without permission.
- Use for commercial purposes, financial gain, or fraud.
- Use for personal profit, political fundraising, or gambling.
- Use to obtain, view, download, or otherwise gain access to potentially objectionable or pornographic materials, including text materials, video images, or sound files that may be considered objectionable.
- Sending or receiving offensive messages, pictures, or other materials over the e-mail system.
- Using obscene language.
- Harassing, insulting or attacking others.
- Any use that violates public safety or compromises the privacy of legally protected resident or citizen information.
- Violating copyright laws, including, but not limited to, downloading or copying of copyrighted materials, music, video, text or pictures.
- Hacking systems and databases or acting to disrupt systems or cause unnecessary network congestion or application delays.
- Intentionally wasting limited resources, including bandwidth, ink, paper, etc.
- Knowingly installing viruses, spyware, or adware.
- Use of any remote control software on any internal or external host personal computers and/or networks or attempts to gain unauthorized access to remote systems.
- Damaging or modifying computers, computer systems or computer networks, including installing or removing software.
- Using others' passwords or trying to change passwords without permission.
- Trespassing in others' folders, work or files.
- Removal of any property, either hardware or software.
- Downloading any material such as music, pictures, videos, games, software, etc.
- Participating in social networking sites, chat sites or video chatting (i.e., Facebook, MySpace, Instant Messenger, Yahoo Messenger, Skype, etc.)\*
- Correspondence or association of any kind with persons deemed to be "off limits" by The Bridge, Inc, counselor, probation, parole, Drug Court or any other authority.

Any violation of this agreement may result in a loss of access as well as other disciplinary action up to and including termination from The Bridge, Inc. depending upon the severity of the offense.

The use of personal laptops is discouraged.



## Causes for Disciplinary Action or Discharge

Disciplinary action is viewed as an acceptance of responsibility and not as “punishment.” Residents and staff have an active role in house discipline. Forms of discipline include Warning, Restriction, Probation, and 72-Hour Discharge. These are defined and explained in the back of this manual.

Immediate discharge is the consequence for any and all use of alcohol and/or other non-prescribed drugs by a resident.

When it appears that a resident’s behavior (such as continual, excessive rule violations, overall irresponsibility, and/or disrespectful actions toward residents and/or staff) threatens the stability and treatment of other residents, services may be terminated for the resident exhibiting the behavior(s).

Shoplifting and/or other illegal activities, including theft from other residents, are grounds for discharge.

Any form of violence or threat of violence may be grounds for discharge.

Consistent dishonesties may be grounds for discharge.

Failure to pay rent may be grounds for discharge.

Residents having knowledge of any violation of house rules and who do not report such violations to the Resident Assistant or a staff member will be subject to disciplinary action, including possible discharge.

A resident may be discharged at the end of the orientation period if it appears that her behavior threatens the stability of the other residents. A written explanation for this denial of services is provided.

No contact with residents is allowed for thirty (30) days if discharged for any reason other than transition.

## Re-admission

Any resident who has been therapeutically discharged for 72 hours must call her counselor or Director within 24 hours if she wants to re-apply for admission. One requirement for re-admission is a minimum of 72 hours living out of the house and remaining alcohol and other-drug free. After these 72 hours, the resident may seek re-admission by presenting herself before her fellow residents and the staff. Only with the approval of residents and staff can she be re-admitted. Staff may adjust the 72-hour minimum time limit.

## Definitions

Warnings: Residents are given warnings by staff and other residents for violation of house rules. All warnings are to be recorded on the clipboard in the tech office. Written acknowledgment of the warning needs to be given to the party issuing the warning. The acknowledgment is then turned in to the staff. Accumulation of three (3) warnings by a resident within a thirty (30) day period will result in that resident being placed on restriction for five (5) days. Thirty days after receiving a warning, if not placed on restriction in those thirty days, the warning will void out.

24's: Given by one resident to another requesting the resolution of "personal problems." The resident giving the 24 will write it out and she will provide a copy to the staff. If the issue is not resolved within 24 hours, staff will become involved.

Restriction: A resident is considered to be on restriction following an accumulation of three (3) warnings within a thirty (30) day period. A resident may also be placed on restriction by Clinical Staff as a re-direction tool. Restriction lasts for five (5) days. A warning received while on restriction will result in an additional twenty-four (24) hours being added to the restriction period. The following conditions apply while on restriction:

1. May only go to work, AA/NA meetings, Sunday church service and/or school.
2. May go to doctor's/probation appointments and bank with a signed pass from staff.
3. Can have visitors, but only on-site and only if approved.
4. Cannot participate in any special activities unless a pass is approved and the activity is a house activity.
5. Cannot go to the YMCA to exercise.
6. Cannot make or receive phone calls, except emergencies, job related and children or as approved by staff. Must have a pass signed by staff to use the phone.
7. No passes previously written will be honored.

Probation: A period deemed necessary by staff, during which time no overnight passes or special privileges are given in addition to the above restriction requirements. Any violation of house rules during this probationary period may result in immediate discharge. The resident's attitude will be observed during this time and a Peer Review may be conducted in either Group Therapy or Client Education group sessions at the end of the probationary period.

72-Hour Discharge: In response to serious or continual violation of house rules or policy, staff may give a 72-hour discharge. Conditions include:

1. The resident must leave the facility for that time period and have no contact with the other residents. Staff will assist in setting up safe location as necessary.
2. The resident must call her counselor or agency director within 24 hours if she wishes to apply for re-admission.
3. The resident must be free of drugs and alcohol in the time she is gone. A UA will be given upon her return to The Bridge.
4. The resident must come before staff and the other residents. She is to present all of her dishonesties and answer any question or discuss any suggestions the staff or residents may have.
5. If re-admission is granted, the resident will return to orientation status.

## House Duties

1. Household Duty Assignment:
  - A. Weekly household duties are assigned to each resident on a rotating basis.
  - B. The cleanliness of the house is expected to be maintained daily. Staff may conduct a house check any time during the week. House checks will be done daily at 10:00 am.
  - C. All residents do a weekly, thorough housecleaning every Saturday afternoon. The Resident Assistant and weekend staff personnel inspect on Saturday evening, and a House Meeting follows this, which is mandatory for all residents.
  - D. Re-dos must be completed and signed off by 6:00pm the same day. For Re-do's that are not signed off or are incomplete; the resident responsible will receive a warning.
  - E. If leaving on pass while weekend house duties are going on, cleaning must be completed prior to departure or as approved by staff.
  - F. Residents are responsible for finding a substitute for their house duties if they are unable to complete them.
2. On a rotating basis, a Resident Assistant will be assigned each week based on seniority. Her responsibilities include:
  - A. Making sure that the house duties are being completed,
  - B. Going through the House Manual and giving a tour of the house to any new residents,
  - C. Ensuring that the recycling bins get put out the night before pick-up,
  - D. Taking notes at the House Meeting,
  - E. Chairing the in-house AA/NA meeting,
  - F. Going on weekend house check with staff,
  - G. Writing any thank-you cards for donations (these are to be complete and up to date by the next rotation of duties,)
  - H. Most importantly, acting as a mentor to all residents.

3. A planned, family-style meal will be served daily at 5:00 or 5:15p.m. depending on house activities. Responsibilities are as follows:
  - A. Responsibility for cooking and shopping will be rotated weekly.
  - B. Cooks are responsible for making a nutritional menu and the shopping list. Menu is to be made and approved by staff by Friday at 5:00 p.m.
  - C. Cooks do the grocery shopping for the upcoming week (done by Sunday at 8:00p.m.)
  - D. Grocery budgets will be given depending on the house occupancy at the time. All of the week's groceries must be within this limit.
  - E. Cooks set the table for scheduled meals.
  - F. Everyone helps clear the table, load the dishwasher and clean up the kitchen after each meal. It is the cooks' responsibility to dismiss all residents when they feel cleaning is complete.
4. Dishes:
  - A. Cooks will do their own pots and pans.
  - B. Residents will sign up for nights to be responsible for the dishes. They will load the dishwasher and run it after supper. When that load is finished, they will put away the clean dishes and load whatever dirty dishes have accumulated.
  - C. If the dishwasher is running or has clean dishes waiting to be unloaded, the other residents should rinse their dishes well and leave them in the rack in the sink. Otherwise, residents should load their own dishes throughout the day.
5. This Agency requires for safety and cleanliness that we:
  - A. Use the storage area in the closet by the freezers for items such as Clorox, SOS pads, dish soap for the dishwasher and sink ONLY.
  - B. Cover everything in refrigerator and the pantry. All opened food products must be put in sealed containers with the date and contents marked.
  - C. Items five (5) days old or older in the refrigerator must be thrown out, unless expiration date markings indicate otherwise.
  - D. Dishes not washed in dishwasher must be rinsed with one cap of bleach to one gallon of water, after being hand washed with regular dish soap.

6. Linen should be washed once a week. Bedspreads may be washed in the washing machine and hung dry when weather permits.
7. Laundry facilities are to be used only between the hours of 8:00 a.m. and 9:00 p.m. Do not operate the washer or dryer without lint tray in place. No clothing is to be dyed in the washer. Only High Efficiency Laundry Soap may be used in the Washers. Do not use dryer sheets. Liquid softener may be added to the washer instead.
8. Residents will rotate responsibility for cleaning their bathrooms with the other women who share that bathroom.

## House Rules

1. The philosophy of the house is based on LOVE, DIGNITY AND RESPECT, therefore:
  - A.** It is important that if a resident has a problem with another person, she is to go directly to that person and express her feelings and work the problem out within a 24-hour time period. This is positive, solution-oriented behavior. Talking to a third party is not, and does not reflect The Bridge, Inc. philosophy of LOVE, DIGNITY AND RESPECT.
  - B.** If you have a complaint or issue with a staff member, take it to that staff member immediately. If you feel the situation was not resolved satisfactorily, then take it to the Director.
  - C.** You are expected to clean up after yourself. You cannot leave personal items lying around. You are expected to replace toilet paper, Kleenex, paper towels, and make more coffee when you drink the last of it. You must clean up your own drinking glasses, cups, plates, etc.
  - D.** Out of respect for the other residents and staff, please operate the television, radio or stereo in a considerate manner. Conversations and activities after 10 p.m. should also be carried out with the same consideration.
  - E.** Talking with one another about leaving the treatment program will be grounds for disciplinary action.
  - F.** Residents should be conscious of their language. Consistent use of foul language is not acceptable and is grounds for discharge. Socially acceptable manners are expected.
  - G.** The confidentiality of the other residents should always be kept. Matters concerning an individual or the group should not be shared outside of the house.
  - H.** Continually treat each other with LOVE, DIGNITY AND RESPECT. If someone is giving you rides, help pay for their gas. If you are leaving for a meeting, see if anyone else would like to go. Treat each and every member of this house, as you would like to be treated yourself.
2. Each resident is expected to begin an active effort in securing employment or career preparation as within a reasonable period of time, as directed by her individual counselor.
3. All residents are required to meet with appointed staff each payday to go over expense sheets and budgets. All forms of income must be reported to staff.
4. Residents are expected to sign in and out when entering and leaving the house. The sign in/out sheet is located on the residents' bulletin board by the residents' phone. When leaving, the resident should mark the time they left and the time they expect to return. When returning, they should mark the actual time they returned.

5. Curfew is 10:00 p.m.
6. Residents will be seated for evening meals promptly at 5:00 p.m. or 5:15 p.m. unless otherwise approved by staff. If a resident is going to be absent from dinner, it is their responsibility to inform the cooks a day ahead of time.
7. It is mandatory for all residents to participate in all house meetings and house activities.
8. Residents are required to attend a minimum of three (3) community AA or NA meetings weekly. The noon meeting (Daylight Group) is mandatory for all residents unless resident is working or approved by staff. For residents without employment, this meeting does not count as one of their three meetings for their week. For residents with employment, the noon meeting may be counted as one of their three meetings.
9. Unless a physician states otherwise, exercise is mandatory for each resident for at least 20 minutes, three times per week. You may choose the form of exercise you wish to do.
10. Residents are expected to be awake and out of bed by 8:00 a.m. Monday through Friday, by 9:00 a.m. on Saturday and Sunday, unless there is a scheduled house activity.
11. Proper attire will be worn at all times. There will be absolutely no revealing clothing worn. No profanity or advertisements for alcohol and/or illegal substances on clothing.
12. Candles may not be burned within the agency.
13. The agency is a non-smoking facility. Smoking is allowed in designated areas outside the building.
14. A resident shall not enter an establishment whose primary business is the serving of alcohol, nor attend private gatherings whose primary focus is the use of drugs or alcohol.
15. Gambling is prohibited while a resident of The Bridge, Inc. Gambling is defined as participating in any game of chance, whether for money, goods, or services. Gambling includes pickle cards, lottery tickets, raffles, casino games, bingo, keno, and sports betting.
16. Each room is supplied with a bulletin board, dry erase board and calendar. The decorations and bedding that are in the room when a resident checks in must stay in that room when she leaves or if she moves to another room. Residents may decorate their bedrooms as they wish; i.e., plants, pictures, etc. Tape, tacks and nails may not be used on the walls. Do not hang anything from the sprinkler system pipes or heads.
17. The Bridge will provide bed sheets, pillowcases, washcloths, towels and blankets for each resident.
18. Sanitary napkins and tampons are to be carefully wrapped and placed in the plastic lined bathroom wastebaskets. **DO NOT FLUSH THESE ITEMS DOWN THE TOILET.** Also, do not to flush diapers, paper towels, etc.

19. Windows and doors must be closed if the air conditioner or furnace is on. Keep all screen doors/storm doors closed tightly. Heating/air vents in rooms are to be kept open at all times, if they get shut it causes problems with the system.
20. No food or drinks, other than water, are allowed in the bedrooms. Food purchased with personal money may be marked with your name and stored in the kitchen.
21. Food is to be eaten in dining areas.
22. Residents are encouraged to pack a lunch when staying at work or school during the lunch hour.
23. Watching television between the hours of 8:00am to 4:00pm is discouraged unless working/ community service obligations have been met.
24. Lending of items (cigarettes, money, movies, cds, clothes, etc.) to other residents is strongly discouraged.
25. It is the responsibility of each resident to be familiar with and follow the preceding rules and policies.



## Competencies and Requirements for Graduation from The Bridge

The graduating resident must:

1. Have been responsibly employed, and/or be regularly attending school.
2. Be working a Twelve Step Program, completing a minimum of five steps.
3. Be attending required weekly AA/NA meetings.
4. Have attended required group and individual therapy sessions.
5. Have completed required 30 units of therapy per week.
6. Have had an appropriate attitude change – working away from self-centered thinking, being considerate and thoughtful of others, operating with a positive attitude, willing to live and work their program.
7. Be a positive contributing member of The Bridge family.
8. Have changed playgrounds and playmates.
9. Have a transition plan in place for leaving; including employment, support system, meetings, sponsor, and relapse prevention plan.
10. Have financial stability – (a) rent and other debts owed to The Bridge are kept current, (b) back debts are being paid, (c) savings account is established.
11. Be scheduled in an after-care program.

## Transition Planning

All residents of The Bridge, Inc. will meet together two to three weeks in advance of the transition date to begin planning for the celebration. (The resident who will be transitioning should schedule this meeting.) A Coordinator should be chosen to keep track of preparations for the event. The Coordinator should have organizational skills and, above all, be willing to carry out the responsibilities of assuring appropriate time-line adherence. A “mini-meeting” is suggested at the end of Wrap-Up session.

### 2 WEEKS PRIOR TO TRANSITION:

The transitioning resident will choose her full menu request from options provided by staff and posts it on the refrigerator after it has been approved by staff. All residents will sign up to take FULL RESPONSIBILITY (grocery list to serving table) for a menu item. The transitioning resident and her Case Manager will plan the Transition details together.

Transitioning resident should complete her guest list and submit it to staff for approval. (This list may include staff, residents, immediate family members, sponsor and 1 or 2 close friends, if desired.)

Residents will meet to assign tasks:

- Plan who is cooking certain dishes for the transition
- Inventory supplies (paper cups, napkins, wrapping paper, decorations, etc.) and notify staff of items that will be needed.

### 1 WEEK PRIOR TO TRANSITION

All food items must be added to the grocery list by 5:00 p.m. on the Friday before the Transition dinner. Each resident is responsible for requesting needed items for the menu item that she is preparing. If the menu items require a great deal of extra shopping for the week's 2 cooks, 2 volunteers may be requested by the cooks to accompany them to do the shopping for the transition dinner list.

- All shopping (except perishable food items) should be completed by this time.
- Discuss the list of residents who will be able to be home early enough that day to set-up.

### DAY OF TRANSITION:

- Arrange living/dining room furniture as needed.
- Be certain that adequate seating is available for the living room.
- Make sure that the house is clean and tidy.
- Cook ahead, as necessary

### AFTERNOON OF TRANSITION:

- Complete cooking assignments.
- Dress appropriately for the event.
- Plan serving dishes and serving spoons, etc., be certain that salt & pepper shakers, as well as creamer and sugar, if needed, are filled and on the table.
- Transitioning resident will plan to greet guests upon their arrival.
- ALL residents, except transitioning resident, will plan to serve guests and serve themselves after everyone else is seated:
  - Pour beverages and offer refills.
  - Serve menu items.
  - Replenish serving dishes as they are emptied.
  - Some residents can plan to “work ahead” in the kitchen (washing dishes, taking out the trash, washing counters, etc.) as serving line begins to keep the kitchen as presentable as possible during dinner.
  - Cut and serve dessert.

Ceremony begins promptly at 6:00 p.m., unless otherwise arranged ~ plan to be on time!

**ALL RESIDENTS HELP WITH CLEAN UP, TAKING TRASH OUT, WASHING DISHES, PUTTING FURNITURE BACK IN PLACE, ETC. AFTER GUESTS LEAVE!**

**NO OTHER EVENING PLANS ARE TO BE MADE BY RESIDENTS (i.e. visits, meetings, work, phone calls, etc.)!**

# House Schedule

All other house duties, personal needs, and employment need to be scheduled around these house activities.

Monday - Friday 8:00 a.m. – Awake, bed made - Saturday and Sunday 9:00 a.m. – Awake, bed made

Kid's Bedtimes: Monday, Wednesday – 8:30pm, Tuesday, Thursday, and Sunday – 9:00pm  
Friday and Saturday – 9:30 pm

## Monday

3:00 p.m. – Mom and Me and Bridge (Combined) Group Therapy

5:00 p.m. – Mom and Me Supper

5:30 p.m. – Bridge Supper

## Tuesday

3:00 p.m. – Mom and Me and Bridge Client Education

5:00 p.m. – Mom and Me Supper

5:30 p.m. – Bridge Supper

7:00 p.m. – In-House Recovery Meeting

## Wednesday

3:00 p.m. – Mom and Me Group Therapy

4:00 p.m. – Bridge Group Therapy

5:00 p.m. – Mom and Me Supper

5:30 p.m. – Bridge Supper

## Thursday

3:00 p.m. – Mom and Me Client Education (Healthy Beginnings)

4:00 p.m. – Bridge Client Education (Open to all residents, ALL Residents are REQUIRED to participate for Community Service @ the YMCA as scheduled)

5:00 p.m. – Mom and Me Supper

5:30 p.m. – Bridge Supper

7:00 p.m. – In-House Recovery Meeting

## Friday

2:00-3:00 – Body, Mind and Spirit Client Ed (Bridge and Mom and Me)

3:00-4:00 – Body, Mind and Spirit Client Ed (Bridge and Mom and Me)

4:00 p.m. – Wrap-Up and House Meeting (Immediately following Client Ed)

5:00 p.m. Supper (Mom and Me)

## Saturday

10:00 a.m. – AA Women's Meeting (AA Clubhouse)

1:00-3:00 p.m. – Visitation hours

House Cleaning Completed by 5:00pm

5:00 p.m. – House Check

## Sunday

1:00-3:00 p.m. – Visitation hours

## Passages

Welcome to The Bridge and Mom & Me Program.

Your journey here will take you through five distinct and unique passages as you begin your recovery. In each passage, you will have the opportunity to discover more about yourself, your disease, your recovery and your relationships with others. You will do this through group and individual therapy sessions, written exercise, packets and in other creative ways.

You will share the journey with other women and children within the therapeutic community that will be your home for the next several months. You will find similarities and a sense of belonging as you hear one another's stories and as you experience the rich diversity of women and children in the community.

On the next few pages you will find your roadmap through the passages. These passages will be used in conjunction with the standard and individual treatment plans that will take you from invitation to transition.

*Learn them, use them and live them. This is your journey.*

## Passage One

This is your invitation to recovery. You will be in Passage One during the first thirty to sixty days of residency.

The first two weeks will be an orientation period during which you will:

- Review and understand the client handbook, parent guidebook and program policies
- Learn and understand your client rights.
- Per counselor recommendation, schedule and attend medication assessment and/or other medical referrals.
- Complete intake paperwork and assessments for your individual treatment plan.
- Develop your individual treatment plan with your counselor.
- Begin looking for employment and attend Vocational Rehabilitation Orientation program.
- Begin to develop your own personal Relapse Prevention Plan

During the first Passage you will also complete the following assignments:

- Complete "Relapse Prevention Plan" Packet and review with counselor within first week of residency.
- Write a paper titled, "How Did I Get Here?" You will read your story in group (notify counselor upon completion).
- Complete Step One. You will share your Step One in group and with your counselor.
- Obtain employment and/or be actively involved in employment search.
- Meet requirements of program as defined in standard and individual treatment program.

## Passage Two

In Passage Two you will focus on substance use and relationships

During this passage you will:

- Write your own story, "My Autobiography", of at least 1000 words, including sections as \*Ages 1-5  
\*Ages 5-10  
\*Ages 10-20  
\*Ages 20-Current

Each section should include family history and events around addictions.

Review Autobiography with counselor.

- Complete AA/NA Step 2 and share with counselor (optional to share with your sponsor).
- Complete "Spirituality Assessment" and share with a peer (notify counselor upon completion).
- Complete AA/NA Step 3 and share with counselor (optional to share with your sponsor).
- Complete "Budgeting" Workbook and review with Case Manager (notify counselor upon completion).
- Complete co-dependency readings as assigned by counselor. Write a summary about how what you have read and learned about co-dependency applies to your life and share with counselor.
- Continued employment displaying a responsible and dependable work ethic.
- Continue meeting requirements of program and goals as defined in standard and individual treatment program.

## Passage Three

Passage Three will help you continue to understand addiction, sexuality and independence.

During this passage you will:

- Obtain a sponsor and have contact with sponsor a minimum of three times each week.
- Complete the *Woman's Journal* on "Sexuality" and share with counselor.
- Write a "Goodbye" letter to your drug(s), old playgrounds and playmates and read in group (notify counselor upon completion).

- Write a 500 word paper titled "What a Woman Is" and share with counselor.
- Write a 6 month and a 5 year plan of how to live independently of controlling and enabling relationships and review with counselor and sponsor. Utilize plan in a creative manner (i.e., frame, timeline).
- Continue meeting requirements of program and goals as defined in standard and individual treatment program.

## Passage Four

Passage Four is intended to help you develop and expand on your internal program of recovery. During this passage you will:

- Complete Step Four including Character Defects.
- Write 300 word paper titled "Fear of Accountability" and read in Group (notify counselor upon completion).
- Write paper "Running the Tape" and share in group therapy (notify counselor upon completion). This paper continues from where "How I Got Here" paper ended to current and future plans.
- Complete Step Five – share with counselor, clergy, sponsor or another person who is in recovery of your choosing.
- Continue meeting requirements of program and goals as defined in standard and individual treatment program.

## Passage Five

Passage five is designed to help you begin to transition from The Bridge back into the community and develop a strong system of support.

During this transitional passage, you will:

- Complete requirements of program and goals as defined in standard and individual treatment program.
- Develop detailed continuation of care plan, review with counselor and begin utilization of plan.
- Review and update Relapse Prevention Plan with counselor.
- Expand work hours into full-time basis to meet independent living needs.
- Attend MOPS (Mothers Of Pre-Schoolers) a minimum of two times before transition (Mom and Me clients only).
- Review three instances of community service and/or interactions with your community with your counselor.

## Recycling Procedure

As a house we participate in a recycling program. It is up to each resident to aid in this process. If you use the last of the milk, for instance, please rinse it, throw away the cap, and put the bottle in the recycling bin.

A list of recyclables follows and it is also posted in the kitchen.

The Following Materials Will Be Accepted:

Aluminum Cans – crushed or not

Corrugated Cardboard - Corrugated Cardboard Only (No cereal boxes, Tissue boxes, etc. Cardboard must be flattened and reduced to no larger than 2' x 2' sections please. )

Newspaper – Including advertising supplements and inserts. Please put this in a paper sack and place on top of the other materials in the bin. NO plastic sacks.

Magazines and Phonebooks – All accepted

Plastics Containers – Anything that contains the number from 1 to 7 listed on the bottom of plastic bottles or jugs are acceptable. Example: (The neck of the container must be smaller than the bottom, like a pop bottle.)

Tin Cans – Please rinse the can and lid, place lid inside the can.

The night before pickup day, it is the Resident Assistant's responsibility to make sure the bin is at curbside to be picked up the next day at 7 a.m.



THE BRIDGE, INC.  
FIRE EMERGENCY EVACUATION PLAN

In the case of fire at The Bridge, Inc., the following is the procedure for evacuation.

1. All residents, staff, and visitors in the kitchen will exit out the back door located on the east side of the building.
2. All residents, staff, and visitors in the north dayroom or south dayroom will exit either out the front door on the west side of the building or, depending on the location of the fire, through the back door, or the side exit by the south dayroom.
3. All residents, staff, and visitors in offices or bedrooms will exit out the door nearest their location by using either the south emergency door, the north emergency door, or the front door on the west side of the building.



Each person is responsible for evacuating in a calm and orderly fashion. No one is to take time to save property.



All are to report to the sidewalk directly in front of the house on the west side of the building and remain there until further instructions are given.



- ◆ During office hours, the Director or other staff will obtain the resident's sign-out sheet. After office hours, the staff present or the Resident Assistant will obtain the sheet, if possible. This will be used to account for all residents.
- ◆ Once evacuation is intact, the Director, a staff member, or Resident Assistant will designate someone to call 911. If the cordless phone was carried out of the house, that may be used. If it is not available, that person will go to a neighbor's house to call.
- ◆ The Director, other staff, or Resident Assistant will then use the sign-out sheet to do a head count to determine if anyone is missing. If needed and when possible, they will return to check each room of the house and then exit, returning to the front sidewalk on the west side of the building.

THE BRIDGE, INC.  
TORNADO EMERGENCY EVACUATION PLAN

<p>Tornado Watch - conditions are favorable for a tornado, though one has not been spotted yet. Tornado Warning- a tornado has been spotted on the radar in the area.</p>
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In the case of a Tornado Watch being issued for the Hastings area the following is the procedure for staff and residents.

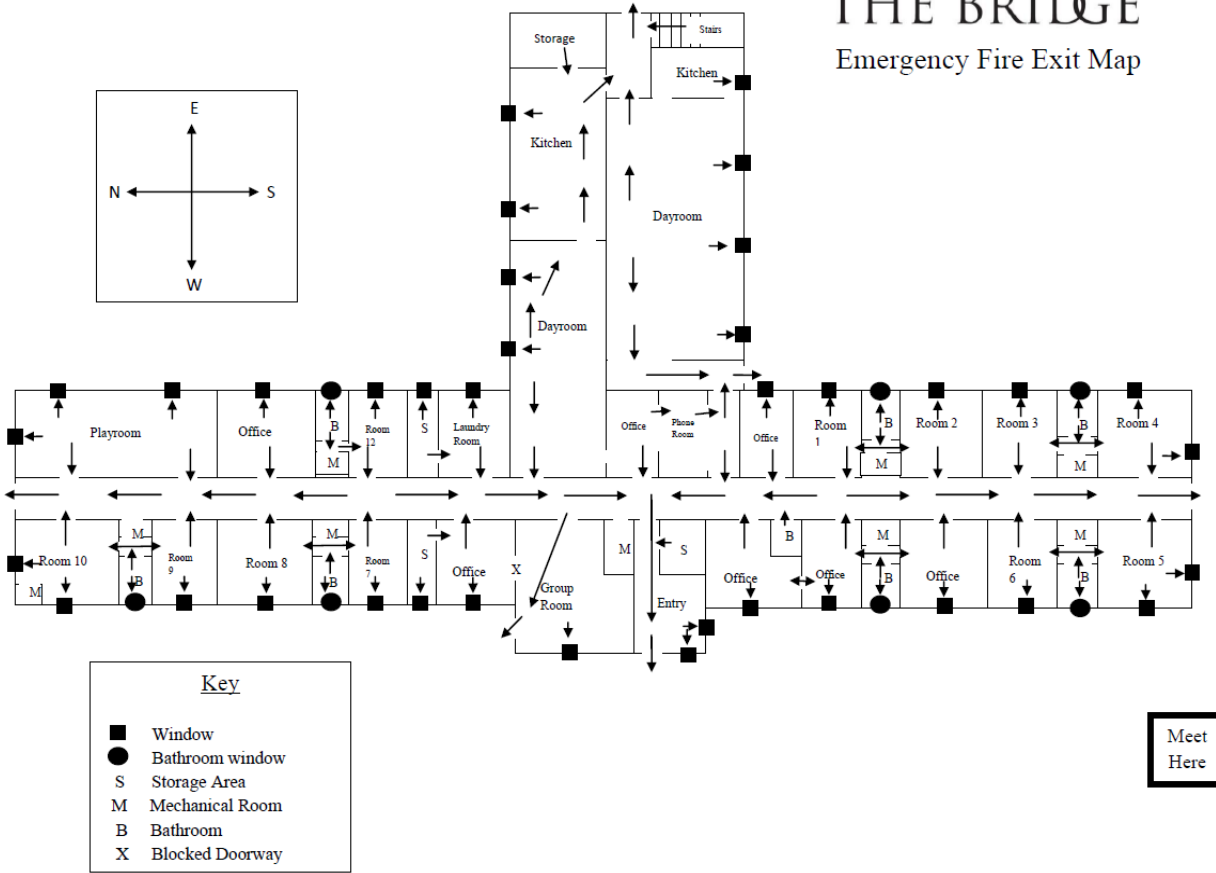
- ◆ All residents and staff present need to be aware and alert during periods of threatening weather and during watches. All persons present at The Bridge, Inc. will remain clear of windows during periods of high wind or hail.

In the case that a Tornado Warning should be issued for the Hastings area the following is the procedure for staff and residents.

- ◆ Once siren is sounded or the warning has been broadcast over the TV or radio, all persons present at The Bridge, Inc. will rapidly and safely leave any area of the house and proceed to the basement. All should gather farthest away from the windows.
- ◆ During office hours, the Director or other staff will obtain the resident's sign-out sheet. After office hours, the staff present or the Resident Assistant will obtain the sheet, if possible. This will be used to account for all residents.
- ◆ Once everyone is in the basement, the Director, other staff, or Resident Assistant will appoint someone to get the Tornado Emergency Box from the closet, turn on the radio, and account for flashlights, candles, and matches.
- During this time, the Director, other staff, or Resident Assistant will then use the sign-out sheet to do a head count to determine if anyone is missing. Should someone be unaccounted for, they will, if possible, find that person and return with them to the basement.
- ◆ Everyone will remain in the basement until the warning has been canceled.

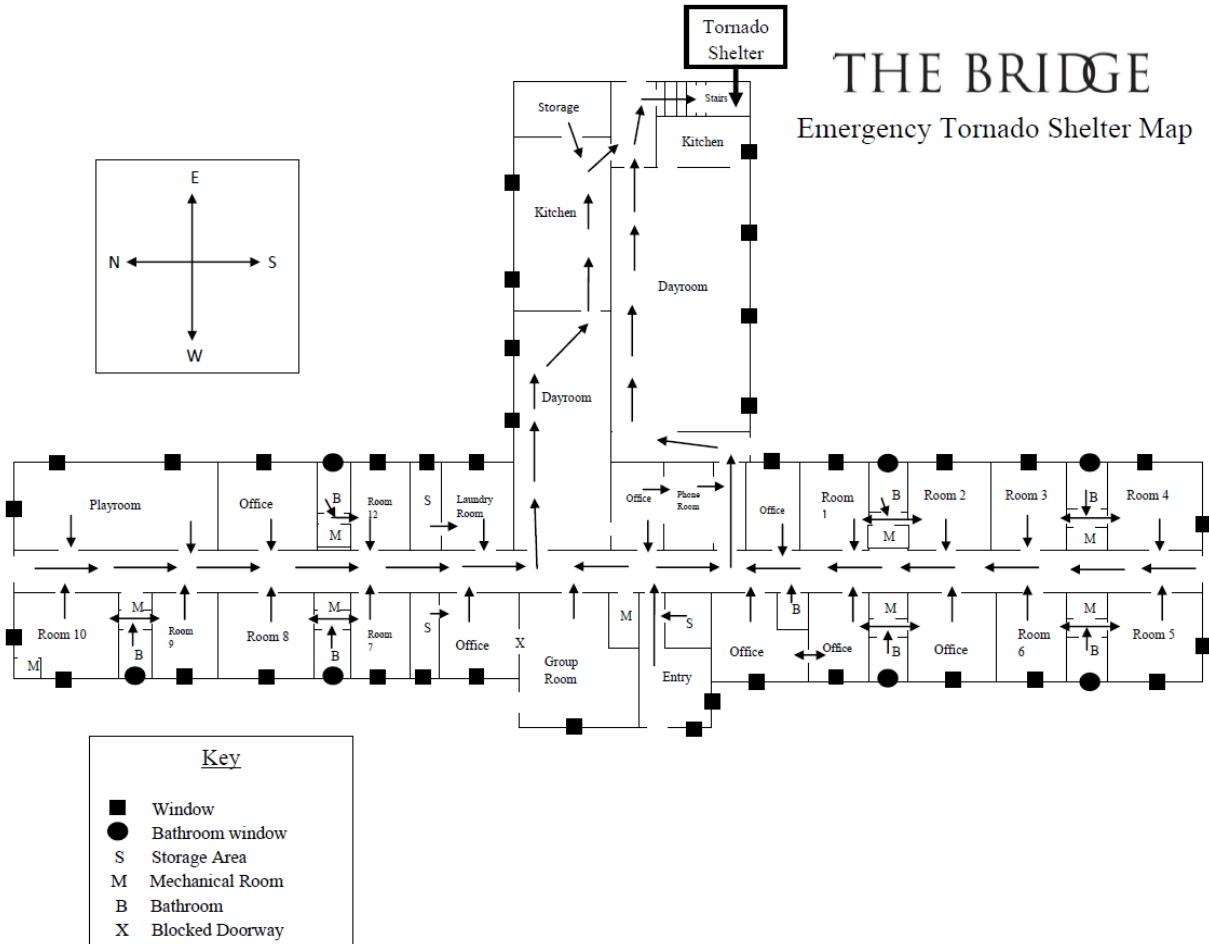
# THE BRIDGE

## Emergency Fire Exit Map



# THE BRIDGE

## Emergency Tornado Shelter Map



# The Bridge Builder

By Will Allen Dromgoole

An old man going a lone highway  
Came, at the evening cold and gray,  
To a chasm vast and deep and wide.  
The old man crossed in the twilight dim,  
The swollen stream had no fear for him;  
But he turned when safe on the other side  
And built a bridge to span the tide.

“Old man,” said a fellow pilgrim near.  
“You are wasting your strength with building here;  
Your journey will end with the ending day,  
You never again will pass this way;  
You’ve crossed the chasm, deep and wide,  
Why build this bridge at evening tide?”

The builder lifted his gray head;  
“Good friend, in the path I have come,” he said,  
“There followed after me today  
A youth whose feet must pass this way.  
This chasm that has been naught to me  
To that fair-haired youth may a pitfall be;  
He, too, must cross in the twilight dim;  
Good friend, I am building this bridge for him!”