



Adult Transition Home Service Description

Introduction

Welcome! This handbook will provide you with an overview of the Adult Transition Home (ATH). It includes important information about what you can expect during your stay at the ATH, as well as some of the expectations of you during your stay with us.

The ATH is not part of the REACH Program, but does work in concert with the overall REACH system. The ATH offers an additional layer of support to the person who may need a greater amount of time for development of a complicated discharge plan and related system of supports.

The average length of stay for an individual in the home is targeted between three to four months with the goal of stabilizing the person and building prevention supports while optimizing discharge planning so that the individual returns to a chosen residence in the community.

We aim to create an environment that is founded upon the belief that all individuals possess character strengths that allow them to grow, change, and recover from challenges that they face. The ATH is staffed 24 hours a day with counselors who are trained in providing positive supports and services that promote wellness.

Throughout your admission to the ATH, you also agree to follow the program guidelines, house rules, and most importantly, to be a partner in your treatment to the best of your ability. The program guidelines and house rules are designed to ensure the safest and most supportive environment in a community-based setting.

This handbook is for you to keep. If you have questions or would like information explained to you, please be sure to ask.

What are the Activities and Treatment?

Services and treatment at the ATH are centered on providing a safe and supportive environment. Behavioral health supports will be offered as per the Individualized Support Plan and may include any of the following activities: supportive mental health counseling, skills training and coaching, psychiatric assessment, medication monitoring and education, prevention planning. In addition, vocational/community engagement supports will be offered as per the ISP and may include any of the following activities: on the job responsibilities and behavior, community recreation, social skills and cultivating friendships, public transportation utilization, and community safety skills. Life

Skills/Residential Living Skills will be offered as per the Individualized Support Plan and may include any of the following activities: money management/banking, home/apartment responsibilities, hygiene and safety, laundry skills, food preparation, budgeting, purchasing, and storing, personal hygiene and budgeting, and preventative behavior for medical needs/support.

What can I expect when I arrive?

Initial Adjustment Period While At the ATH

When you are experiencing a crisis, change and adjustment can be difficult. To help with your adjustment during this time, we ask that all residents not leave the program for the first 48 hours after admission, whenever possible. This period of time will help you in becoming more settled in the program and will give the counselors an opportunity to get to know you better, and vice versa.

Admission and Your Belongings

When you arrive at the ATH, a staff member will help you with admission to the program, orientation to the program, and will provide you with a room. Also during the admission process, staff will review the supports available to you, and describe how we can help you to make the best use of your time with us.

Included in the admission process is a review of all of your personal belongings, which will be completed with you. In addition, all residents are provided a change of clothes, if needed, while items brought into the ATH are being laundered or are placed in the *Bed Bug Zapper*.

Items that could pose a risk to you or others (e.g. cigarette lighters) will be stored in a container assigned to you and monitored by staff. Weapons, alcohol (including products containing significant amounts of alcohol), and drugs for which there is not a corresponding physician's authorization are not permitted in the program at any time. If at any time there is concern regarding the protection of you and others in the program, staff may re-inspect your belongings. Additionally, anytime that you are away from the home without staff support, your items may be inspected upon your return.

Medications

Upon your admission, all medications, including your prescription and non-prescription medications, will be given to staff and stored in locked cabinets for you during your stay. Your doctor's written orders indicate when your prescribed medications will be provided to you. Staff will review with you the times that your doctor has prescribed that you take them, and assist you with developing strategies to remember when you are to do so. As part of your recovery and responsibility for your mental health, staff will encourage your involvement with your medications at the scheduled times.

Please be aware that the medications that are brought to the ATH must perfectly match the Doctor's orders. We cannot accept medications without orders and orders without medications. In addition, the medications should be in prescription bottles or blister packs. We cannot accept medications in pill planners or any other containers. Any discrepancies or issues with medications could impede the admission process.

What about my privacy?

Ensuring Confidentiality

Respecting confidentiality of yourself and others is essential at the ATH. We ask that you respect the confidentiality of others, just as you would likely hope that they would respect yours. This involves not

sharing the identity of others who are also in the program, as well as keeping information that is shared in the program within the program. Your confidentiality will also be respected by the staff that work with you at the ATH; the only exceptions are situations in which there is a consent to release information, or a legal responsibility for staff to release information to prevent direct harm to any individual, including you.

Program Participation

Your experience while at the ATH is very important for your recovery and successful return to your home and community. While at the ATH, you are empowered to be the leader of your treatment team, and work with staff and the Admission/Discharge Coordinator for the best possible outcome. Collaboration with your team, voluntary participation in individual sessions and group sessions led by staff, and active participation can make the difference in your success.

Visitors

Connections to family and friends are an important aspect of strengthening supports to ensure ongoing stability in the community. We ask that you inform staff in advance that you are expecting a visitor. Whenever possible, it is preferable that visitors come during typical awake hours and be respectful of your peers during the evening hours as they begin to settle down for sleep. Your visitor will be required to sign a resident log when they arrive. During their visit, your resident will be expected to observe program rules and to respect the privacy of other residents in the program. Visitors should also check in any items that are brought into the ATH for the residents.

Smoking

When a ATH is designated as smoking, REACH still encourages all individuals who are admitted to the ATH to use the opportunity to practice healthy habits, one of which could be refraining from smoking cigarettes. If you do need to smoke cigarettes and the home is designated as smoking, it is permitted only outside the building at the designated smoking area and at designated times. Please respect the residence and use the furnished receptacle for any cigarette debris.

Cameras, Surveillance, and Door/Gate Locks

Ensuring your safety and stability is our utmost goal during your stay at the ATH. To help ensure the safest environment, the home is equipped with closed circuit television cameras in common areas. In addition to safety monitoring, closed circuit television cameras are utilized as a means to review significant incidents and for ongoing staff training and quality improvement. This network of surveillance allows staff to safely monitor who is entering and leaving the building. ATH staff are required to complete routine safety checks and monitoring throughout each shift, including in bedrooms and common areas, and will do so at regular intervals to ensure everyone is safe.

Personal and Sleep Hygiene, and Chores

Taking care of yourself and developing routines are important aspects of stabilizing and feeling better about yourself. A key part of your self-care is attending to your personal hygiene. This includes showering or taking a bath each day, changing into clean clothing each day, doing your laundry to ensure that you have fresh clothing when you need it and picking up after yourself. To help you in these areas, we will provide basic personal hygiene items (e.g. toothpaste, shampoo, soap). If you are in need of clothing, we also have extra items that can be provided.

In addition to taking care of your personal hygiene, developing routines throughout the day can be very valuable to feeling better about yourself. While at the ATH, you are encouraged to participate in the routine chores of the program including assisting with meal preparation and clean-up, making your bed each day, and cleaning and organizing your personal space.

Telephone/Television

There is a program phone that can be used to make and receive phone calls that will be available to all residents. A TTY device is available for individuals who are hearing impaired. If private phone calls are contraindicated as a part of the person's treatment plan/goals, the procedure for how calls will be monitored (e.g. all calls on speaker phone) must be clearly spelled out and approved by appropriate parties in the person's treatment plan.

A television is accessible to all residents admitted to the ATH. At times, ATH activities may incorporate television and/or other video streaming devices when the use of such electronics are related to the global therapeutic goals of the overarching curriculum, or when such use is related to fostering individualized learning opportunities for specific residents (e.g. individualized video modeling for social skills).

Safety, Fire and Medical Emergencies

Your safety is a priority, and staff is always available to help you when you feel in crisis. Residents are encouraged to use staff as a resource to discuss feelings prior to engaging in destructive behaviors or making threats that could result in harm to yourself or others.

To prepare for emergencies, fire drills are routinely held at the ATH. In the event of a fire drill, please leave the building using the instructions posted in your room as well as follow any guidance provided by the staff. Residents and staff will meet at the designated location which will be described to you upon admission to the ATH.

In the event of a medical emergency, on site medical staff will provide appropriate assessment and care and will call 911 if it is determined you need to be assessed by paramedics. If paramedics determine that you require further medical care, they will transport you to the nearest hospital where you will receive clearance before returning to the ATH. If you refuse recommended medical care, you may be discharged from the program.

Meals and Nutrition

Eating healthy and balanced meals is basic to good self-care, and during your stay at the ATH, we encourage you to eat a healthy assortment of foods. It is encouraged for you to participate in meals that are shared with everyone, and meals take place in the designated dining areas only.

Physical Contact

The ATH has specific guidelines regarding physical contact. To maintain good boundaries with other residents and staff, any physical contact shall only be at the approval of both parties (handshakes, hand on arm, etc.) and sexual relationships are not permitted on the premises of the ATH.

Crisis Management

The team at the ATH has received training in a crisis management program that emphasizes the least restrictive treatment model approach, with a focus on preventing crisis level behavior and quickly deescalating crisis behaviors when it occurs. In instances of crisis behavior which present as an

