

# **Omegon**

# **Handbook**

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## **Volunteers of America, Minnesota**

**Vision: Communities where all lives are uplifted**

**Mission: We help people hope, resilience and well-being.**

**Values: Compassion, Integrity, Perseverance**

*The following program does not encompass all possible scenarios or solutions/interventions that may be utilized. It is the most accurate guide to this date. June 2014. Any changes or corrections to the program will result in an addendum. In some situations or instances, staff have the ability to implement their own discretion as needed or appropriate.*

## **Mission Statement**

Omegon exists to help youth with emotional, behavioral and chemical problems who have not found success with previous interventions. The program will help residents change their unhelpful thought processes and replace them with better coping skills and self-management techniques. Residents will be able to advance through different skills to successfully complete the program and return to a less restrictive setting.

## **Program Philosophy and Foundation**

Omegon Residential Treatment Center is a nonprofit, dual-diagnosis facility which offers specialized treatment services for male and female adolescents, ages 12 to 17, who are experiencing serious emotional, social and/or behavioral disorders, combined with the abuse/dependency on mood-altering chemicals.

Omegon's program operates from the philosophies of Cognitive Behavioral Therapy (CBT) and the Stages of Change. Our Phase System highlights these principles. CBT is evidence-based for both mental health and chemical health and focuses on the identification of unhelpful belief systems and cognitive restructuring in order to create healthier behavior patterns. CBT is a practical, action-oriented approach to coping with problems and enhancing personal growth. CBT places a good deal of its focus on the present: on currently-held attitudes, painful emotions and maladaptive behaviors that can sabotage a fuller experience of life. CBT also provides people with an individualized set of proven techniques for helping them to solve problems and identify coping skills. CBT then provides a variety of methods to help people reformulate their unhelpful beliefs into more sensible, realistic and helpful ones.

Additionally, Omegon values the role of family involvement in a child's overall wellness and success in life. Omegon recognizes that all families have their own set of beliefs, attitudes, structure and norms of behavior and stress management which nurture their child's functioning. Our model of growth and success comes from the belief that through systemic change the resident and the family will improve family identity, balance, organization and connectedness.

## **Omegon Program Principles**

- All residents want to be successful.
- All residents have the capacity to make changes and will progress at their own rate.
- Residents will be most successful with the support of their families and when their families also make changes.
- We believe the decision to change comes from an increased awareness of self and the nature of the problem.
- We believe that healthy coping skills, self-care and pro-social behaviors with increase overall wellness and minimize the consequences associated with meeting needs in unhelpful ways.
- Structure is healing and a necessary component of Omegon programming as well as a skill that is important for all families to learn.

## Children's Rights

In the program it is recognized that a resident has basic rights that include, but are not limited to the following:

- Right to reasonable observance of cultural and ethnic practice and religion.
- Right to a reasonable degree of privacy.
- Right to participate in development of their treatment and case plan.
- Right to positive and proactive adult guidance, support, and supervision.
- Right to be free from abuse, neglect, inhumane treatment, and sexual exploitation.
- Right to adequate medical care.
- Right to nutritious and sufficient meals and sufficient clothing and housing.
- Right to live in clean, safe surroundings.
- Right to receive a public education.
- Right to reasonable communication and visitation with adults outside the facility, which may include a parent, extended family members, siblings, a legal guardian, a caseworker, an attorney, a therapist, a physician, a religious advisor, and a case manager in accordance with the resident's case plan.
- Right to daily bathing or showering and reasonable use of materials, including culturally specific appropriate skin care and hair care products or any special assistance necessary to maintain an acceptable level of personal hygiene.
- Right to access protection and advocacy services, including the appropriate state-appointed ombudsman.
- Right to retain a reasonable amount of personal property.
- Right to courteous and respectful treatment.
- Rights stated in MN Statutes, sections 144.651 and 253B.03, if applicable.
- Right to be free from bias and harassment regarding race, gender, age, disability, spirituality, and sexual orientation.
- Right to be informed of and to use a grievance procedure.
- Right to be free from restraint or seclusion use for purposes other than to protect the resident from imminent danger to self or others.

## Omegon's Resident and Family Grievance Procedure

Residents and their families have the right to make a formal complaint or suggestion, or express a concern about any aspect of the resident's care. A resident who has a complaint is expected to discuss the issue with a staff person from their living unit. If a resident is unsatisfied with the resolution or if the resident does not believe for some reason that the issue can be addressed by staff, then the resident may either talk directly with the unit supervisor or file a written grievance. A parent who has a complaint or concern is encouraged to speak to the staff or the unit supervisor or file a written grievance. If they are not satisfied with the result, they should contact the agency's Program Director. Omegon will provide the necessary forms and assistance to a person wanting to file a grievance.

## Family Involvement

Residential treatment is an extensive and long-term commitment to facilitate on-going change and success in the youth. In order for treatment to be most effective and to have an overall effect on everyone involved, family involvement is a vitally important component to this treatment process. Research shows that family participation is one of the key factors in the child's transfer of learning to the home. Therefore, it is the **expectation of the program that family members are involved** in the following activities. \*\*For residents who do not have immediate family or those not in close proximity, alternative measures will be taken to provide opportunities to participate and have passes.

- Attend intake and all Treatment Plan Reviews.
- Attend IEP meetings.
- Weekly phone calls to the child and reception of calls from the child.
- Weekly contact with Case Manager.
- Attend at least two of the Family Psychoeducation and Support Groups offered each month.
- Participate in Family therapy; four hours per month or more if determined necessary or if families are unable to attend Family Psychoeducation and Support Groups

Additional activities the family is encouraged to attend:

- Attend Omegon and school related activities, talent shows and awards ceremonies.
- Aftercare planning and aftercare skills sessions.

## Stages of Change

**Pre-contemplation:** Not yet acknowledging that there is a problem behavior that needs to be changed.

**Contemplation:** Acknowledging that there is a problem but not yet ready or sure of wanting to make a change.

**Preparation:** Getting ready to change, begin planning the changes on the treatment plan.

**Action:** Resident begins carrying out new plans to change previous use behaviors. Recognize ones own power and ability to make choices.

**Maintenance:** Resident will be responsible for continuing to use self inventories (ie: HALT- Hungry Angry Lonely Tired) and use plan repetitively.

**Relapse:** Returning to older behaviors and abandoning the new changes. Relapse will be dealt with in a therapeutic manner if it occurs.

## List of Unhelpful Thinking Style and Patterns

- **All-or-nothing thinking.** You look at things in absolute, black-and-white categories.
- **Overgeneralization.** You view a single negative event as a never ending pattern of defeat.
- **Mental filter.** You dwell on the negatives and ignore the positives.
- **Discounting positives.** You insist your positive qualities do not count.
- **Jumping to conclusions.** You jump to conclusions not warranted by the facts.
  - **Mind-reading.** You assume that people are reacting negatively to you.
  - **Fortune-telling.** You predict that things will turn out badly.
- **Magnification or minimization.** You blow things way out of proportion or shrink them.
- **Emotional reasoning.** You reason from your feelings: "I feel like an idiot, so I must be one."
- **Should statements.** You use "shoulds," "shouldn'ts," "musts," "oughts," and "have tos."
- **Labeling.** Instead of saying, "I made a mistake," you tell yourself, "I'm a jerk," or "I'm a loser."
- **Self-blame and other-blame.**
  - **Self-blame.** You blame yourself for something you weren't entirely responsible for.
  - **Other-blame.** You blame others and overlook ways you contributed to the problem.



# Phase System

## **Purpose:**

The purpose of the phase system is for all residents to have the opportunity to be taught and to master essential skills for their mental and chemical health and to be able to use these skills to achieve their individual goals. For the purpose of the Phase System and Objectives, IT stands for individual therapy, CD for chemical health counseling and FT for family therapy.

## **Orientation/Engagement**

**Purpose:** The purpose of the Orientation phase is that for the first 7 days that a resident is enrolled in the program, they will be introduced to the program, the staff and the core skills of the program. Residents will work with staff and other participants to prepare their treatment plan.

Residents will be expected to be reading and learning to understand the program within their first week at Omegon. During this week, with the help of staff members and their Peer Mentor, a resident will be introduced to all of the rules and norms of the program. Staff reserves the right to put appropriate interventions in place to help maintain the safety of the resident and other program participants. These interventions will also help guide the resident to further understanding of the program expectations. All processing will be done verbally as opposed to use of intervention sheets during the orientation period.

## **Objectives:**

- Read and understand Client Handbook; to be reviewed with Case Manager.
- Meet with Case Manager to prepare treatment plan (develop jointly).
- Meet with Individual Therapist to prepare treatment plan (develop jointly).
- Meet with Chemical Counselor to prepare treatment plan (develop jointly).
- Be taught about cognitive triangle in individual therapy.
- Complete 'Getting to Know You' sheets with 5 peers and 5 staff and turn into Primary Counselor.
- Complete *Character Traits Inventory*.
- Be taught skills for planning daily routine by Peer Mentor and Primary Counselor.
- Be taught ABC's in Orientation Phase Group.
- Be taught about SMART goals by Primary Counselor.
- Be taught about short vs. long term goals by Primary Counselor.

## **Phase 1: Wellness/Pre-Contemplation**

**Purpose:** The purpose of the wellness phase is to begin to gain an understanding about the importance of taking care of mental, chemical and physical health needs. Residents will be encouraged to become more aware of the possible benefits of changing unhealthy behaviors to those that are better for their overall wellness.

## **Objectives:**

- Wellness Education lessons in Phase Group (2 weeks) - some can be done individually with Primary Counselor if needed- Intro, Nutrition/Physical Activity, Sleep/Relaxation, Feeling Identification/Coping Skills, Wellness Plan/"I Feel" Statements, Steps Model.
- Share Wellness Plan with Primary Counselor.
- Discuss ABC's and "3 Rational Questions" in Individual Therapy.
- Complete ABCDEFG Worksheet and process in Individual Therapy.
- Complete ABCDEFG Worksheet and process in Family Therapy.
- Practice "I Feel" statements with Primary Counselor.

- Read *Chemical Dependency: An Acceptable Disease* and process with Chemical Dependency Counselor.
- Complete 25 Consequences of Use list and process with CD Process Group
- Complete 3 STEPS worksheets with Primary Counselor.
- Share Coping Skills Plan with Primary Counselor and post in a place so you can refer to it easily (make copies if needed).
- Ask at least 2 peers for feedback and ideas to add to Coping Skills Plan.
- Complete *Self Awareness Questions* and review with Individual Therapy.
- Complete *Self Awareness Questions* and review with Chemical Dependency.

## Phase 2: Honesty/Contemplation

Purpose: The purpose of the Honesty phase is to practice self awareness through honesty with self and others regarding motivation to change, values, needs and goals for the future. Residents will be able to display mastery of honesty through consistently taking accountability for their thoughts, feelings and behaviors.

Objectives:

- Be taught about the importance of honesty in change in Phase group.
- Be taught about assertiveness skills in Phase group.
- Complete *Assertiveness Vignette* in Phase group.
- Complete Sobriety Goals Worksheet and process in CD Process group.
- Complete *Understanding Your Motivation* and process with CD counselor.
- Be taught about primary and secondary emotions in Phase group.
- Complete 10, *Am I helping or hurting my recovery today?* worksheets, to be signed off by CD counselor.
- Process *Helping or Hurting Recovery Summary* in CD process group and ask for feedback from peers and facilitator.
- Be taught about the importance of integrity and humility in Phase group.
- Complete *Top 10 Values* assignment in Individual Therapy (to be completed prior to any other processing of values).
- Complete values in relation to chemical use with CD Counselor (use *Top 10 Values*)
- Process values in Family Therapy.
- Process values with Primary Counselor.
- Be taught about needs in Phase group.
- Be taught about unhelpful thinking styles and patterns in Phase group.
- Make a list of needs with Primary Counselor.
- Display mastery of STEPS model through thorough completion of a STEPS worksheet every time I engage in \_\_\_\_\_ behavior for 2 consecutive weeks and process with Primary Counselor.
- Show ability to take accountability for own thoughts, feelings, and behaviors and how that affects your functioning through consistent acceptance of and thorough processing of *Building Restriction/Processing* sheets. To be determined by team at time of Phase increase.

## Phase 3: Empathy/Preparation

Purpose: The purpose of the empathy phase is for the resident to be aware of and take responsibility for their role in a community. Responsibility within a community includes communicating in a healthy manner, being able to take feedback and solicit help and support from others, and being responsible for individual thoughts, feelings, and behaviors. Residents will

begin the preparation to make significant life changes by creating their *Change Plan* and sharing it with their community and supports.

Objectives:

- Role Play empathy situations in Phase group:
  - Empathy with Friends
  - Empathy with Family members
  - Empathy with Disagreements
  - Empathy with Strangers.
- Complete *Empathy Journal* for 10 days to be reviewed in Individual Therapy.
- Complete Empathy Games in Phase group:
  - Imitating and guessing about faces
  - Explaining Facial Expressions
  - Matching
  - Collaborative, improvisational story telling.
- Process *Empathy Journal* with Primary Counselor.
- Complete *Family Impact Letter* and process with Chemical Dependency Counselor **(must be done prior to Family Therapy)**.
- Share *Family Impact Letter* in Family Therapy.
- Role Play communication and empathy skills in Family Therapy.
- Role Play communication in Phase group.
- Complete *Self Awareness Questions* and review in Individual Therapy.
- Complete *Self Awareness Questions* and review with Chemical Dependency Counselor.
- Complete *Self Awareness Questions* and review in Family Therapy.
- Complete *7 Thought Logs* and process with Primary Counselor.
- Complete *Challenging Thoughts* worksheet and process with a member of your primary team.
- Complete *Change Plan* worksheet in Individual Therapy.
- Complete *Change Plan* worksheet with CD Counselor.
- Complete *Change Plan* worksheet in Family Therapy.
- Show mastery of ability to use healthy communication skills when upset, stressed or frustrated.
- Show ability to take responsibility for how your thoughts, feelings, and behaviors affect others. To be determined by successful completion of *Being Kind to Others* worksheets .

## Phase 4: Transitions/Action

Purpose: The purpose of the Transitions phase is to develop strategies and plans for future success and with change plans and overall health. Additionally, it is hoped that those residents who have successfully progressed through all phases of treatment, will have the ability to shift unhelpful thoughts, feelings and behaviors to aid in their future success and overall health.

Objectives:

- Develop a list of sober activities.
- Evaluate and receive feedback on a list of sober activities in Family Therapy.
- Set up supports in home environments with the help of Case Manager (therapist, psychiatrists, school).
- Role Play with peers on challenging discharge situations in individual therapies/counseling sessions.
- Complete Transitions packet.
- Review Transitions packet and receive feedback from peers/staff.
- Share Transitions packet in Family Therapy.

- Share Transitions packet in Individual Therapy.
- Share Transitions packet in primary group.
- Share Transitions packet with CD counselor.
- Show ability to shift unhelpful thoughts, feelings, and behaviors on a consistent basis. To be determined by team.

## **Aftercare**

Purpose: The purpose of aftercare is to assist residents in the maintenance of learned skills/strategies and change plans set forth while they were in treatment.

Objectives:

- Staff will arrange and participate in weekly phone contact with residents for 3 months post-discharge.
- Staff will review discharge goals during aftercare calls and inquire as to progress and/or struggles with those goals.

## **Successful Resident Discharge Procedure**

Purpose: The purpose of the discharge procedure is to celebrate successes and to facilitate healthy closure of relationships.

- Goodbye rituals include goodbye processes in groups and a treat shared as a community. Due to kitchen requirements, special food request must be filled out 1 week in advance. Treat will be served for residents during meal time.
- Case Manager will provide goodbye sheets to staff and residents when resident is nearing discharge. Case Manager will review to ensure that peers do not include phone numbers, addresses, email address, etc. There may not be swearing, drug references or glorification of past negative incidents. Goodbye sheets are shared with resident during Goodbye Group held with all staff and residents.
- Goodbye movie as arranged by Primary Counselor, will end by 11pm. The resident will be able to select one peer of the **same gender** to watch with them.

# Privileges

The following privileges are earned based on advancement through phases. All privileges will carry over through phases; however, there may be circumstances of safety or specific misuse where this may not be possible. Some privileges will require use of star rewards.

- **Orientation**
  - Earn weekly allowance for completion of jobs (up to \$5)
  - Ability to watch news during opposite meal times
  - May have CD players/MP3 player/Ipod
- **Phase 1: Wellness/Pre-Contemplation**
  - Eligibility to attend off site activities
  - May begin to earn passes following pass progression
  - May keep sugar free candy in medication box
- **Phase 2: Honesty/Contemplation**
  - May bring in a Game System.
  - May use skateboards, roller blades or roller skates in the gym. May only use if have appropriate safety equipment
  - May have a plant in room
  - May keep gum in medication box, if shared, will lose privilege
- **Phase 3: Empathy/Preparation**
  - May add one approved friend to phone list (as approved by worker, parent/guardian and clinical team).
  - May have same gender late nights in the dayroom.
- **Phase 4: Transitions/Action**
  - May add two approved friends on phone list (as approved by worker, parent/guardian and clinical team).
  - May have mixed gender late nights.
  - May have a pet fish
  - May take Driver's Training
  - May participate in job searching

## Star Rewards Program

**Purpose:** The star program is a reward program to facilitate positive behaviors by rewarding healthy and safe behaviors on an individual basis. Rewards are determined by phase. As residents progress through the phases they will carry over rewards from previous phases.

Stars will be earned by completion of primary goals and positive milieu behaviors. Residents will receive stars for instances when they display the ability to make healthy choices, use coping skills, are redirectable, or any behaviors warranting positive rewards.

### **Phase 1 Rewards (5 stars per reward purchased)**

- 5 minutes extra phone time/One extra 5 minute phone call.
- 1<sup>st</sup> in line for lunch and dinner.
- Ride in front seat for activity and choose radio station
- Pick one item from prize box (one time per week).
- Extra time to laundry (outside of normal two days given)

**Phase 2 Rewards (10 stars per reward purchased)**

- One extra 10 minute phone call
- Get out of chores free day, not to exceed one day per week
- 15 minute nap pass
- Access to art closet during a scheduled room time (if items require dayroom use, no more than 20 minutes)
- 30 Minutes of TV time to play video games (must be during purchased evening dayroom time)
- Get one piece of gum from medication box
- Additional shaving time (outside of normal delegated time)

**Phase 3 Rewards (15 stars per reward purchased)**

- 60 minutes dayroom time during evening room time, not to exceed 10 PM (LATE NIGHT).
- 60 minutes gym time during evening room time
- One extra 15-minute phone call.
- Call friend on phone list.
- One un-caffeinated soda (allowed one per week).
- 30 minute nap (must be used during leisure time or free time in evenings)
- Make a phone call after 8:30 PM
- Playing radio in room (one hour; until 8:30pm)

**Phase 4 Rewards (20 stars per reward purchased)**

- Go on an out of building social/school activity on a week day.
- Take a trip to the library.

Residents will earn rewards by earning their way through phases. If a resident is *placed* into transitions phase as opposed to *earning* their transitions phase, they will continue earning rewards from the phase which they have earned.

Resident late night rewards have a maximum of 2 residents per evening allowed. Residents need to be eligible to utilize this reward on the given day. This reward can be utilized once per week with stars.

Using a star reward is up to staff discretion and programming needs as well as meeting daily expectations. Star rewards are created, modified, and added to by Resident Council.

# Primary Counselor Goals and Rewards

**Purpose:** Each resident is assigned a staff person as a Primary Counselor upon their admission to the program. This allows residents and staff to begin building rapport and for staff to help motivate each resident on milieu goals created by the resident. Rewards are utilized to help increase motivation and shift motivation from external to internal through the power of the staff/resident relationship.

## **Expectations:**

- Residents must pick a different reward every week
- Phase 3-4 can earn one food reward a month
- All fast food meals/ Caribou need to be medium size item
- Phase 3-4: Two outings a month (one outing must be free)
- Residents must make sure money is pulled for reward
- Residents must make sure they have enough money for the outing. Staff are never able to lend residents money
- Staff must make sure appointments are made for nails/ hair prior to going
- If a resident is caught stealing, the resident will not be eligible to earn the privilege to go out of the building for PC rewards
- Jobs must be completed on GNO/GNI nights
- 17 and 18 years old residents: Movies that are rated R must be approved by parents. Residents who are 16 and under: PG and PG-13 movies only
- Staff passes for residents on phase 4 only; Outings will be done on Saturday or Sunday
- All rewards must be done with your PC unless they made a coupon
- All goals must be completed to earn rewards

## **Rewards:**

### **Phase 1-2 Rewards (In Building only)**

- Late night (Phase 2) (30min)
- Walk the loop
- Hot chocolate/coffee/tea (coffee only before 11am)
- Extra phone call
- Non-caffeinated soda during meal time
- Gym Time during room time

### **Phase 3-4 Rewards (In building/ Out of the building)**

- Card Store
- Caribou (Sit and talk to PC)
- Fast Food
- Library
- Get nails done (PC must set up appointment)
- Hair cut (PC must set up appointment)
- Skip room and house job
- Get Meds early/ Be first to shave (PC must work that night)

### **Phase 4 Rewards:**

- Go to the mall (Ridgedale)
- Go see a movie

- Big Thrill
- Target
- YMCA

## **Visiting and Pass Guidelines**

### **On Site Visits**

Purpose: The purpose of on-site visits is for Omegon to encourage family connectedness between the resident and family, during a regularly scheduled visiting time.

- Scheduled weekly on Sunday afternoons from 1-5pm. To set up visits outside of regular visiting hours, parents and other approved visitors are encouraged to schedule a visit with their child in advance by talking to their Case Manager or any appropriate team member when Case Manager is not available.
- Tobacco, lighters, cell phones, cameras or sharp items (knives, mirrors, etc.), are not permitted in or around the building. It is suggested that purses/bags remain in your car. Individuals who are in possession of tobacco, illicit chemicals or potential weapons may be subject to police involvement.
- Anything visitors bring in may be checked by staff at any time.
- Food and beverages can be brought in to share, but will need to be taken out by the visitor when the visit is done. Items **may not** be left behind and may be searched by staff per their discretion.
- Clothing, money or other personal items may only be brought and turned into staff during family therapy or Family Psycho-education Group. Staff will check in.
- Visits can **ONLY** occur with previously determined approved visitors by Case Manager, family and worker. Visitors not approved will be asked to leave.
- No pets brought to Omegon, unless previously approved by Case Manager.

### **Authorized Leave**

- Authorized leave includes: approved passes, hospital stays, detention stays, funerals, etc. Leaving without permission is considered an un-authorized leave.

### **Community/Home Pass**

Purpose: The purpose of passes is for residents to practice and implement skills/strategies that they are learning in treatment, to accomplish therapeutic goals with their support network and become familiar with their home community. Resident passes will be determined through family therapy and consultation with the clinical team.

### **Procedure for passes**

- A community pass can be earned after 7 days in the program.
- The resident will pack prior to pass and review their clothing count with staff in order to determine what clothing items are leaving the building. The staff member will document the items on the resident's clothing inventory that are being sent home so that when the items are checked back into the building, the resident retains an appropriate clothing count.
- Family/approved adult will read the pass assignment, check personal items that are leaving the building, and sign resident and personal possessions out in the sign in/out book.
- Upon return from a pass: Parent/guardian will sign resident and personal possessions back into the building. Staff, resident and Parent/guardian will process pass request worksheet to ensure goals were accomplished and to discuss any difficulties.
- Resident will be checked in according to procedure.



### Pass Expectations

- Rules surrounding nicotine consumption and consequences for not following those rules will be determined in family therapy.
- No drugs/alcohol use.
- No breaking the law.
- Contact with friends must be determined with family and family therapist and will be pre-approved.
- In family therapy, residents will make a plan with therapist and family on appropriate rules regarding contact with friends and significant others, following family rules and expectations.
- Residents may be asked to call into the unit at least once per day by 9:00pm. If the resident has not checked in, staff will call them prior to 10 PM.
- Random calls may be made by staff to resident on pass for concerns of safety.
- Parents have the right and will be encouraged to enforce the determined family rules while the resident is out of the building, and may determine to return the resident early if deemed necessary.
- Staff is responsible for asking the family to share details of pass with staff upon return.
- Residents have the right to shorten visits for reasons determined to be appropriate.
- Parents must supervise their child **at all times** unless approved through family therapy.
- Pick up times for Friday passes are after 5:00pm, pick up time for Saturday/Sunday passes is no earlier than 8:00 a.m. Residents will arrive back at Omegon by 8:00pm. Some circumstances may require a deviation from the expectation and will be approved by family therapist.
- Residents and families who have difficulty following the pre-arranged pass expectations including returning on time will discuss the safety concerns in family therapy.
- Safety concerns while on pass will be discussed in family therapy and with case manager in order to determine appropriateness.
- Families will be encouraged to call in to inform staff of your estimated return time when running late.

### Pass Progression

The following is a general guideline and may differ according to individualized treatment plans and safety concerns.

- 2-6 hour pass with family in the community.
- 8-12 hour day pass ½ at home, ½ in community
- 24 hour overnight pass
- Overnight pass
- Weekend pass

Families are required to have at least one family therapy session prior to the first community pass. A second family therapy session is required prior to the resident going home for any period of time (i.e. the 8-12 hour day pass ½ at home, ½ in community). The purpose of these family sessions is to collaborate with the family to create a safe structure so that the family and resident can be prepared for a healthy pass experience. For continued home, overnight and weekend passes the family must consistently attend family therapy and have regular communication with their family therapist/case manager. The family and resident must also consistently display safe behaviors at Omegon and on passes and meet expectations as outlined below and as discussed in family therapy.

### **Resident Money while on pass (In accordance with Omegon Policy)**

- Upon leaving for pass, staff will check the pass sheet to determine if money has been pulled from the resident's account
- Money will be retrieved from the safe in the business office, reviewed with and given to the resident, and initialed on envelope by staff and resident. Money envelopes will be kept in the pass binder only if they do not have any money in them until the resident returns from pass. If envelopes do contain money, they will be locked back in the safe
- Upon returning from pass, residents will review and return any money to staff that they did not use on pass. It will be placed in the money envelope, initialed by resident and staff, and returned to the safe.

### **Resident Check-In Procedure**

- Residents may be given check-ins anytime that they have been without Omegon staff supervision.
- To start check-in, residents will be taken to the gym. Any personal items brought with, such as purses and bags, etc. must be set to the side for staff to go through as time permits.
- Residents will be checked in the gym using the curtained check in area.
- Staff will look behind in curtained area before the resident goes behind it to undress to make sure there is no contraband.
- Residents will then completely undress behind the mat, including undergarments and socks and hand them to staff.
- Staff will thoroughly search all items of clothing and hold on to the items until the check in is complete.
- When residents have fully undressed; residents will put on a gown and step out in front of staff. With the garment on residents will:
  - Glide their hands down themselves in the front
  - Turn and glide themselves down in the back
  - Pull the gown up to expose their upper thigh
  - Do 2 jumps, spreading arms and legs as you do so, like a jumping jack
- It is up to staff discretion, to complete the check-in without a gown while the resident is wearing full undergarments (i.e. boxers, bra, and underwear).
- Staff will check behind the mat again to make sure that no items were left behind.
- Residents will then be allowed to redress.
- Staff will go through any extra items that residents have brought into the gym such as jackets and purses.
- Any large bags or things brought back from passes will be checked in by staff when time allows. Items needed immediately (hygiene and coping skills) will be searched and checked in that day/evening.
- Items will be entered on the clothing/personal items sheet.

### **Chemical Use Procedures**

Staff will complete a check-in, check vitals, give a UA (see below) and document any unusual behavior. If a resident appears to be under the influence, Omegon's RN will determine if additional medical attention is necessary and any steps to ensure resident safety.

### **Relapse Procedure**

Relapse can be a part of the treatment process. It is the belief of Omegon that in order to address this, honesty is a vital part of the treatment process in order for staff to be able to help the resident identify ways to avoid future problems with relapse. If a resident relapses, a worksheet and processing opportunities will be offered to assist the resident in taking a look at the thought processes that went along with the decision to use. If the behavior is on-going, additional interventions may be implemented.

## UA Procedure

- Resident to wash hands.
- Staff opens UA cup in front of resident.
- Resident will not turn water on or flush toilet until instructed.
- Resident will provide sample in cup when done and may flush the toilet and wash hands after UA cup is given to staff.
- Staff will cover UA with label in front of resident and then prepare it to be shipped to testing agency.
- If staff suspect that a resident has altered the UA, they will repeat.
- Staff may do random UA's when they are suspicious of use or if there are changes in behavior as determined by staff or parents.

## Prohibited Items

A resident's possessions will be examined at the time of placement and following each pass. Prohibited items will be confiscated immediately and returned to the parent, authorities, or destroyed. Any illicit substances, paraphernalia or weapons will be stored while incident is being reviewed. Depending on the severity, the local police department may be contacted. These items will not be returned to the resident.

The following items are not allowed to be in Omegon or in a resident's possession:

- Tobacco products(including E-Cigarettes) any over the counter or medication including: prescription medications (not prescribed for the resident) or non-prescription medications including aspirin, Tylenol, cough preparations, vitamins; commercial mouthwash containing alcohol, any alcoholic beverage, as well as any illicit substances. These items will be disposed of and not returned to the residents.
- Aerosol cans of any kind.
- Metal nail files.
- Mirrors or glass, including those in a makeup compact.
- Volatile substances such as toxic glue, paints, lighter fluid, etc.
- Non-flammable substances such as liquid paper, non-water based markers, etc.
- Plastic gloves.
- Pornographic, violent, or drug/tobacco oriented magazines, books, posters, music, t-shirts, hats, literature, etc.
- R-rated movies unless previously approved by parents for educational purposes.
- Matches and lighters.
- Heavy belt buckles, studded belts/shoes, steel tipped boots, or work shoes, wallets with safety chains, or other thick chains or thick necklaces.
- Heavy rings that can be used as weapons.
- All **jewelry** will need to be approved by staff, most will be accepted unless concerns for risk of safety.
- Sharps of any kind, i.e. razors, scissors, nail files, etc. will be kept in medication room.
- Pens.
- Safety pins, metal hair clips, bobby pins, paperclips, paper clamps, staples.
- Metal spiral bound notebooks.
- Additional items may be considered as prohibited items and/or a safety risk and confiscated by staff

# Expectations for Safety and Respect

Residents will learn the importance of empathy and respect through daily programming and the phase system. Resident expectations of respect will include: using non-threatening language, using basic manners, being polite, using “I feel” statements and healthy assertiveness skills, avoiding name calling or prejudicial language.

## Basic Expectations

While in treatment, residents are expected to complete and follow basic daily expectations to learn self-care and positively contribute to their community. When the following basic expectations are not met, staff may utilize appropriate interventions to maintain the structure.

- Wake up on time
- Clean room in the morning (make bed, pick up clothes, pick up bathroom).
- Attend and participate in school and groups.
- Attend therapy (individual, family, chemical health).
- Clean up after meals.
- Stay within staff supervision.
- All personal possessions must be clearly labeled/initialed with a marker. If they are not, they will be confiscated and sent home.
- All bags/suit cases and backpacks are kept in the Rec Room. Staff will remove those items if not turned in.
- Bathroom keys are handled by staff and will open doors for residents.
- Art cabinet and cubbies will only be opened by staff.
- Due to safety concerns, rocking in chairs is not permitted.
- Residents must purchase batteries from business office or provide their own. Used batteries must be turned in before buying more.
- Stamps must be provided by resident or purchased from allowance.
- Scissors and sewing needles will be kept in locked areas, checked out and used only in front of staff.
- Residents must be under staff supervision at all times and must be monitored when going outside or returning to the building unless on approved phase privilege.

When a resident is not able to meet these daily expectations, they may lose privileges such as attending off-grounds activities, using their iPods/MP3 players, using Stars, or participating in Late Night/GNI.

## Resident Feedback

Residents will be encouraged to give each other feedback in a healthy, sincere, and constructive manner. This includes using “I feel” statements, giving feedback when calm, using positive language and acknowledging strengths as well as avoiding sarcasm, being rude, joking, hurtful or insulting, or otherwise unhealthy. Residents will be encouraged feedback in the moment, when they are regulated enough to do so. Some residents may be more comfortable utilizing primary group, therapy group and/or community for providing feedback and may be allowed to do so.

Residents are encouraged to use the following template for giving feedback.

When I see/hear \_\_\_\_ I feel \_\_\_\_ so I think \_\_\_\_.  
I challenge you to \_\_\_\_\_ and I offer to help you by \_\_\_\_\_.

### **Mixed Gender/Gender Separate**

Mixed Gender activities are a scheduled activity. If it becomes clear that an individual resident has difficulty following the rules and expectations of mixed gender activities, that resident will not be allowed to participate for the remainder of the activity; if it becomes clear that the group is struggling with mixed gender, the activity will be ended. The current status of mixed gender activities is:

- Thursdays are Mixed Gender Activity Day, if earned.
- On Sundays during visiting time, staff may choose to have Mixed Gender Activities while the other residents are visiting their family

### **Mixed Gender Expectations**

- Couches will be gender separate
- No side conversations – conversations must be loud enough for staff to hear
- No sexual comments
- Physical touch limited to high fives and hand shakes
- No horseplay
- Follow staff redirection

### **Use of Omegon Equipment**

Omegon provides opportunities to have relaxation and fun activities to engage in. Keeping those items in good condition is very important. If any of the below items are broken or misused residents are responsible to inform staff.

Residents will have the opportunity to use the following items when requested from staff:

- DVD's
- Guitars
- Amps
- Microphones
- DVD players/VCR
- TV
- Art Supplies
- Foosball/Pool/Ping Pong
- Gym and outdoor recreation equipment
- Games-may be requested for quiet room time

### **Borrowing, Loaning, and Trading**

Omegon strongly recommends that residents avoid borrowing, giving, trading or buying personal possessions for others. Omegon/Staff is not liable for any lost, stolen, or damaged items in relation to this topic. Staff are not allowed to share, buy, trade, or gift any items to residents.

- Any milieu conflicts in relation to this topic will result in confiscation of items to be sent home.
- Buying peers gifts or treats is not allowed.
- No sharing of snacks provided by Omegon or those brought in by parent during visit.
- Staff/resident borrowing is not permitted. Sharing of food is also not permitted.
- Staff/residents may donate items to Omegon as a whole, not to individuals.

### **Touch-Policy**

Appropriate physical interactions include: same gender hand shakes and high fives. Physical touch or breaking personal boundaries outside of hand shakes and high fives may result in staff intervention: building restrictions, loss of daily privileges, and in extreme cases or patterns physical escorts may be used.

### **Breaking Confidentiality**

Maintaining a safe environment to work through personal issues is an imperative element of a successful treatment program. The resident must feel free to disclose personal information, trusting that this information will not be used to cause harm. This includes: using a past resident's full name or sharing personal information of your peers outside of Omegon, even to your parents. A good motto to follow is: "What happens in the group stays in the group."

### **Money Accounts**

- Money for personal use is earned through completion of daily jobs as allowance.
- Earned allowances are calculated weekly.
- Residents may request print-out of account balance.
- All money will be stored in business office safe.
- Money may also be brought in from off-site by resident or parent/guardian and turned into staff. Parents are not required to provide money for the resident. Parents may only leave cash for residents and MUST receive a receipt. Checks from family members are not accepted, cash only.
  - When money is brought in, staff will write out a receipt for the family member.
  - Staff will seal in envelope.
  - All resident money will be put into the business office safe.
- Money may be withdrawn from personal account to use while on pass with staff or family.

### **Razors**

Shaving occurs twice a week or more if using star rewards. Staff will bring razors to rooms and hand them out. Once completed each resident must hand razor back immediately. Omegon provides razors to all residents but they may be brought from home and kept in the med room if the resident chooses.

- No Nair or other chemical hair removal products can be used.
- Residents who are currently on increased supervision: staff shadow, suicide watch, suicide prevention, SIB Protocol will not be allowed to shave.

### **Rec Room**

- When residents are in need of items in the Rec Room, staff will collect them and distribute as appropriate. Residents are not physically allowed into the Rec Room space.
- Labeled bins for confiscated items will be in the Rec Room for each resident. These bins contain items deemed inappropriate and will be stored until they can be sent home with a parent/guardian.

### **Medication Room**

*The following items are placed in the medication room upon intake and may be checked out by residents at the allotted times. Items, unless otherwise noted, will be returned before bedtime each day.*

- Residents are NEVER allowed in medication room.
- When waiting for medications, residents will wait behind the tape line until called to the window.
- The provider/RN will determine whether a medication will need to be crushed as an intervention and the RN will indicate in their MAR.
- Items to be kept in Medication Room:

- Tweezers
- Nail clippers
- Hairspray, hair gel, mousse, and body spray
- Hair straightener, curling irons, and blow dryers: may be requested for use and turned in before programming begins in the morning and if used in the afternoon needs to be turned in by 9pm.
- Shaving gel
- Razors
- Acne wash/cleansers
- All powdery substances-face, foot, baby, etc.
- Nail polish and remover-not to be used in resident room
- Cologne
- Items with alcohol in first three active ingredients
- Makeup (makeup can be used in rooms but is to be stored in medication room outside of those times)

### **Electronic Devices**

- iPod/MP3 players
  - iPods/MP3 players that can record (audio/video), take pictures, or access internet are not allowed at Omegon
  - The music is not loud enough for others to hear
  - Do not sing along out loud
  - Do not bring iPod/MP3 player upstairs to have in groups or school
  - Do not use iPod/MP3 player during meals
  - Staff are not allowed to add music or edit a resident's iPod/MP3 player
  - If an iPod/MP3 player is lost, stolen, borrowed/traded, Omegon is not responsible for replacing it
  - Using iPod/MP3 player is a privilege, even when using it as a skill. While music can be very therapeutic, it is important for residents to learn to use a variety of skills, so at times, a staff may challenge you to try a different skill if using music at the time is not appropriate.
- Omegon Radios
  - Radios are allowed in the gym as staff permits with appropriate volume and music .
  - Radios are allowed in the dayroom during free time and treatment work time with appropriate volume and music. Both of the above points are based on staff discretion.
  - Extension cords are not allowed.

### **Mealtime Expectations**

- Residents are provided all nutritional components at each meal and are offered the recommended amount at lunch; this includes a glass of milk (at breakfast and lunch only), a meat or meat by-product, a fruit, a vegetable, and a grain. Residents are also provided with two snacks per day.
- After resident meets all required food components, the resident may have an extra serving with a focus on smaller, healthier food options at dinner
- Meal time goals are to socialize appropriately with staff and other residents.
- If a resident is not able to eat due to an appointment or therapy session during meal time, staff will inform the kitchen staff to save a meal.
- Breakfast cart foods are served at breakfast only.
- Residents will be excused by staff from the cafeteria when the entire group is ready.
- Residents will clean their personal area before leaving.

- Residents who are vegetarian/vegan will receive an alternate option at meal times (to be determined at intake).

### **Snacks**

- Two snack times a day.
- Snacks are pre-set in content and amount.
- Snack will be completed at designated time or discarded.
- Residents may not bring snack to room when snack occurs in the cafeteria.
- Wrappers and apple cores will be placed in hallway garbage's.
- Daily snacks cannot be stored for later consumption.

### **Cafeteria**

- Recycle if possible.
- Paper cups are only to be used at bedtime for water; otherwise drinking fountains (break times, etc.).
  - Pitchers may be used in rooms during evening room time. Only water/ice may be used to fill the pitchers.

### **Caffeine**

- No energy drinks allowed at any time, including family therapy, visits or passes.
- Only plastic bottles allowed.
- Only one soda pop, no larger than 24 oz, is allowed per family therapy session or visit. It must be purchased before the meeting and disposed of or finished by the end.
- Soda pop is never allowed on the unit floor.
- Recycle the plastic bottle.

### **News/Movies**

- News time is available in the dayroom, during dinner time for all residents.
- Residents may watch **G, PG, & PG13** rated movies. No personally recorded VHS tapes or DVD's brought in by residents allowed. R-rated movies for therapeutic and educational reasons with parent/guardian's permission.
- Residents cannot have pillows or blankets while watching movies.
- One light is to remain on at all times.
- Upon successful completion of treatment a goodbye movie can be arranged with staff in advance (see Successful Discharge section for details).

### **Resident Council**

Purpose: The purpose of resident council is to provide an opportunity for residents to develop leadership skills through positively impacting the community by developing plans to improve daily programming or expectations, address any alterations in rules, speak on behalf of the resident community to advocate for additional needs or rewards, plan out of building activities and present the previous areas to the Omegon staff. Residents will be selected for resident council through an interview process. Any alterations to this process will be determined by the clinical team.

### **Responsibilities of a Peer Mentor**

Purpose: To describe to a peer the norms and expectations of the Omegon community. A peer mentor is selected based on a resident's current positive behavior, knowledge of the program, and leadership ability. Being selected as a peer mentor is a compliment and is designed to share a resident's knowledge with a new resident. Residents will use *Peer Helper Checklist* given to them by their case manager when selected.



Items to discuss with the new resident:

- Morning routine
  - Weekday: school, jobs, breakfast, lunch, medication times
  - Weekend: morning meditation, movies
- Afternoon routine
  - Groups, activities
- Evening routine
  - Dinner, snack, community groups, activities, leisure time
- Phase System/Weekly goals
- Quiet Space
- Passes
- Phone calls
- Laundry

Bring new resident to the following:

- Meals
- Groups
- School/classrooms
- Medication room
- Dayroom
- Main office
- Lunchroom
- Laundry
- Gym
- Show where the bathrooms are

Residents will be instructed to communicate in a way that does not break other's confidentiality.

#### **Expectations for a return of a Resident from Unauthorized Leave**

- Full check in to be completed, including a UA. (See check-in procedure and chemical use procedure)
- Omegon does not do internal body searches
- Vitals may be completed

# Expectations for a Clean Environment

To ensure the safety and well being of staff, residents and guests, it is important for the living space and building as a whole to be neat and orderly. It has been found that a messy space decreases a person's ability to focus on healthy development and is connected to having disorganized thinking and decision-making.

## House Jobs

House jobs are completed on a daily basis. House jobs are assigned by staff, on a daily rotation. These jobs are posted weekly on the milieu floor. House jobs are completed during the lunch or dinner hour, before or after the resident has eaten. Each resident is responsible to get their job checked off. If staff determines the job is not complete, residents will be asked to do it again.

## Daily House Job Sheet (these are subject to change based on programming needs)

- Wipe down area behind garbage can in Cafeteria and take out cafeteria garbage after each meal.
- Stack chairs in Cafeteria and wipe down tables, salad bar, and counters.
- Sweep Cafeteria after each meal and mop it after dinner.
- Organize Janitor's Closet and fill mop bucket water at the beginning of chore time.
- Dump out mop buckets and hang up mops at the end of chore time.
- Clean Dayroom Bathroom: change garbage, spray & wipe sink, sweep floor.
- Clean Laundry Room: Wipe tops of washers & dryers, empty lint traps, change garbage.
- Sweep and mop Laundry Room floor.
- Sweep hallway from cafeteria to gym stairs and kitchen hallway.
- Sweep milieu floor and baseboards from the Laundry room to Room 1.
- Sweep milieu floor and baseboards from Room 1 to Room 2.
- Sweep milieu floor and baseboards from Room 2 to Room 3.
- Sweep milieu floor and baseboards from Room 3 to resident telephones.
- Pick up garbage on floor and change garbage cans near North Bubble.
- Pick up garbage on floor and change garbage can near South Bubble.
- Vacuum rugs near North Bubble: next to Staff telephone & near Dayroom.
- Vacuum rugs near South Bubble: next to Resident telephones & near Rec Room.
- Vacuum inside of North Bubble (near Cafeteria).
- Stack all chairs in Dayroom and sweep Dayroom floor.
- Organize Dayroom and wipe Dayroom tables/vents.
- Spray and wipe down all door handles on milieu.
- Vacuum South Bubble (near Med Room).
- Vacuum Gym stairs.
- Spray and wipe down windows and vents in Dayroom.

## Milieu Rewards

Residents will be rewarded for maintaining cleanliness and respect within the community by completing their daily house jobs, abstaining from property destruction, staying in community meeting for the entire hour, and following the 5 Second Rule. Everyday that all house jobs are completed as well as any time the previous positive behaviors occur, the milieu will receive one ping pong ball to be placed in the milieu reward jug for each listed expectation. When the ping pong balls fill the jug to the designated line, they will be granted an extra mixed gender activity.

## **Room Expectations**

- The doors of the resident's rooms are closed and locked at all times.
- Resident doors will not be propped, except in the case of an extreme emergency and approved by the Program Director, and during General Inspection when one gender is on the floor alone.
- Staff will have access to rooms at all times.
- Residents are allowed only in assigned rooms. If another resident goes into an unassigned room all residents assigned to that room are expected to come out immediately and inform staff.
- All changing will occur in the bathroom or shower room, not the bedroom space.
- Close bathroom door when using it. Other residents are NOT allowed in the bathroom/shower room when in use by roommates.
- Residents will not open bedroom doors for others.
- If resident is waiting for staff to open the bedroom door, they must stand outside of the brick and be completely visible to staff.
- Shades cannot be taped to the window; shades are up during the day and pulled shut at night.
- Only shades provided by Omegon permitted on the windows.
- Residents may have drawings, pictures and posters hung in their personal room space as long as they are respectful and appropriate. Poster putty/tape must be used for all hangings.

## **Blankets/Linens**

- Residents must have pillow cases, a fitted sheet, and a top sheet. Omegon will provide a fleece blanket and must be used on top of the mattress and not as a cushion.
- Can bring one egg cushion from home.
- Limited to two pillows at any time.
- Residents may bring in personal blankets or comforters.
- Bedding to remain in bedroom.

Staff reserve the right to deny certain bedroom luxuries if they are deemed a safety concern (large stuffed animals, certain comforters, etc)

## **Room Job Explanation**

- Room jobs are completed on a daily basis. Jobs to be completed before school/groups start in the morning include: bed area clean, closet cleaned and organized, table cleaned and organized, clean picture board, all personal items returned to the medication room. Each resident is responsible to ask staff to check their jobs.
- The second part of room jobs is completed during the dinner hour. Residents will complete an additional job. Possibilities include: shower/tub clean, bathroom clean and organized, side 1 vacuum carpet and empty trash cans, sweep and mop, side 2 vacuum carpet and empty trash cans, sweep and mop. These jobs are assigned on a weekly basis and posted on Monday mornings. Each resident will have staff initial when completed. Any resident who forges a signature will have to complete the job again and receive a Personal Observation Processing. Detailed descriptions of these jobs are located on the clipboards outside each room.

## **Room Jobs**

- Shower Area: wipe down all walls and mop floor, pick up any containers and towels in the area.
- Bathroom: clean mirrors, sink, toilet, refill paper towels, one roll of toilet paper needs to be on the hook and three rolls above the toilet. Up to three rolls can be given during GI per room. One box of Kleenex can also be distributed if needed during GI.

- Wipe down all vents, blinds, windows and ledges. All surfaces must be dusted.
- Wash all walls.
- Empty all garbage cans and vacuum behind and under all furniture.
- Go through all areas, pick up trash, papers and dispose of ALL clutter in the room.

### **General Inspection (GI)**

Purpose: For all residents to gather weekly and learn skills of keeping up his/her living quarters. This process will teach the basics of maintaining a clean, organized, and safe living environment. Residents will be asked to practice skills they learned during Independent Living Skills groups and to seek help in the areas they might have limited training in.

- During GI there is a room meeting to start the process and discuss room concerns.
- Designated staff are responsible for gathering bedding/supplies/cleaning products and will check the jobs.
- Needed items for GI include:
  - bedding
  - towels and paper products
  - room repair/maintenance log
  - 1 spray bottle for surface cleaning
  - 2 rags
- The following items will be shared:
  - broom and dustpan
  - toilet brush
  - toilet/sink/shower cleaner
  - laundry bags for individualized bedding
  - mop bucket (each room will fill bucket with fresh water to mop their floor)

Each resident is responsible for the following tasks:

- All bedding is removed from beds and Omegon bedding is placed in laundry bags.
- Residents will wipe down the mattresses and note any damage to them.
- Residents will wipe down the bed frame, pull them out to vacuum behind and properly position the beds when complete.
- All residents will be given Omegon's bedding (1 fitted sheet, 1 standard sheet, 1-2 pillow cases, and 1-2 blankets) to use until personal bedding is washed.
- Remove all items from closet area and wipe down shelves and walls. All clothes folded and neatly organized before being placed back on the shelves. The bottom part of the closets is designated for shoes and laundry baskets. This area must be wiped down too.
- Remove all items from the desk and wipe. Organize the desk neatly. Picture boards must be appropriate. If the resident refuses to take down any inappropriate item, (s)he will lose the item and may lose the privilege of having a picture board.
- Inventory each resident's personal hygiene items.
- Complete assigned room job.
- Residents will trade in their dirty towels for clean towels by showing staff and placing them in Omegon's dirty linens bag. Residents may have a maximum of 2 Omegon towels at one time. After all of the linens are placed outside each room door, ALL Omegon linens (towels and sheets) should be placed inside the laundry bags and returned to the locker room area and hung on labeled hook.

### **Room Rewards**

Residents will be rewarded for maintaining cleanliness and programming expectations within their room by completing their daily room jobs, and following morning and evening expectations including being in their room by 9 PM. Residents will be expected to successfully complete these tasks 5 of 7 days, from Wednesday to Tuesday. If they successfully complete this task, residents

in the room(s) will be rewarded with a coupon and allowed to pick one of the following room rewards for the week : going for a walk around the loop/one-hour time outside, one hour of gym time, one hour of screen time, one object out of the prize box per resident, one hour extension of lights out, radio in room for the night or an extra beverage.

### **Individual Expectations**

- Throw away all trash in garbage receptacle.
- Keep clothing picked up off the floor, folded and in proper place.
- Separate dirty from clean clothes in laundry baskets.
- Keep papers in organized fashion (ie: in binder, neatly stacked on desk)
- Residents are allowed to shower during non-programming times. Showers and bathrooms may be locked for 30 minutes after meal times to accommodate individual treatment needs.
- Hygiene items may be kept in the room and each resident may have one of the following:
  - Shampoo
  - Conditioner
  - Soap-liquid or bar
  - Face wash
  - Toothpaste
  - Toothbrush
  - Lotion
  - Deodorant
  - Hair gel/product
  - Comb or brush
- Residents who do not have the necessary hygiene items may obtain them through stock items kept in the med room accessible by staff. Residents should ask staff if there are items needed that are not found in the medication room.
- Recycle non-confidential materials and plastic in recycling receptacles.

### **Cutting/Dying Hair within Facility**

Hair cutting and dying is not allowed in the building per the Health Department. Residents can use a pass for hair cut/color.

### **Clothing Expectations/Dress Code**

The given expectation is that clothing be "appropriate" and is always up to staff discretion to help keep and promote safety:

- Clothing must cover undergarments
- No cleavage, stomach or buttocks showing.
- No see through or skin tight clothing.
- If you wear jeans with holes in inappropriate places you will need to wear leggings or tights underneath them.
- If you wear leggings you will need to wear a shirt/top that covers your buttocks.
- If you are wearing shorts/skirts, you must be able to bend over/pick something up without exposing anything private. A general rule of thumb is if you are standing with your arms at your side, the shorts/skirts need to be at least to your fingertips.
- Residents aren't allowed to wear slippers without hard soles out of the building. NO bare feet.
- Bandanas are not allowed.

### **General Clothing Expectations**

- All residents will inventory their items and clearly label and initial. If items are found unlabeled staff will confiscate until owner of clothing is determined.
- A clothing count will be done with the assistance of staff
- Shirts must remain on at all times.
- Pajamas or shorts/pants and a shirt will be worn while sleeping
- No clothing with drug glorification or violence
- The clothes iron must be used and kept in designated area; not in resident room

Staff will always have discretion over clothing guidelines to help keep and promote safety. If counselors are seeing clothing that's inappropriate, they will ask you to change and will ask you to bring those clothes home. Items may be immediately sent home if deemed inappropriate during the check in process upon intake.

### **Individual Rewards**

Residents will be rewarded for maintaining individual cleanliness expectations by using the star system.

# Daily Programming Expectations

## Wake Up Routine

Residents wake up at 6:30am Monday through Friday in order to prepare for their day by performing hygiene tasks, medication, eat breakfast, make their beds and pick up their area (i.e. clothes in closet or in basket). Residents wake up at 8:00 am on the weekends and non-school days and maintain a similar routine in the initial wake up hour.

## Groups

- Group Rules will be determined by the group facilitator and reviewed at the beginning of group rotations and again as needed. Suggested group rules include:
  - Be respectful
  - Confidentiality
  - No swearing
  - Take turns
  - Actively participate
  - Use the bathroom during hourly breaks
  - Chair legs and resident feet on floor
  - No feet on furniture
  - No rocking on chairs

## Treatment Work Time/Passive Leisure Time

- Residents will be given the opportunity to complete assignments in a quiet area that promotes focusing skills which may include their room.
- Residents are excused from their treatment time only when on pass or attending therapy.
- Staff will monitor quality of work when signing them off.

## Community Meeting

Purpose: Resident community meetings are designed for residents to process with the milieu, community issues and personal treatment goals. Community meetings occur daily and offer residents a safe place to process. The community meeting encourages the development of a positive peer environment and meetings have a significant impact on setting the tone of the milieu. Sharing, self disclosure, expression of feelings, and honesty are essential to the process. Through the community meeting, residents work to achieve personal growth, interpersonal learning, reparative emotional experiences, and an opportunity to feel less isolated through establishing support.

## Daily Closure

Purpose: This is for residents to decompress thoughts and feelings from the day with staff and peers in their rooms. This is a time to integrate positive internal coping skills to be able to wind down and be able to talk about any issues that may have come up throughout the day.

## Daily Closure agenda

- Room meeting
- Check-ins (positives, etc.)
- One of the following relaxation techniques: Meditation CDs, Deep breathing, Yoga , Journaling, Listening to soothing sounds (rain/thunder, piano, etc.)
- Review pass/goal sheet for the day and receive feedback

## Expectations for Hallway, Upstairs Hallway/Offices

- Residents are not allowed in the main business office unless accompanied by staff.

- Residents are not allowed in the back clinical office, outside of weather emergency procedures (See EAP policy).

### **Laundry Time**

Can begin at 7am and will be able to change loads during appropriate breaks. Laundry may be put in the washing machine up to 8pm. At that time, only the dryers may be in use. Clothing must be folded and put away by 9:00p.m.

\*\*\*During weekdays, one washer and dryer must remain open for housekeeping.

- Monday Room 1
- Tuesday Room 2
- Wednesday Room 3
- Thursday Room 4
- Friday Room 5
- Saturday All Males
- Sunday All Females

### **Overnight Expectations**

- All items checked out must be returned to medication room or cubbies by 9:00pm.
- Residents will wear proper sleeping attire; may not wear only undergarments to bed.
- In room at 8:30pm, in bed by 9:50pm & lights out at 10:00pm.
- For respect of roommates, staff request that residents are quiet after 10 PM.
- Reading in bed may be allowed until 11 pm with a small lamp that has been approved by the maintenance department and treatment staff.
- Residents are recommended to come out of their room only in cases of emergency and/or safety concern on the overnight.
- If residents are awake when staff are doing room checks, they are to raise their hand or alert staff to them being awake so staff can track sleep patterns.

### **School Expectations**

Residents attend school Monday through Friday during the regular academic year. The classrooms are located on-site upstairs. There are 4 weeks of summer school taught by Intermediate School District 287 and approximately 6-8 weeks during the summer where the Omegon staff provides the educational programming for residents.

- Residents earn credit hours for each period. All teachers rate the resident's participation from 0 to 5 on a rating scale (0 being no participation and 5 being fully participated and behaviorally appropriate). Resident's school performance may affect ability to earn weekend passes.
- Residents have breaks between classes to use the bathroom. Water is supplied inside the classrooms.
- If a resident does not attend school, they are not eligible to participate in any off-grounds activities unless pre-approved (by a therapist or chemical health counselor). This is not a building restriction that requires processing off; it simply means they cannot go to GNO, NA/AA meetings, or community outings.
- Individualized Education Plans (IEP) are incorporated into school and treatment program as written. Any needs identified that would prohibit resident from understanding the program will be addressed within treatment plan and interventions will be made accordingly.

### **Sick Day**

If a resident is feeling sick, the nurse will be contacted to assess and determine whether the resident will be placed on sick day, allowing them to sleep during school or programming. If there is no improvement or symptoms worsen, further medical attention will be sought.



### **Serious Illness Procedures**

Assess vital signs and arrange further assessment by nurse and/or provider at clinic or urgent care. Resident may need to be isolated from other residents until assessed by medical staff. Call nurse if after business hours.

### **Mail**

- Letters are to be given to staff prior to being mailed out. Resident will show staff the front and back of the letter to be scanned for confidentiality purposes, shake out the letter, shake out the envelope, place it in the envelope, and seal it.
- If resident would like to use their own personal stamps brought from home, staff will retrieve the stamp from the locked cabinet in the staff medication room office.
- If resident would like to buy a stamp from Omegon, residents will ask staff and staff will work with Omegon's receptionist. This transaction will be recorded on the "Stamp" sheet in the business office. The cost of the stamp will be subtracted from the resident's weekly allowance.
- At 5PM staff will gather incoming mail from upstairs mailbox labeled resident mailbox.
- Residents will shake out mail and turn in envelope to staff before reading. Residents may write down addresses.
- No mail between treatment/correctional facilities unless approved in advance.
- No mail between former and current residents.

### **Phone Rules**

- Residents may sign up to make phone calls each night and weekend. Weeknight calls are from 4:30pm-9pm\*, Saturday and Sunday phone calls are 11am - 9pm\*.
- \*Please note that phone call times end at 8pm for phases 1 and 2. Phase 3 and Phase 4 residents can utilize calls from 8-9pm.
- Calls home during other periods of the day will be pre-approved by the case manager.
- Staff will move through the call list in chronological order.
- Residents who choose to be skipped in the call list will be moved to the bottom by staff.
- Phone calls are 10 minutes long and residents may only call people on the approved phone call list. Each resident has a list of names and numbers that have been approved by the case manager and parent for phone calls and visits. **Only the phone number in the book may be dialed if a resident wants to make a call.** If a number has changed it is the case manager's responsibility to change it in the call book.
- Callbacks: Starting at 5:00pm individuals on a resident's approved phone call list may begin calling Omegon to request that a resident call them back. Staff will write down on the Resident Phone Call Sheet located on the bottom clipboard by the dayroom phone the following information: how many calls the resident signed up to make or already received, the resident's name, and the person calling. **Staff will dial back the number to check if the caller is an approved person.** If it is a long distance number, staff must enter in their personal long distance code.
- Residents may request to speak with their Social Worker, Probation Officer, Guardian Ad Litem, Attorney or another advocate, which may be done during business hours, so long as it doesn't conflict with groups or school.
- Staff will give one warning but will hang up the phone when calls are becoming disrespectful or go over on time.
- Calls may be arranged to be on speaker when clinical team deems necessary.

### **Restitution/Community Service**

Community Service Projects are usually dealt with by the completion of STS, or a court ordered community based public service. Restitution must be completed daily, during free time.

The following jobs, but not an exhaustive list, are available for residents needing to complete restitution:

- Clean vans
- Wash windows
- Wash walls in rooms, gym, hallway, dayroom, etc.
- Sweep and mop gym, hallway
- Groom the volleyball court and turn up the soil
- Pick up trash on the grounds and out of the hedges in front of the living unit
- Wash all community and cafeteria chairs
- Organize the game cabinet
- Sweep front entry by bubble
- Clean tops of room doors if reachable
- Empty trash throughout building
- Wash/scrub trash cans and lids
- Scrub out laundry room sink
- Scrub out mop basin sink
- WITH ASSISTANCE from MAINTENANCE move the washers and dryers and sweep and mop the floor
- Other odd jobs as determined by staff

## Community Activities

Activity is a mandatory part of programming. Outside activity is not a right but a privilege. Activities are planned to expose you to a wide variety of things and not solely just to have fun. We hope you do have fun, but therapeutic recreation serves many places in treatment.

- Prior to leaving, staff will gather residents in the dayroom. Residents will review what the goals of the activity are including length of time, behavior expectations, van assignments and which staff is responsible for which resident.
- Following the meeting, staff will pull up the vans. Residents are to wait in the bubble until all vans are pulled up and staff gives them permission to load.
- Males and females will **not** travel in the same van unless approved.
- Residents are to stay with their pre-assigned staff member and not be more than 10 ft. away at anytime. If a resident or multiple residents continue to violate this rule, staff may cancel the activity and return everyone to Omegon as well as place them on a *Safety Intervention*.
- All passengers, including staff and driver, must wear seat belts. Vans go nowhere until staff has checked to verify each resident is wearing a seatbelt. This includes chest and lap strap. The van is to be pulled over immediately if any resident removes their seat belt. Lack of compliance will result in cancellation of the activity and immediate return to Omegon.
- Residents may not recline seat backs to the point where the shoulder strap is not touching them.
- Staff is in control of radio use, station, and volume. Radio will be immediately turned off if residents are disrespectful or disruptive. If staff is comfortable with delegating this duty to the resident sitting up front that is okay, but the driver has ultimate say.
- If a resident needs to leave the group to use the restroom, he/she must ask their assigned staff member for permission. Same gender staff will go into the bathroom with them, opposite gender staff will wait outside of bathroom if a same gender staff is not available. Residents are to be supervised at all times.
- Residents will complete pocket checks upon returning from activities

- Residents are subject to full check in procedures upon returning to Omegon if staff deem appropriate.
- Residents are not to have conversations with people not from Omegon unless arranged and accompanied by staff.
- Smoking by residents will result in the entire group returning to Omegon immediately. Attempts to smoke, like picking up cigarette butts is not allowed and may restrict a resident from future participation in activities.
- Sexualized comments, swearing, threatening, or any other unhelpful or unsafe communication will first be dealt with on an individual basis. If, after multiple attempts of redirection a resident continues, the entire group may be brought back.
- There is to be no food or beverages in the van, except water in an enclosed bottle.
- Residents may not climb over seats or use the back door as exit.
- Headphones are only allowed on YMCA activities, unless deemed appropriate by clinical team.

Some activities may require additional or modified rules depending on circumstances. Staff will discuss any such rules as they arise or prior to leaving on activity with residents. Issues on an activity may restrict a resident from future participation in activities.

### **YMCA Expectations**

#### **Purpose**

To develop healthy wellness and exercise habits. Maintaining appropriate boundaries in public, being polite and respectful in public; practicing what they learn at Omegon.

#### **Safety and Rules:**

- All residents must remain in one area unless accompanied by staff and be visible to staff at all times.
- YMCA time is split in half. It is up to the staff to determine which activities will be done and when. Half will be done in the workout room and other half basketball court, apart from Saturday which is gender separate swimming.
- Respect of Omegon's rules as well as any YMCA rules. Includes pool rules, weight room restrictions due to age, and adult only gym use. If resident is not following rules, call Omegon to request for someone to pick up the resident. If that is not possible, bring all residents back to Omegon. Each resident is responsible for contributing to the positive behavior during group activities; this includes holding each other accountable.
  - No Smoking/picking up tobacco products.
  - No swearing.
  - No talking to outside people.
  - Headphones are allowed.
- Hot Tub time is limited to no more than 10 minutes.
- All residents must be in the all ages locker-room. There is no use of the adult locker-room or sauna.
- Residents may not weigh themselves at the YMCA.
- Residents must have on appropriate attire. This includes tennis shoes, socks, sports bra if female, knee length shorts, and no Speedos. In the winter, residents must have jackets, hats, gloves and pants on when walking outside.
- Residents are responsible for your own belongings at the YMCA. Do not bring anything of substantial value to the YMCA.

### **Religious Ceremony Expectations**

- Males and females have separate opportunities/ceremonies in which they can attend; may include church, mosque, temple, sweats, etc.
- Behavior must be appropriate and respectful before leaving.

- Cannot participate in communion (wine).
- If a resident has a specific request to attend a church or service, arrangements can be made with parents through case manager.

#### **Outdoor Activity Area Expectations**

- Picnic tables may not to be moved by residents or families.
- All recreational equipment is stored in the building or equipment shed and will be put away when not in use.
- Residents will not sit in groups unsupervised by staff and will be gender separate.
- Keep noise to a minimum in order to respect the neighbors.
- Sunscreen is required when going outside.

#### **Gym Rules**

- Full contact during sports is not allowed.
- Pick up equipment after use.
- Active participation in assigned activity is expected.

# Interventions

"You were given the power to fly your own plane and explore the world. You can fly it anywhere you desire and you're the only one who can control it. This is the power of your brain."

## Purpose

The purpose of an intervention of any kind is to help teach residents alternative and healthy ways of responding to stressors, both internal and external. The ultimate goal is to provide safety without restrictive means. It is our goal to enhance the therapeutic milieu by providing more skills coaching in the moment, strengthening the structure and daily expectations, and allowing natural consequences to discourage unhealthy behaviors as much as possible. In the resident's individualized treatment plan, discipline recommendations from the resident's IEP will be addressed, if needed.

## Staff's role

We expect residents to follow basic hygiene and unit expectations, attend and genuinely participate in school and groups, and treat each other with respect. When a resident displays a behavior that interferes with the therapeutic milieu, staff will utilize different interventions to help the resident change their behavior in the moment. If the behavior continues to escalate, staff will follow appropriate protocols and assessments to determine the least restrictive intervention necessary to ensure the safety of all residents, staff, and the milieu.

## Interventions

- Positive Reinforcement
  - Staff will utilize positive reinforcement to encourage behaviors that are safe, helpful, healthy and effective. Staff will listen to residents, praise them when they are trying and acknowledge little steps and achievements along the way.
- 'Natural Consequences'
  - When possible, staff will utilize and point out natural consequences to respond and discourage undesirable behaviors. Utilizing natural consequences does not mean there will be no 'traditional consequences,' but that instead staff will look at the situation to assess what is appropriate given the specific incident. The following are examples of natural consequences:
    - Borrowing/Trading – the item may be lost (and not replaced by Omegon); if staff learn about Borrowing/Trading, they will take the item and send it home with the resident's family.
    - Refusing Groups/Not going to school – not eligible for off-grounds activities (AA/NA dependent on staff discretion)
    - Staying up late/refusing to follow late night expectations – difficulty waking up the next morning, not earning privileges for the day
    - Bringing iPods upstairs/using during groups/meals, not giving the iPod to staff when asked, will lose iPod for 24 hours (may be longer if it's a pattern)
    - Using fidgets inappropriately or causing a distraction, will lose that fidget
- Redirection or other alternative suggestions for healthier coping.
- Re-Focusing Group
  - If a resident, the group, or a number of residents are creating distractions to the point that the milieu becomes unsafe or unproductive, a community group may be called to help them refocus. Staff will announce to community that they will meet in a designated area and process how to get the group on track. All programming stops until safety and respect are restored.
- Quiet Space

- The identified quiet space is an open and unlocked space in the milieu by the south end of the living unit. This is an area that residents may use to help regulate themselves, take a break, journal, take some time away from their peers. Residents need to ask permission unless the space is being used as a timeout.
- Self-Directed Break from programming
  - A resident may take a self-directed break to regulate or refocus before re-joining the group
  - Breaks are time limited.
  - They are not for socializing or processing treatment work
- Time out
  - Time out is a specific therapeutic intervention that directs a resident to a safe and specific area to regulate themselves and deescalate
  - Time out may occur in the quiet space or any other designated area assigned by staff.
  - When residents are directed to the space, they will need to remain compliant/respectful to process and rejoin programming.
  - When calm, processing will begin.
  - If resident refuses a time out, (s)he will be escorted to the designated space determined by staff. They will not be allowed to move onto the next scheduled activity or group until they have processed the behavior which led to the time out and will receive a *Building Restriction/Accountability Sheet* due to their lack of compliance.
- 5 Second Rule
  - During crisis situations staff yells, “five-second rule,” and residents need to go to their own room or staff-directed specific area. Residents could break crisis expectations by being non-compliant, i.e.: yelling, instigating and/or not being in their designated area, coming out of their room, asking staff non-emergency questions. Staff will inform residents when the situation has been secured so that they may come out.
- Behavioral Checks
  - Staff observations on a resident's behavior written in 15 minute increments unless otherwise specified. This may be used to help with medication management or clinical needs
- On-Grounds Restriction
  - A resident will not be allowed to leave Omegon grounds for 24 hours for displaying the following behavioral concerns (this is not an exhaustive list and it is always up to staff discretion):
    - Sexual Comments or Behavior
    - Property Destruction (depends on severity)
    - Threatening the Safety of Others
    - Physical Aggression
    - Riot Situations
    - Unauthorized Leave/Running Away
    - Chemical Use
    - Bringing Chemicals into Omegon
    - Bullying
    - Derogatory/Homophobic/Racist comments with the intention of harming another
    - Violation of a 5 Second Rule
    - Or any other concerning behavior that disrupts the therapeutic milieu per staff discretion

- If a resident appears to have a pattern of engaging in specific, unsafe/unhealthy behaviors, the Team may make the decision to increase the amount of on-grounds restrictions, as well as utilize other tools to help the resident change their behaviors. On-grounds restriction will not exceed 72 hours
- 5 Day Review
  - The intention of a 5-day Review is to confer with interested persons (family, workers, clinical team) when a resident is being considered for discharge prior to the completion of treatment plan goals due to safety concerns to self or others, or community.
    - During this review period, the treatment team determines whether they have put in place all options to create a positive learning opportunity for the resident, including special interventions or proper medication management.
    - The resident may be removed from the facility for this review period if there is a safe alternative to the treatment center.
    - The review will not exceed 5 days

### **Safety Protocols/Interventions**

- Suicide Watch
  - Suicide Watch will be utilized when there is concern about suicidal ideation and increased supervision is necessary to help the resident maintain safety.
  - On Suicide Watch, a resident is not able to attend off-ground activities (medical appointments depend on type of appointment and based on resident's current risk level).
  - Anyone can place a resident on Suicide Watch using the *Suicidal Ideation Protocol Assessment*.
  - To be removed from Suicide Watch, the resident will be assessed by a Mental Health Professional (or by a therapist when in consult with MHP) for current safety risks and ability to demonstrate ability to maintain safety.
  - The resident must display safe behaviors and ability to follow safety plan/expectations for a minimum of 2 days (or longer if MHP deems appropriate).
- Suicidal Prevention
  - Suicide Prevention will be utilized when a resident expresses or displays significant safety concerns due to suicidal ideation, including (but not limited to) clear intent and desire for suicide, suicidal gestures, suicide attempt, or unwilling to engage in and follow safety planning.
  - A resident will not be able to attend off-grounds activity and will be under constant visual supervision (showers and bathrooms will maintain constant verbal contact; may be required to shower in swimsuit or use restroom with door propped if warranted by safety concerns).
  - Anyone can place a resident on Suicide Prevention. This will be assessed using the *Suicidal Ideation Protocol Assessment*.
  - Only MHP (a therapist when in consult with MHP) can remove a Resident from Suicide Watch/Prevention.
  - After removing from Suicide Prevention (minimum of 2 days of safe behaviors), resident will be placed on Suicide Watch.
  - The resident must continue to display safe behaviors and ability to follow safety plan/expectations for a minimum of 2 days (or longer if MHP deems appropriate).
- Self-Injurious Behavioral (SIB) Protocol
  - The SIB Protocol will be utilized for self-harm urges or actions.

- Anyone can place a resident on SIB Protocol using the *Self Injurious Behavior Monitoring Assessment*; reassessed every 24 hours by a residential counselor.
  - SIB Protocol is discontinued if no ongoing safety concerns.
  - The resident MAY attend off-ground activities at staff discretion depending on the resident's ability to create and follow a safety plan, follow staff cues and redirection, and identify potential for triggers.
- Staff Shadow
    - Staff Shadow will be utilized when a resident is a threat to others and requires increased supervision to keep others safe.
    - A resident may be placed on Staff Shadow for the following behaviors:
      - Bullying
      - Threats and/or Intimidation
      - Tattooing/Piercing others
      - Sexual Behavior/Conduct
      - Physical Assault, Physical Aggression
      - Property Destruction (depending on severity)
      - Causing or Attempting to Instigate a Riot
      - Making/Possessing Weapons
    - While on Staff Shadow, a resident may not participate in off-grounds activity (AA/NA will be at staff discretion).
    - A resident will be placed on Staff Shadow for a minimum of 48 hours (from time concerning behaviors end), and after fully processing the concerning behaviors (not 48 hours after processing the behavior).
  - Crisis Management and Restrictive Procedures
  - Hospitalization

#### **Notification of Incidents**

- Parent and workers will be notified of incidents that occur involving the resident. In regards to Critical Incidents, parents/guardians will be notified by the end of the working shift. Non-critical incidents will be including in weekly updates.



# Groups and Services

## **Therapeutic Services**

*Milieu Management:* 24 hours daily, therapeutic living environment facilitated by Residential Counselor staff. Milieu management is focused on providing planned structure, support, routine and a “therapeutic culture” to allow for improved daily living skills, coping skills, interpersonal relationship skills and sobriety. Trust, safety, respect, and sobriety are core components of the program’s philosophy.

*Individual Therapy:* Provided at least once weekly to all residents, facilitated by a Master’s Degree level clinician who is either a Mental Health Professional or supervised by a Mental Health Professional. Intensive individual therapy is a significant component of the treatment program. The goal of individual therapy is to assist children in developing an improved understanding of their emotional, mental, and chemical health problems, to process and work through past difficulties and traumas, and to develop skills in effective communication and problem solving. All therapists are trained in Evidenced Based Practices (EBP). Most are trained in specific trauma modalities like Trauma Focused Cognitive Behavioral Therapy (TF-CBT) and/or Eye Movement Desensitization and Reprocessing (EMDR).

*Chemical Health Counseling:* Provided at least once weekly, facilitated by an LADC, ADC or LADC Intern and supervised by a Master’s level Drug and Alcohol Counselor. The goal of chemical health counseling is to assist residents in developing a realistic understanding of the current and potential consequences and risks of their chemical use as well as facilitate the residents to create self-identified recovery goals. By creating chemical health goals, counselors will help to look at changes that must occur to sustain the goal and holistic ways to facilitate the process.

*Group Therapy:* Provided weekly and co-facilitated by a mental health practitioner or professional and an alcohol and drug counselor. Group therapy is gender separate. The discussion of topics is open-ended and determined by the issues of its members.

*Family Therapy and Family Psychoeducation:* Family therapy is offered weekly, facilitated by a Master’s Degree level clinician who is either a Mental Health Professional or supervised by a Mental Health Professional. Family Psychoeducation is provided two times a month on Fridays from 3:30p - 5p. The family is an essential component of a successful treatment and a critical factor in the long-term success of children after they leave our program. Families are expected to take an active role in the treatment process. This includes mandatory attendance of family therapy sessions and Family Psychoeducation. Participation in family therapy and Family Psychoeducation is a requirement of a child’s continued treatment at Omegon as well as their earning a home pass. Failure to meet the obligations may result in discharge from the program.

*Psychiatric Consultation and Medication Management:* All residents see a Board Certified Child and Adolescent Psychiatrist as part of the initial evaluation process and on an ongoing basis. Residents are seen on a monthly basis, at minimum, and can be seen as frequently as weekly if indicated.

*Nursing:* Nursing services are provided as needed, including management of physical illness, doctor’s appointments, and medication management. The Omegon nurse is available to answer medical and medication questions for residents. The nurse will contact parent/guardian(s) regarding their child’s regular medical appointments as well as if there are any significant medical concerns. If the Psychiatrist recommends a medication change the nurse will contact parent/guardian(s) to seek informed consent.

**Education:** Provided on-site by Intermediate School District #287, the school day runs from 7:30am to 2:50pm during the regular school year and 8am to 11:30am during the summer session (June and July). A minimum of one staff is dually licensed in their specific subject areas as well as in Special Education. A licensed guidance counselor is also available on Fridays. Students can earn credits in english, math, social studies, science, and have a fourth hour where they can participate in online learning or work toward credit hours in a specific area of need. Students work both independently and as a group based upon their grade and ability levels. Credit hours are accrued and transferred to the student's home school district upon their discharge and students are encouraged to maintain contact with the home school district to ensure a successful transition once they graduate from Omegon.

**Primary Counselor:** Primary Counselors are an identified residential counselor with whom the resident can develop a closer relationship with in order to support their work and progress in treatment. Primary Counselors will meet weekly with the resident for at least 15 minutes, without others around and identify goals ('Primary Goals') the resident wants to work on during the upcoming week. The Primary Counselor is responsible for weekly updates to both parents and workers (social workers and/or probation officers). They will complete the *Primary Sheet* and sign it, review it with the resident and have the resident sign it, and give it to the Case Manager.

### **Chemical Therapy Groups**

Provided weekly and facilitated by an LADC, ADC or LADC intern. Each resident attends regulary scheduled chemical health groups and one of the two elective chemical health groups weekly. Elective groups are 12 weeks in length and regularly scheduled groups are organized in units and are 24 weeks in length or more.

- **Relapse Prevention** is a regular scheduled group facilitated weekly. It is designed to educate residents about the relapse process and to provide them with coping skills. Goals are to identify triggers for potential relapse. The clarification of values and self-knowledge exercises are part of the curriculum. High risk factors will be individually prioritized by each resident and problem-solving will be introduced to address these factors. Irrational thinking, unmanageable feelings, mindfulness skills as relapse skills, and self-defeating behaviors will be continual topics for discussion. Balanced life modalities (e.g.: structure, nutrition, exercise, and spirituality) will be introduced and discussed. Residents will identify support systems (individuals and organizations) and will make specific goals, both short- and long-term, to address relapse issues. Emphasis will be on providing a skill base for learning from relapse and on developing the understanding and skill base for preventing a relapse. Residents will also discuss transportation, job seeking, and leisure or recreational activities. Additionally, residents will complete a packet that they will take with them at discharge.
- **12-Step Group** is a group designed to educate residents on the core principles behind the 12-step process as well as the core principles behind each individual step. Residents will not complete step work as a part of the group, but rather it is hoped that they will gain an understanding of the steps so that they may feel comfortable to complete their steps individually if they choose to do so. Residents will learn the principles through experiential groups activities and group discussion.
- **Chemical Effects Group** is a group designed to investigate how chemical use has affected various areas of each resident's life. The topics include health and body effects, chemical use and mental health, legal effects, spiritual effects, family functioning, and social perceptions. It also includes education surrounding the *Stages of Change* mode and specific information regarding substance use disorders and the brain. Residents are encouraged to reflect in-depth on how their chemical use has influenced their personal lives and to consider ways their functioning could improve if their chemical choices changed. This group explores the effects of chemicals on the brain, body, family, relationships, mental health, and society. Information regarding Nicotine Cessation is included in this curriculum.

- *Chemical Processing Group* is designed for individuals to gain comfort in addressing their chemical use history. In this group residents will share their insight on addiction and drug using behaviors. They will process their chemical health assignments in a therapeutic environment with their peers and chemical health counselor. Each individual will have the opportunity to process fears, goals, and struggles in relation to sobriety. Triggers to return to chemical use will be openly discussed, and they will work to identify a variety of coping skills of which they can utilize both in the facility and community.
- *Principles of Recovery* is a group designed to address three major topics/units.
  - *Blocks to recovery:* residents will gain education on what a recovery block is and why they are problematic. They will spend 8 additional weeks discussion in detail specific blocks that the group identifies as concerns in week 1. Examples may include: shame, resentments, spirituality, trust, and health versus un-healthy relationships.
  - *Planning for change:* residents will discuss the importance of self-exploration and identifying personal values, morals, and needs. Residents will discuss tools to effectively facilitate this process and encourage on-going growth.
  - *Sober networking:* residents will discuss ways to meet sober people, structure free-time, avoid boredom, and reduce relapse risks and triggers in the home environment.

### **Therapeutic Programming Groups**

Offered for four hours in the afternoons, these groups are designed to teach a variety of skills and to promote discussions. The groups rotate in a 12-week cycle. The following is not an exhaustive list of the groups we offer, but an overview:

- *Art Group* is designed to discuss art in its meaning and purpose, as well as to experiment with different materials and techniques for residents to learn basic fundamentals of art. The group is a means for the residents to express themselves in a way that is non-literary or verbal. Residents will participate in different projects such as mask making and clay projects to explore expression. They will also keep a sketchbook and make 1 drawing per week. The thought for the weekly drawing is that residents through this will become more accustomed to expressing themselves and more comfortable with their skills. Residents will also participate in looking at other artists and talking about the expression and intentions involved, as well as learning about art history and theories. Residents will participate in critiques with their peers so that they can learn the value of constructive criticism.
- *Diversity Group* gives residents the opportunity to explore and expand their knowledge about society's diverse population. Residents will also be able to educate themselves about their own diverse heritage. This group will work to provide a safe environment for residents to speak openly and freely about their knowledge, fears, biases, and questions pertaining to diversity. Topics of study will include, but are not limited to: diverse cultures, gender, ageism, racism, sexism, and persons with disabilities. Each week could involve any of the following: lecture, discussion, video, speakers, and/or projects.
- *Wellness and Self-Esteem Group* is designed to help residents learn how to better get along with others, how to identify their own positive attributes, internal and external worth and self-value, how to cope with "normal" adolescent development and dealing with being placed out of the home with issues of chemical abuse and addiction. Group discussions are focused on being open and honest and honoring safety and security within the group. Group members learn that there are various ways low self-esteem is exhibited, how it affects each member personally, and how it affects people around them. The goal of the group is to identify how being a teenager has its own unique battles and to learn that setting future goals and having aspirations can positively affect areas of esteem development. The group focuses on taking an honest look at thoughts and feelings and to learn how to communicate these to the people

around them. Self-esteem is tied into every action so a goal is to learn ways to increase or maintain personal esteem by identifying and expressing feelings, being assertive, and building more positive relationships. Wellness is a state of health which is closely associated with lifestyle. It is a positive approach toward living that emphasizes the whole person. Members in this group discuss various aspects of wellness including: stigma of mental health, relaxation and stress, anger and problem solving, impact of chemicals, social support, healthy sleeping, and eating patters, and health thinking. Members will also explore the different dimensions, concepts, and skills of wellness.

- *Phase Group* will teach the residents about the meaning of each phase that they are progressing through during their treatment (i.e. orientation, wellness, honesty, empathy, transitions). These phases are based on Robert Ellis' model of REBT. The residents will encounter a variety of learning opportunities including interactive activities, article reading with discussion, homework to be presented during group, and films, etc.
- *Treatment Plan Process Group* occurs weekly. It is facilitated by the Family Therapist/Case Managers. The small group setting allows residents to address individualized treatment plans. This group is open for discussion regarding community treatment concerns, conflict resolution, relationship building, and any other topics determined by its members. Primary Group provides residents with the opportunity to provide one another with feedback and support. Case management services are also discussed at this time.
- *Sexuality Group* is designed to help residents achieve positive outcomes (e.g.: self-esteem, respect for self and others, non-exploitive sexual relations, rewarding sexual relationships, the joy of desired parenthood), and to avoid negative outcomes (e.g.: unintended pregnancy, HIV/STDs, sexual coercion, sexual dysfunction). Objectives for residents include: (i) being knowledgeable about reproductive health, (ii) being able to make informed choices about parenthood and sexuality, and (iii) being comfortable with one's own sexuality. Residents will also participate in an experiential infant simulator program for 4 days. This realistic baby requires burping, rocking, feeding, and diaper changing on a 24-hour schedule. Through motion sensor technology, the baby reports any mishandling. Residents may utilize the "daycare" for a few hours when they are under stress or have plans that the baby would not be able to attend. The curriculum teaches about infant developmental milestones, common health conditions, Fetal Alcohol Syndrome (FAS), Sudden Infant Death Syndrome (SIDS) and shaken baby syndrome. Residents also watch the documentary "Babies" which compares and contrasts different cultures of parenting with love being the common denominator.
- *Spirituality Group* serves as an introduction for spiritual discussion. It is designed to teach awareness of different paths to a belief in a higher power and to display how this can strengthen pursuits of a sober life. Spirituality is defined as a way of life. It influences why we do what we do. Our values, behaviors, and our definition of good and evil are determined by the spirituality we have. This group assists residents in their understanding of spirituality as well as its role in the treatment process. This group in no way attempts to make the residents believe in a particular power or belief system.
- *Stress Reduction Group* focuses on teaching the residents about everyday environmental and personal stressors. The group focuses on how they can notice the stressors and how these affect their bodies and minds. The group teaches the residents different techniques on how to alleviate the stress, such as meditation, deep breathing, and posture relaxation (yoga poses). The final weeks of the group focus on nutrition, exercise, and healthy living.
- *Therapeutic Recreation* Omegon residents engage in two hours of therapeutic recreation per day to provide the resident with an opportunity to participate in recreational activities without the use of mood-altering chemicals and to learn to plan and select leisure activities that do not involve the inappropriate use of chemicals. Therapeutic recreation is divided into large muscle, creative, leisure, and outside activities. The goal of the therapeutic recreation

program is to help teens find their passion by exposing them to a wide variety of academic, artistic, and athletic pursuits. Methods employed to help us reach this goal are:

- Teaching kids how to give and receive constructive criticism
- Offering challenges that are attainable but require some sustained effort
- Teaching how to accept, embrace and learn from setbacks and failures
- Praising kids for effort and risk taking rather than IQ or natural ability
- Modeling these teachings ourselves as staff.

A framework as to how we teach these methods is called the expose, experience and express model. *Expose* – We do things that expose our residents by attending a myriad of activities such as theatre productions, sporting events, concerts, comedy, and museums. *Experience* – We then learn and develop new talents through ongoing classes such as art, piano/guitar instruction, creative writing, stock market team, book club and improvisational acting; and volunteering at Feed My Starving Children, soup kitchens, city of Minnetonka, Volunteers of America, Mary's Place and St. David's. *Express* – Finally, we express our new passions and skills through talent shows, Omegon Olympics, tournaments, and contests.

- *Physical Education Group* The goals of this group are to acquire movement skills and understand concepts needed to engage in sports and other health-enhancing physical activity. Residents will also learn to achieve and maintain a health-enhancing level of physical fitness based upon continual self-assessment and develop team-building skills by working with others through physical activity. Structured PE is three times per week and covers units in floor hockey, softball, basketball, football, bocce ball, ultimate Frisbee, soccer, handball, volleyball, badminton, dancing, yoga, Pilates, dodge ball, and kickball. Residents are also given the opportunity to attend the YMCA two to three times per week where they document and track progress on both upper- and lower-body workouts.
- *Living Skills Group* assists residents in learning basic skills necessary for living in the larger community. This includes units in Health, Hygiene and Personal Appearance, Housekeeping, Transportation, Education/Career Planning, Community Resources/Responsibility, Emergency/Safety skills, Housing, Food Management, Budgeting, and Financial Skills.

\*\*\*Any changes or corrections to the program will result in an addendum\*\*\*