

WELCOME
TO



DRUG & ALCOHOL RESIDENTIAL
REHABILITATION SERVICES
HANDBOOK

THANK YOU FOR CHOOSING LIGHTHOUSE LEKKI!

OUR PHILOSOPHY

“The first step to change is awareness, the second step is acceptance”.

We at Lighthouse Lekki recognise this journey begins with the first step, and we commend you on taking it. It is in the decision to leave one spot to go towards another, that can change our lives forever.

Our purpose is to restore the dignity and vision back into the lives of individuals, one fine mind at a time. We are here to support you on this journey, so that you don't have to do it alone.

Some people with complex drug-abuse related problems require an intense support program, as well as residential facilities that can't be realistically delivered in a community or outpatient setting. We at Lighthouse Lekki recognise the need for such a service, and are here to provide it.

Our staff will integrate sound psychological practices into a holistic, person-centred recovery process. We provide individualized care as well as group therapy, to treat the entire person physically, psychologically and spiritually.

We believe recovery requires a multidisciplinary, proactive and comprehensive approach, to address the many fundamental and underlying causes of drug and alcohol addiction. These factors include physiological, psychological, emotional, social, and environmental influences, to name a few, each of which requires targeted treatment interventions, which we are dedicated to providing. It is also our philosophy to continuously evaluate and improve these evidence-based treatments.

We understand that recovery can sometimes be a lengthy process; however, we aim, not only to educate all clients about the skills and tools necessary to achieve long-term sobriety, but also to empower them with the ability to use them effectively.

Our promise to you is that you will be treated with respect as you receive impeccable service in a clean, professional, and therapeutic environment, from our seasoned professionals.

You are very welcome here. Please be assured of our commitment to working in partnership with you.

I hope that your experience here is a truly significant one.

*Lawale Eso
Chief Executive Officer*

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PURPOSE

This handbook is designed to provide you with all the important information you need to feel settled. Please familiarise yourself with the rules contained in the handbook. Whilst every attempt has been made to ensure that the handbook is as complete as possible, questions or circumstances may arise which are not included. Should this occur, please refer the matter to a staff member.

SERVICE DESCRIPTION

Lighthouse Lekki provides rehabilitative and residential services, through a range of structured interventions to address drug and alcohol misuse, including - but not limited to - abstinence-orientated interventions.

CLIENT CHARACTERISTICS

Individuals, particularly those with a severe form of alcohol or other drug misuse, or those in a high-risk group who need medication-assisted detoxification.

PROGRAMME CHARACTERISTICS

- A structured programme of treatment and/or rehabilitation activities, to assist clients to develop and practise the skills to manage substance use and related problems.
- The client resides in the residential rehabilitative home for the period of the therapeutic intervention
- 24-hour staff cover on site

CLIENT CHARACTERISTICS

- Individuals with medium or high dependence on drugs.
 - Individuals with complex problems related to drug misuse, and perhaps those finding it difficult to achieve abstinence in the community.
 - Individuals who require respite, and an intensive programme of support and care, which cannot realistically be delivered in a community or out-client setting.
 - Individuals who need to receive treatment away from their usual drug-oriented community or family environment.
 - Individuals who want a treatment that is residential, and are willing to accept restrictions on their liberty for the duration of the program.
- * Lighthouse Lekki shall not provide services to patients with primary psychotic behaviour or patients who have been diagnosed with a severe form of schizophrenia spectrum and other psychotic disorder

LENGTH OF RESIDENCY

The length of residency at the rehabilitation facility is 12 weeks.

WHAT I CAN BRING WITH ME

Apart from your personal belongings, you may bring reading and writing material, The centre supplies bedding and basic toiletries.

YOU MAY NOT BRING THE FOLLOWING

- mouthwash
- expensive items ie; jewellery
- portable TV's, or DVD players
- incense, candles, or oil burners
- sharp objects
- cameras
- spray deodorants (roll-on only), aerosols, etc.
- fragrances /perfume/oils of any description

Before admission, a staff member is required to check your belongings and will be able to advise you if anything is not suitable. Any item found unsuitable will be labelled and securely stored until your exit. Upon admission, you will also be subjected to a body search to ensure no prohibited items are being stored on your person.

PROHIBITED ITEMS INCLUDE

- weapons and all drug paraphernalia *
- pornographic material
- clothing with brands of alcohol, drug or offensive logos
- books with a gang, drug use, grotesque, horror, or occult themes
- non-prescribed medications or non-declared medications, including herbal highs. *

*** These items will not be returned**

If you do have any of these items please DECLARE them straight away so that they won't jeopardise your time on the programme. These rules are here to keep everyone in the community safe from harm. We respect that you have individual needs and sources of relaxation but we are here to keep the community safe, and in a happy frame of mind. Staff will also supervise your packing when you exit the programme.

MEALS

A cooked meal will be provided by the centre, please let the program manager know if you have any dietary needs, so these can be considered when ordering food.

Energy Drinks: The rehab does not permit any energy drinks to be purchased and consumed on the premises. This includes but is not limited to; Red Bull etc.

Suspected Drug Use: If you suspect that another resident may be using drugs, do not discuss your concerns with other residents, but speak with the housemaster or nurse outlining why you hold the concerns. All information will be treated in the strictest confidentiality

CUMPOLSORY ACTIVITIES

- Therapy groups
- Counselling sessions
- Devotional /praise and prayer time/ Discipleship training
- Recreational and fitness activities
- Casual/one-off activities prescribed by staff

NB: Remember what effort you put in is directly related to the outcome.

CONSIDERATION FOR OTHERS

Everyone has the responsibility to acknowledge and respect the rights of others. In the interest of the smooth running of the Rehab please observe the following:

- Keep noise levels down
- Use positive language
- Refrain from using abusive and obscene language
- Respect another client's privacy
- Respect another client's property
- Be punctual
- Clean up after yourself
- Respect confidentiality
- Do not engage in unnecessary gossip and criticism
- Be fair
- Avoid put-downs however serious or light they may appear
- Address the behaviour not the person
- Do not glorify past experiences whilst under the influence, these discussions should happen as part of a therapeutic group

UNACCEPTABLE BEHAVIOUR

Unacceptable behaviour cannot be tolerated under any circumstances. This includes:

- sexual harassment of staff and residents
- verbal threats and abuse
- physical violence
- sexual encounters with other residents
- stealing
- damaging property
- smoking inside and on the centre grounds

DRUG & ALCOHOL USE POLICY INCLUDING DRUG SCREENING

Lighthouse Lekki promotes a drug-free recovery and environment. To monitor sobriety, we conduct random drug screening throughout the treatment program. If you have used, or are thinking about using drugs during the rehabilitation program, please speak to a member of staff, as we are here to help. A positive drug screen may affect your level of care and/or treatment length. We reserve the right to test for any substance. A positive drug screen may result in an automatic restart of your program.

If you are prescribed any form of medication before admission, or if you receive prescription medication during the rehabilitation program, please provide written verification from your prescriber. If we are unable to determine that a positive drug screen is the result of prescribed medication use, then it will be considered as a relapse.

It is also our policy that all drug screens are observed. We use a variety of drug screens including urine analysis and mouth swabs.

By signing below, you are stating that you have read and understood the Drug Use and Drug Screening Policy set out by Lighthouse Lekki. You are also agreeing to comply with all articles stated in this policy.

(Print Name) _____

(Client signature) _____

(DOB) _____

(Date) _____

I have presented and explained the Drug & Alcohol Use Policy as well as the Drug Screening Policy and have answered any questions/concerns the client has.

(Staff Signature) _____

(Date) _____

LIGHTHOUSE LEKKI DAILY TIMETABLE

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
5:45am – 6:00am	WAKE-UP CALL						WAKE UP/ DEVOTIONAL	
6:00am – 6:45am	GROUP MORNING DEVOTIONALS							
6:45am – 7:15am	MORNING FITNESS					MORNING FITNESS	MORNING PRAISE	
7:15am – 7:45am	PERSONAL HYGIENE AND GENERAL CLEANING							
7:45am – 8:20am	MEDICAL CHECKS (VITALS: WEIGHT, BLOOD PRESSURE, ETC.)					SHOWERS	HOUSE INSPECTION/CLEANING	
							SHOWERS	
8:20am – 9:30am	BREAKFAST							
9:30am - 10:00am	SHORT BREAK						Sunday service	
10:00am -11.30am	Therapeutic Community Meeting Clients/ Therapist	What is Treatment? Doctor/ Therapist	Therapeutic Community Meeting Clients/ Therapist	Anxiety & Depression Cognitive Behavioural Therapy Clinical Psychologist	Therapeutic Community Meeting Clients/ Therapist	Values, Beliefs, & Spirituality Pastor		
11:30am-12:15pm	Disease of Addiction Doctor/Therapist	Stages of Change Doctor/ Psychologist/ Social worker	Drugs, drug use and its consequence Doctor/ Psychologist/Social worker	One-on-One Counselling Values, Beliefs, & Spirituality Pastor	Anger and resentment Management Psychologist Staff/Social Worker	Medical Checks and Discussion/ Career counselling Volunteer		
12:15pm – 1:00pm	Coping with cravings Doctor/Psychologist/ Social worker	Moments of Reflection Social Worker/ Pastor	Anger and resentment Management Psychologist Staff/Social Worker	Health Education Medical Team	12 Steps Social Support Staff			
1:00pm – 1:30pm	LUNCH							
1:30pm-2:30pm	SIESTA							
2:30pm – 3:30pm	Values, Beliefs, & Spirituality. Pastor	Manifestation s of Addiction Doctor/ Psychologist/ Social worker	Medical Check-ups Medical Team	Relapse prevention therapy Psychologist/ social worker	Denial & Self- Deception Moments of Reflection Psychologist/ social worker	Thoughts, Feelings, & Emotions Volunteer	Free Time / Visits	
3:30pm – 4:30pm	Communication & Boundaries Therapy Social Support Staff	Health Education Medical Team	Recovery, Not Relapse Doctor/ Psychologist/ Social worker	Denial & Self- Deception Psychologist/So cial worker	Embracing powerlessness without feeling helpless Psychologist/Pa stor			
4:30pm – 5:00pm	GROUP EXPLORE AND DISCOVER LECTURE SERIES							
5:00pm – 7:00pm	EVENING FITNESS, SHOWER							
7:00pm – 8:00pm	DINNER							
8:00pm – 8:45pm	EVENING DEVOTIONALS							
8:45pm – 11:00pm	PERSONAL REFLECTION / FREE TIME/LIGHTS OUT							

NOTE: Programs run from 10:00am-1:00pm/2:30pm -5:00pm. All clients are required to be in attendance.

SCHEDULE

Lighthouse Lekki offers 24 hours intensive care, Sunday through Friday. Our hours of operation for services are designed with you in mind.

HOURS OF OPERATION

Monday:	9 a.m. – 6 p.m.
Tuesday:	9 a.m. – 6 p.m.
Wednesday:	9 a.m. – 6 p.m.
Thursday:	9 a.m. – 6 p.m.
Friday:	9 a.m. – 6 p.m.
Saturday:	closed
Sunday:	closed.

Please note: These hours do not reflect group times that exceed 6 p.m. These hours only reflect the times we are available to sort out administrative issues.

Please Note: Assessments and individual sessions are conducted during normal operating hours; 10.00 am – 1.00 pm and 2.30 pm -5.00 pm.

CLIENT RIGHTS

- All clients have the right to be treated with dignity and respect.
- All clients have the right to confidentiality.
- All clients have the right to give written, informed consent to treatment.
- All clients have the right to be informed of all services available and the charges for those services.
- All clients have the right to be fully informed of the rules and regulations governing the conduct of clients.
- All clients have the right to adequate treatment.
- All clients have the right to retain and use their clothing and belongings, as permitted by the space, consistent with the program rules, unless this infringes upon the rights and safety of others
- All clients have the right to refuse treatment and to accept the consequences of this right.

CLIENT RESPONSIBILITIES

- Clients should aim to pursue a healthy sober lifestyle.
- Clients should aim to become knowledgeable about drugs/alcohol and their effects.
- Clients should aim to actively participate in treatment and remain open-minded.
- Clients should aim to co-operate with a mutually acceptable course of treatment.
- Clients should aim to effectively utilize resources being offered.

STAFF RESPONSIBILITIES

- Staff should perform Assessments of chemical dependency.
- Staff should formulate client treatment plans based on strengths, goals, and needs.
- Staff should provide informed consent on all treatment services.
- Staff should facilitate individual and group sessions.
- Staff should reinforce positive change for recovery.
- Staff should provide case by case management services for clients, that include interacting with community partners.
- Staff should remain educated on relevant and recent research on drug and alcohol-related issues.
- Staff should maintain confidentiality

CONFIDENTIALITY POLICY

Protecting your identity and information is our top priority. To ensure confidentiality, we ask all clients to sign a *Release of Information* to a specific individual and/or entity that you wish to have involved in your case.

Lighthouse Lekki will not release any information to a 3rd party without a signed release of information by the client.

We are also restricted from disclosing 3rd party information.

You may elect to revoke a signed *Release of Information* at any time either verbally or in writing.

These Confidentiality Guidelines:

- Prevent this centre from disclosing any identifiable information regarding a specific client, without their written consent.
- Prevent this centre from releasing 3rd party information
- Confirm a former and/or current client's enrollment in treatment services and/or his/her treatment status
- Require an entity and/or agency to have either a signed Release of Information or Court Order for our centre to release records.

Exceptions to Confidentiality Guidelines:

- Medical emergencies
- Imminent threats/acts of violence made against Centre staff and/or property
- Imminent threats/acts made to self and/or others
- Court Order
- Suspicion of child and/or elderly abuse and/or neglect

Note: Client confidentiality not only pertains to the centre and staff maintaining the privacy of all clients, but also the clients are bound by these strict confidentiality laws.

By signing below, you are agreeing that you understand and agree to the above policy and you are agreeing to exercise additional requirements, which are stated below:

- I agree not to disclose any information about other clients and/or family members. These include all former, current and future clients. _____ (client initials)
- I understand that all information disclosed in group therapy is strictly confidential to the members of that group, including each member identify. _____ (client initials)

(Client name) _____

(Client signature) _____ (Date) _____

I have presented and clearly explained the above policy and witness the consent of the above client agreeing to the Confidentiality Policy.

(Staff signature) _____ (Date) _____

COMPLAINT/GRIEVANCE POLICY

INFORMAL COMPLAINT

If you have an informal complaint, question, and/or concern, about your experience, atmosphere, and/or services, please address this issue with your program manager. Your manager will attempt to resolve the issue and/or address it with management. Usually, these complaints are verbal. An example of an informal complaint maybe something similar to the following: “It’s always hot in the group room, why is the AC not working?”

FORMAL COMPLAINT

If you wish to file a formal complaint, please put your complaint in writing and request to present your complaint to the program manager and/or medical director. If it is an issue that requires immediate attention, please make any available staff member aware of your concern(s). The program manager will ultimately decide if the concern needs to be handled immediately. Once in writing, your formal complaint will be sent to the medical director. The medical director will have up to 15 calendar days to conduct an inquiry/investigation, and you will be informed of his/her decision in writing. If the issue warrants an expedited response, the director will issue a decision within 48 hours.

GRIEVANCE /APPEAL

If you have received a decision and/or response to your formal complaint in writing from the medica director and you are still unsatisfied, you may appeal to the executive director.

Note: By exercising your right to file a complaint at any level, you are guaranteed to be protected from any recourse and/or repercussions by Lighthouse Lekki.

FINANCIAL AGREEMENT

Our pricing is comparable with other treatment providers in the area. Full payment must be received when services are rendered. You will receive a monthly statement each month with a balance if any. We accept the following forms of payment:

FORMS OF PAYMENT ACCEPTED

- Cash
- Bank Transfer
- Major credit cards (Visa, Master Card, etc)

FEE SCHEDULE FOR IN-HOUSE TREATMENT

- Consultation /Assessment fee: N
- 90 Days Residential rehab treatment monthly fee: N

By signing below, I have read and fully understand the financial agreement that is binding on me and Lighthouse Lekki. I am also agreeing to make payment promptly and punctually. I understand all consequences if I do not adhere to this agreement.

TO BE COMPLETED BY CLIENT

Name: _____

Signature: _____ Date: _____

Date of Birth: _____

ADDITIONAL INFORMATION; SECURITY, RULES, EXPECTATIONS AND GUIDELINES

SECURITY

The Centre will provide adequate security to ensure the safety of its client from outside interference , while also preventing unauthorised exit from the premises by clients, and ensuring a drug-free environment. The facility is surrounded by a fence, with a security post. Visitors are properly screened before being allowed into the facility. Searching for dangerous drugs and items are randomly conducted and documented.

RULES, EXPECTATIONS AND GUIDELINES

1. The consumption of alcohol or use of any unauthorized mind or mood-altering substance is strictly prohibited, especially within Lighthouse Lekki centre. Failure to comply with this rule will result in immediate discharge.
2. Any resident who behaves in a manner that would cause suspicion of the use of alcohol or mind or mood-altering substances or who is found to have any alcohol, drugs or paraphernalia related to drug use, is subject to discharge.
3. All prescription medications, over the counter drugs or vitamins of any kind, are to be deposited with the admitting nurse and will be dispensed as prescribed, on request.
4. All residents are required to take an active part in the program. Therefore, attendance at all centre meetings is mandatory.
5. Punctuality is required for all meals and meetings.
6. We will not allow tobacco use in program facilities or on grounds
7. Bedrooms are to be kept neat and tidy always. The wakeup call is between 5:45-6:00 AM. Beds must be made by 8:00 AM. All books, toiletries, face cloths, towels, personal items and clothing must be kept in their proper place. Residents retire at 11:00 PM. All lights out at 11:30 PM.
8. Residents are required to be neat in appearance always. Exercise apparel cannot be substituted for casual wear in the house.
9. No food OR beverages are allowed in any of the bedrooms. All food is to be consumed in the designated areas.
10. Residents maintain the cleanliness of their room and of the centre. Residents shall take all reasonable steps to ensure cleanliness, including, but not limited to: shutting off all lights, ensuring that refuse is properly disposed of. Common areas are to remain neat and clean. This includes common living rooms and bathrooms
11. The main kitchen area, fridge, cooker and microwave are off-limits to all residents except those who have been assigned kitchen duties.

12. Fire/emergency evacuation procedures; In the event of fire or emergency alarm, clients should leave the building via the closest exit and proceed directly to the front of the property. A staff member will call roll to make sure all are present. A staff member will notify you when it is safe to return to the building.
13. Client Conduct; Violence, threats of violence or verbal abuse will not be tolerated, and may result in immediate discharge from Lighthouse Lekki. You are expected to respect staff and fellow residents always during your stay at the facility.
14. Inspection of Personal Belongings; At the point of admission, the client's belongings will be inspected by a member of Lighthouse Lekki staff. Items removed will be locked in a secure location. Lighthouse Lekki reserves the right to inspect personal belongings and space provided to the client (i.e. bedroom) at any time

RESIDENTIAL AGREEMENT

Lighthouse Lekki rehabilitation services resident information booklet provides an overview of the service, and outlines house rules and other expectations of residents. This residential agreement is made in conjunction with the booklet to ensure residents are informed of their rights and responsibilities with the parameters of residency.

I, _____ agree with the following statements:

- I have been provided with a copy of the Lighthouse Lekki resident information booklet
- I have read and understood my rights and responsibilities along with the HOUSE RULES as outlined in the Lighthouse Lekki resident information booklet
- I agree to actively participate in all components of my rehabilitation programme as facilitated by the Lighthouse Lekki staff and health care professionals.
- I am willing to fulfil the service expectations as outlined in the Lighthouse Lekki resident information booklet.

Special Conditions (if required):

Resident's Declaration

I have read and understood the above guidelines and am willing to fulfil them and any other addition deemed necessary by Lighthouse Lekki management. I also understand that the rules are subject to change as deemed necessary by management.

Resident	Witness
Name:	Name:
	Position:
Signed:	Signed:
Date:	Date:

ADMISSION CHECKLIST

Name: _____

Staff to make sure the checklist has been ticked and followed up	Yes/No	Date
Medication:		
A prescription from Doctor:		
Residential Information Handbook:		
Residential Program Booklet		
Preferred contact in case of emergency (<i>ensure details of the contact have been documented</i>)		
Social care assessment booked		
A urine test on admission		
Search including body search		
Breath analyser		
Medical check-up booked		
Confidentiality		
Orientation and house rules		