

# The Recovery Center of Baton Rouge Patient Handbook

Welcome to The Recovery Center of Baton Rouge. We are honored you have chosen our program to begin your journey in recovery. Getting sober and going through treatment may be one of the most challenging experiences you'll ever encounter. Our program and staff will make every effort possible to help you make it through early recovery and achieve the goal of getting your life back.

Please use this handbook to familiarize yourself with the staff, facilities, expectations and services of The Recovery Center of Baton Rouge.

## **What to Expect**

Most people entering treatment have a hard time understanding exactly what it is they're getting themselves into. There's a good reason for this. Addiction is a very complex and all-encompassing illness. It affects nearly every aspect of our lives. It is one of the only illness known to medical science that tries to convince the person they don't have it!

Upon admission to the program, you will meet with a licensed counselor to develop a comprehensive plan identifying problems, goals, and solutions. Our staff will assist you in addressing the addiction and other identified goals through the following:

- Weekly Addiction Recovery Groups
- Weekly Family Therapy Group
- Weekly Psychotherapy Group
- Weekly Individual Therapy
- Assessment for Trauma and Unresolved Grief
- Assessment for co-occurring Mental Health Issues (e.g., Depression, Anxiety, Bipolar, Personality Disorders, etc.)
- Comprehensive Treatment Planning
- Optional Christian Counseling and Program
- Weekly and Random Urine Drug & Alcohol Screens
- Learning more about addiction, recovery, family dynamics, and underlying issues
- Beginning to work the 12 Steps
- Attendance of AA/NA or Faith-Based meetings (Patients are asked to attend 3 outside meetings per week)
- Relapse Prevention
- Introduction to the local 12-step &/or Faith-Based recovery community
- Learning how to problem solve and live life without the use of chemicals
- Referral for Individual Psychotherapy, Psychiatry/Medication Management, Psychological Testing, and Private Family Therapy.
- Comprehensive discharge plan

Simply stated, if you're sick and tired of the problems in your life (e.g., relationships, work, school, family, financial, legal, etc.), whether they're directly or indirectly related to your chemical use, recovery can and will offer you a solution. The catch is this: It's up to you to apply the solution and develop willingness to do whatever it takes to stay sober.

## **Program Location and Contact Information**

The Recovery Center of Baton Rouge, LLC  
1680 Lobdell Ave., Ste. E  
Baton Rouge, LA 70806

Office: (225) 927-7475  
Fax: (225) 927-7477

## **Program Schedule and Office Hours**

Monday	4:00pm to 5:00pm	(Optional Bible Study)
Monday	5:30pm to 7:45pm	(Addiction Recovery Group)
Tuesday	5:30pm to 7:30pm	(Psychotherapy Group)
Wednesday	5:30pm to 8:00pm	(Family Program with Patients)
Thursday	5:30pm to 7:45pm	(Addiction Recovery Group)

Weekly individual sessions are approximately 50 minutes in length and are scheduled with your primary therapist during business hours.

Office Hours: Monday – Thursday 9:00am to 5:00pm, Friday 9:00am to 1:00pm

## **Group Therapy**

Groups are a primary source of therapeutic process at The Recovery Center of Baton Rouge. It is through a supportive group process that patient's express feelings, work through both individual and group issues, and develop their problem solving skills.

### Addiction Recovery Group Description

This group is where patients discover the "nuts and bolts," or basic skills, required to maintain an ongoing and meaningful recovery. Common issues addressed include beginning to work the 12-steps dealing with substance cravings, Relapse Prevention, making life-style changes, spirituality, and integrating into AA/NA. Each patient's specific focus in the program is based solely on his or her current situation, past treatment experiences, length of abstinence from substance use, and personal goals. One size does not fit all when it comes to finding recovery.

### Family Group Description

The family program consists of a weekly group for patient's and family members. The focus of group is on understanding how addictions affect family systems, communication, boundaries, and coping with reactions and feelings towards the addiction and family.

### Group Psychotherapy Description

The weekly psychotherapy group is designed to allow patient's an opportunity to identify issues that underlie the addictive behavior, cope with difficult emotions, work on interpersonal skills, and to begin addressing unresolved issues that may frustrate attempts at recovery. This group is also a forum for patient's to address issues relating a dual diagnosis (e.g., Depression, Bipolar, Anxiety, etc.).

### Gender Specific Groups

One of the many unique characteristics that separate The Recovery Center from other addiction treatment programs is that all of our group therapy sessions are gender-specific. We believe that

an important component of successful addiction treatment is for the patient to become comfortable and connected in group therapy. Gender- specific groups are designed to enhance the patient's opportunity to form a healthy recovery support system and to address issues that may be more difficult to disclose in a co-ed group.

### Faith Based Treatment

The Recovery Center of Baton Rouge, LLC offers a Faith Based approach to drug and alcohol addiction treatment that utilizes Biblical Principles and Christian Counseling in addition to the 12-step recovery and psychotherapy program.

### Professionals Program

The Professionals Program at The Recovery Center offers a treatment experience that is designed to address the specific issues that are typically faced by professionals in early recovery. We understand that even people with successful careers can be derailed by a problem with drug addiction, alcoholism, or substance abuse. Our goal is to not only address issues specific to the addiction or substance abuse, but also assist the patient in re-entering their profession with-in the context of recovery.

### Group Structure

1. Patient's should be on time for scheduled groups in an appropriate and timely manner.
2. No eating or drinking during group.
3. Patient's may not lounge during group.
4. Patient's and staff should stick to the topic at hand, be respectful of the group member speaking without interrupting, practice active listening skills, and share feelings and thoughts appropriately. No "put downs" will be tolerated.
5. Patient's are encouraged to share solutions to the presented problems.
6. Use "I" statements. (I think, I feel).
7. Share only once on an issue to allow others time to share.
9. Confront peers out of care and concern. Avoid using confrontation as retaliation. Respond to feedback and confrontation with "Thank you."

### Confrontation

One of the hallmarks of addiction is the chemically dependent person's inability to see reality as reality is. We may not be aware of what's wrong with us. Part of recovery is developing the willingness to point out issues or areas in other patients that need attention. It is recommended that all confrontation take place in a group setting during the IOP program. Confrontation without care and concern is brutality.

### Dress Code

The easiest thing to change is our appearance – looking sober is the first step towards being sober. No clothing with alcohol, drug, or profane implications is allowed. All shoes must have backs on them and be worn with socks. All clothing must fit appropriately. For female patient's, no low-cut shirts, blouses, or skirts (must be knee length or longer) are allowed. For male patient's, no piercings are allowed on property.

### **Program Rules and Expectations**

Part of the recovery process is learning new ways of living. Program rules and expectations are designed to assist patients in the development of healthy lifestyles and relationships, and encourage the patient to take responsibility for his or her addiction and other issues. Some may seem like common sense. Others may seem too difficult to live by. We recognize that many chemically dependent persons have had great difficulty in “living by the rules.” We ask that you be willing to follow these expectations and we will assist you in finding a new way of life.

1. Use or possession of Mood-Altering Chemicals is grounds for staff intervention/discharge from the program. All patients are to live a chemically free lifestyle and are subject to random drug testing to insure the integrity of our program.
2. Physical violence or threats of physical violence, either verbal or non-verbal while a patient at The Recovery Center of Baton Rouge, LLC is grounds for staff intervention/discharge.
3. Trust is a vital part of the program. Stealing from patients, staff, other people, or places is grounds for staff intervention/discharge.
4. Intentionally destroying The Recovery Center of Baton Rouge, LLC or another patient's property will result in the person responsible replacing items destroyed or damaged.
5. Confidentiality regarding all other patients is crucial, so please do not discuss other patients unless they are present. As staff offices contain confidential information, no one is to be in offices without a staff member present. Again, trust is a vital part of the program.
6. To maintain a cohesive group environment and to receive the maximum benefit from treatment, all patients are required to attend all scheduled group and individual sessions.
7. In order to integrate into the local recovery community, all patients are required to attend a minimum of three (3) outside AA/NA meetings per week and obtain an AA/NA sponsor during the program. Patients may be asked to document/verify meeting attendance and having a sponsor.
8. Part of recovery is accountability. Help your peers become responsible for themselves by pointing out areas that need attention during group sessions.
9. Romantic relationships and/or sexual behavior are a distraction from the treatment process, and as such, are strongly discouraged. Romantic Relationships and/or sexual contact with

other group members is grounds for discharge. Sexual activity with a minor, under the age of 18, is illegal and grounds for discharge from the program.

10. Appropriate clothing will be worn to all group sessions. If you have questions about what is appropriate, please ask a staff member.
11. Smoking is allowed only in designated areas outside. Please, no smoking in front of the Oak Tree. Smoking inside the facility is grounds for staff intervention/discharge.
12. As part of making a lifestyle change sufficient for recovery, going into bars, night clubs, head shops, tattoo parlors, casinos, concerts, or parties is grounds for staff intervention.
13. Developing a new peer group is a crucial, and often difficult, requirement in recovery. As such, patients are encouraged to end relationships with “old using friends.”
14. Once you have become a patient, modifying your behavior is expected. The guidelines for change are stated: therefore manipulative behavior will be pointed-out and challenged.

The following examples are considered manipulative behaviors:

- A. Playing one staff member against another (splitting)
- B. Stating “I didn’t understand” or “I didn’t know” after breaking a rule. (If you don’t understand or know about something ask a group member or staff member.)
- C. Using AA and “Program” vocabulary to hide and/or manipulate.
- D. Seeking support from other group members for negative attitudes or behavior.
- E. Using “old news” (i.e., something you’ve already dealt with) as camouflage for avoiding present problems.

Patients who are unwilling or unable to follow the above Rules and Expectations will:

1. Meet with the clinical team to discuss treatment planning options that might help them make appropriate change; or
2. Be discharged and referred to a higher level of care (i.e., partial hospitalization, residential, etc.).

### **Staff/Treatment Team**

Yushen Lee, MD  
Rudy L. Troyer, LCSW, LAC  
Marcia J. Bannister, LAC, CCS,  
David “Fritz” Vogt, LCSW  
Garrett Cheramie, CIT  
Gregg Tiritilli BA, RAC  
Jacob Goldberg BSW, CAC, CCS

Medical Director  
CEO/Administrator  
Executive & Clinical Director  
Family Therapist  
Admissions Coordinator  
Addictions Counselor  
Addictions Counselor

### **The 12 Steps of Alcoholics Anonymous**

1. We admitted we were powerless over alcohol – that our lives had become unmanageable.
2. Came to believe in a power greater than ourselves that could restore us to sanity.
3. Made a decision to turn our will and our lives over to the care of God, *as we understood Him*.
4. Made a searching and fearless moral inventory of ourselves.
5. Admitted to God, ourselves, and another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove all these defects of character.
7. Humbly asked Him to remove our shortcomings.
8. Made a list of all persons we had harmed and became willing to make amends to them all.
9. Made direct amends to such people wherever possible, except when to do so would injure them or others.
10. Continued to take personal inventory, and when we were wrong promptly admitted it.
11. Continued through prayer and meditation to improve our conscience contact with God, *as we understood Him*, praying only for knowledge of His will for us and the power to carry that out.
12. Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs.

### **A working definition of addiction:**

The continued use of mood-altering chemicals (including alcohol) despite harmful consequences related to the use.

Advantages of this definition:

1. It is problem-based. It focuses on the effects the drug has on the life of the patient and other people in the patient's life.
2. It is a "great leveler" in that it does not take into account the type of drug, amount of drug, or frequency of use. These factors are not a working part of this definition, but will become relevant in the person's treatment program.
3. Since our focus is problem-based, we are not as concerned about labels such as "alcoholic," "drug-addict," "coke head," etc.
4. A problem-centered approach interferes with denial by making a direct connection between substance use and patient /family problems.

### **The Disease Process:**

What are the reasons for calling addiction a disease?

1. The World Health Organization defines a disease as a "pathological condition resulting in impairment in the mental or physical functioning of an individual." Under this definition, addiction certainly qualifies.
2. The main reason for calling it a disease lies in the four of the disorder's characteristics: primary, chronic, progressive, and fatal.

- a. **Primary** means it isn't the symptom of some other disorder. Addiction is a disorder in and of itself.
- b. **Chronic** means that once you have it, you'll always have it (although life long recovery is possible).
- c. **Progressive** that the symptoms tend to get worse over time.
- d. **Fatal** means that addiction can kill the person through accident, overdose, withdrawal symptoms, suicide, homicide, or biological deterioration.

### **What are the clinical advantages for using the disease process?**

- 1) The disease process- which is taught to patients and families in most treatment centers and is endorsed by Alcoholics Anonymous and the American Medical Association- reduces the shame and stigma associated with the disorder.
- 2) If the individual and family see addiction as a disease they are less likely to view it as weakness of character, personality flaw, irresponsibility, immaturity, or moral failing.
- 3) "Disease" implies that there is a treatment for it.
- 4) "Disease" implies that the disorder is serious and is beyond the will power of the user.
- 5) "Disease" gives the patient and family something to manage. Like the disease of diabetes or hypertension, chemical addictions can be successfully managed, but not cured. The main form of management for chemical dependency is a program of abstinence and recovery.

### **You may experience some of the following which may hinder your treatment:**

1. You may experience a temptation to present a different part of you or create a front to protect you from the treatment experience.
2. You may focus on what is wrong with the other patients, staff, the program, family matters, family finances, or other things rather than dealing with yourself. You may shift blame to the above people/situations for the problems you are experiencing in your life.
3. You may think/feel that your feelings of anger and hurt, feelings of being "out of control" or scared are more intensified than before you began treatment.
4. You may realize that you have created some complex coping mechanisms for survival that may now be hindering your recovery.
5. You may keep secrets or avoid talking about how you feel, your past, or your agenda about treatment.
6. You may resist attending and participating in treatment, i.e., arrive late, stay silent during group, or not complete written assignments from your therapist.

7. You may tell yourself that what happened to you was not as bad and that other people's needs are more important.

We hope you discover a new perspective of self worth with the realization that you are precious simply because you are!