



Kitsap Recovery Center
A Program of Kitsap County Department of Personnel and Human Services

INPATIENT TREATMENT GUIDE

Physical Address: 661 Taylor St Port Orchard, WA 98366

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Kitsap Recovery Center

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Kitsap Recovery Center Opening Statement

Read at the beginning of Step Study every day

You have come to us stating you are willing to fully participate in this treatment opportunity. You have stated your chemical use is a problem and that you need to change.

Changing your behavior is not something that is done to you, it is something you do for yourself. This is the foundation of the Kitsap Recovery treatment experience. One never does anything that one does not want to do. We will not force you to do anything. Changes are only valid when they come from within.

You'll be very uncomfortable here. You will often find this program hard, irritating, stupid and unsatisfactory. You will become disgusted often and want to quit. You'll be told to do things you do not want to do. You will always be expected to search for the truth and be receptive to listening to the truth. You will discover that truth is not always easy to find and is often unpleasant when you find it.

Our concept of meaningful change is not merely to stop using. It is rather to replace and change behaviors that were instrumental in your self-destructive behavior. Before these can be replaced, they must be examined.

This examination will extend to your beliefs, your emotions, and your behaviors. If you are not sure that you want to examine yourself completely, you may want to reconsider your reason for entering treatment and determine if this treatment program will meet your needs.



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Rules and Expectations

**Not all rules are listed. See staff if you have any questions or for further clarification.*



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KRC Inpatient Rules and Expectations

Program

1. All patients are subject to random urinalysis and/or breathalyzer at any time.
2. All patients **MUST** maintain absolute confidentiality of ALL patients and guests.
 - This means no sharing information with friends, families, or anyone about who you see here and what you hear here.
3. All patients are required to attend and participate in all scheduled activities.
 - a. Arrive on time, be prepared, and give complete attention.
 - b. Remain in all scheduled activities for the full allotted time.
 - c. Attend to restroom visits, drinking fountain, retrieve books, etc... prior to and after scheduled activities.
 - d. Remain awake during KRC activities. Standing or sitting upright is encouraged; slouching encourages sleeping.
4. KRC and staff are not responsible for items left unattended.
5. Break times are determined by the speaker/facilitator of each workshop/lecture.
6. All patients must remain in authorized areas throughout the treatment stay.
7. **DO NOT** lend your property, take, sell, barter, borrow, or use another patient's property. This includes, but is not limited to, tobacco products, books, clothing, and all other personal items.
8. **PATIENTS SHALL NOT HAVE PHYSICAL CONTACT WITH OTHER INDIVIDUALS.** This includes hugging, touching, grooming activities, etc...
9. Patients are prohibited from spending excessive time or pairing with the opposite gender. If you need any clarity on boundaries pertaining to this rule, please speak with your counselor or TA staff.
10. Clippers are not allowed.
11. Patients will not be disruptive (loud, argumentative, threatening, swearing, singing, rapping, whistling, etc.) while in the facility. Noise levels must be kept to a minimum, especially near withdrawal management or in the dining area.
12. Patients shall **NOT** gamble. Playing games/cards in patient rooms is prohibited. Games may be played in the dayroom room. See TA staff to check out games on



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Friday at 18:00. All games and cards must be returned by lights out on Sunday by 22:00.

13. Patients shall be involved in the development of their treatment plan, goals, and continuing care plan. This includes, but not limited to, participation during group therapy sessions, lectures, workshops, individual sessions, and daily meetings.
14. Patients will treat their peers and staff in a respectful manner and staff shall be respectful of patients in return.
15. Regardless of other behaviors, bullying, sexual, or racial harassment, and any other form of inappropriate communication/conduct **WILL NOT BE TOLERATED.**
16. Patients shall respect and adhere to...
 - a. No cross talking during lectures, groups, and meetings.
 - b. No working on homework during lectures, groups, or meetings.
 - c. No talking, sleeping, or wandering around during video therapies.
 - d. No feet on the furniture.
 - e. All four legs of the chairs must always remain on the floor.
17. Patients shall abstain from the use of mind-altering substances. Patients shall not sell, deliver, or store mind-altering substances within the facility or grounds.
18. Wake up time is at 06:00. No exceptions. Patients must have beds made and are not allowed to re-enter their beds to lay down. Laying down in bed during unauthorized times can result in discharge from the program.
19. When off campus for 12-step meetings all inpatient rules apply, in addition you are to sit together, 1 cup of coffee, no inviting people to meet at the meetings, when needing to step out for a restroom break let the staff know and return promptly.
20. Patients will not be excused from treatment activities without meeting the requirements outlined in Medical Excuse from Clinical Treatment Activities.
 - a. Interrupted participation may, depending on the severity of the medical condition, result in a medical discharge or a treatment extension.



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- b. Any patients requesting a Medical Excuse from Clinical Treatment Activities will remain in their room and at rest. They are not allowed to participate in breaks and/or participate in other recreational activities.

Dress

1. Patients will be appropriately dressed in all public places and are always to be fully dressed.
 - a. No revealing clothing shall be worn. Patients' clothing shall cover all under clothing and private areas of the body.
 - b. No sleeveless, spaghetti straps, belly shirts, short shorts (all shorts must be knee length), sagging pants, off the shoulder shirts, yoga pants, tank tops, cleavage, and no leggings (Unless shirt is worn that covers backside.).
 - c. No gang related attire, or attire that could be perceived as gang related.
 - i. ALL BANDANAS ARE BANNED.
 - d. No clothing displaying and/or advertising alcohol, drugs, sex, profanity, or violence. No clothes with writing in private areas.
 - e. Clothing must meet all health and sanitary regulations and requirements.
 - f. Socks are required with all sandals, flip flops, or any open-toed shoes.
 - g. Patients must be fully clothed with shoes while in the community.
 - h. No caps, hoods, or any other head coverings (Unless for religious purposes) or sunglasses may be worn inside of the facility.
2. All outside visitors will also be required to comply with the above dress code.
3. **Covid-19 protocols require that all patients, visitors, and staff wear a mask in all community areas within the building. You may take off your mask during meals and in your assigned room. Failure to adhere to this requirement will result in immediate discharge.**

Health

1. Patients are expected to maintain personal hygiene.
 - a. Use the shower facilities regularly. If hygiene items are needed, please ask staff.
 - b. Wash clothing at least once a week in the laundry facility.



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- c. Change bed and bath linens each week. Linen exchange will be conducted weekly. All patients are required to exchange a set of sheets and towels for new ones.
 - d. Patients shall not use ANY facility equipment that is labeled and/or designated for staff only.
2. Patients shall fully participate in group clean-up and maintenance assignments. Patients shall stay with their group until clean-up is completed.
3. Prior to beginning the treatment day and no later than 08:00, patients shall make their beds, straighten up personal belongings and empty trash receptacles. No returning to bed unless it is during a designated time.
4. Smoking will only be permitted in designated areas that are located a minimum 50 feet away from any doors and/or windows to the facility. Tobacco products of any kind will not be used in any KRC building. Cigarette butts will be placed in appropriate disposal receptacle. Sharing tobacco products is **STRICTLY PROHIBITED**. This includes giving other patients tobacco products, smoking a shared cigarette with another patient, or allowing a patient to finish your already lit cigarette.
5. The smoking is up the stairs to the right when you exit. No smoking is allowed at the bottom of the stairs unless you need accommodation. When both males and females are out on a smoke break, they are to remain separate and not talk to one another. Patients are not allowed to exit the gated area; they are not allowed to have people drop things off directly to them outside. KRC patients are not allowed to talk to people that are not part of the program outside of the fence. Leaving the fenced area, receiving items, or talking to people walking by will be grounds for immediate termination from the program.
6. No spitting on KRC grounds, even outside when on break.
7. All patients will participate in fire drills and become familiar with the posted fire and disaster plans.
8. All patients shall attend meals provided three times per day.
9. All patients will remain in their assigned rooms from lights out to wake up. Except for emergencies such as fire, fire drills, or medical emergencies. Exceptions are made for those using the restroom.



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10. **Physical, sexual, and romantic interactions or communications will not be tolerated.**
11. **Physical and/or sexual interaction with significant others during KRC family weekend visitation will not be tolerated.** Exceptions made allowing for brief hugs when saying hello or goodbye.
12. Do not block the doors with towels or any other objects.
13. Do not place towels, sheets, or other materials over light fixtures. This is a fire hazard and is grounds for termination. No forts covering your bunks is allowed, taking, and using a mattress from another bunk is not allowed.
14. The KRC medical staff must authorize all prescription medication.
 - a. Medications prescribed and OTC will be kept secured in the Med Room.
 - b. All patients must attend and follow all the rules regarding Med Call.
15. Food products and all liquids (excluding water in a bottle with a lid) are only allowed in the dining room.
 - a. Do not buy soda or snacks right before groups or meetings. They should only be purchased when you have the time to consume them.
 - b. All soda and snacks must be consumed right away. There is no saving of food to consume later.

Telephone

Upon intake you will be asked if you need to make a personal phone call to let someone know you are safe and to ask them to bring you items like clothes, and tobacco. Once a week you will be allowed to have a personal phone call with your counselor during your individual session.

Oxford phone calls are typically made in the evening, if you have a scheduled Oxford interview you must let your counselor know the date and time your counselor will enter a task into the electronic health records so that treatment assistants can verify you are allowed to use the phone. If there is no task entered into the system, the treatment assistant will not allow you to have the phone. You must use the phone within the eyesight of the treatment assistant. You are not allowed to use the phone for any other



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purpose. Patients are not to harass the treatment assistant to use the phone they are not authorized to give permission.

Phone calls for other official business may be allowed, for instance if we need you to call your insurance to activate. The same rules apply you must be within sight and earshot of the treatment assistant.

Unauthorized use of the phone may result in discharge from services.

Personal

1. KRC is not responsible for lost, stolen or damaged items.
2. All luggage will be searched upon entry to the treatment program.
 - a. Unauthorized items will remain secured by KRC staff until patient discharges.
 - b. Any drugs or alcohol will be destroyed. Weapons will be turned over to the Kitsap County Sheriff's office.
3. Personal reading materials, games, cards, etc... are not allowed during stay.
4. Personal electronics are not permitted during treatment stay.
5. If a patient arrives in a vehicle, the keys must be turned over to KRC staff and the vehicle will remain off limits during treatment stay.
6. Patients are encouraged to turn in extra cash/valuables to the TA station for safekeeping.
7. No musical instruments.

Visiting *(Weekend Family Program is not available currently due to Covid-19)*

1. If a patient's family and/or significant other is able participate in the KRC weekend program, they must not be under the influence of alcohol or drugs.
2. All visitors must be over the age of 10.
3. Prior KRC patients must have a minimum of 30 days since graduation to participate in weekend visitation.

Mail and Packages



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1. Mail and phone messages will be distributed once Monday-Friday, between 17:00-20:00.
 - a. Phone messages will be checked weekends as well.
2. Patients may receive care packages from family and/or friends. The drop off times are Monday-Friday 08:00-16:30.
 - a. FOOD PRODUCTS ARE NOT ALLOWED TO BE DELIVERED OR DROPPED OFF.
 - i. The only exception that will be made is for a patient with dietary needs due to allergies or medical conditions.
 - b. Staff will determine the appropriateness of delivered items.

Termination

The following will be grounds for immediate dismissal.

1. Verbal and/or physical threats and/or attacks. Racial, cultural, and/or sexual discrimination or harassment towards others.
2. Any inappropriate relations between ANY patient's, *regardless* of gender, are strictly forbidden. Some behaviors and actions that will be perceived as "pairing" are...
 - a. Sexual interactions
 - b. Physical contact, including kissing, touching, styling hair, etc...
 - c. Romanticizing
 - d. Note passing.
3. Possession, use, or sharing of any unauthorized substance. Including any medications, alcohol, and/or other illicit substances.
4. Breaking confidentiality of other patients and family members, including reporting the presence of any other patients to any person, patient or other.
5. The lack of participation in program activities. All activities are mandatory. This includes, but is not limited to, groups, lectures, individual counseling sessions, gym, homework assignments, meals, and all other scheduled activities.
 - a. Patients may be excused from participating in specific activities with permission from their counselor.



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6. Entering other patients' rooms that are not your assigned room.
7. Entering any unauthorized area without permission, including the opposite gender's dayroom.
8. Contact and/or other interactions with individuals outside the inpatient treatment program are NOT permitted. Unless previously approved by staff.
 - a. Speaking, contacting, or passing notes with ANY person inside or outside of the physical boundaries (the black fence) for any reason, whether the person is known to the patient or not.
 - b. Willful destruction of KRC property or property belonging to another patient.
 - c. Weapons or any items that may be perceived as a weapon.
9. Tampering with security and/or the fire system.
10. Unauthorized leaving of the facility.
11. Use of tobacco or nicotine products within the building except for alternative nicotine substitutes dispensed by KRC staff.
12. Use of vaping units or chewing tobacco.
13. Violating patient leave policy while at an appointment.
 - a. If you leave the facility to go to appointments, interviews, court, or for any other reason; all KRC rules still apply. **DO NOT LEAVE THE PREMISES FOR ANY REASON.**
 - b. Do not purchase any food or drink items.
 - c. Do not make any unauthorized phone calls.
 - d. Do not talk with, meet up, or leave with any people.
14. Food or drink products that are found in the patient room, excluding water bottles.
15. Possession of and/or playing any games outside of designated relaxation hours.
 - a. Any patient may check out games or cards from TA staff from Friday at 18:00 to Sunday at 22:00.



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**KRC IS NOT RESPONSIBLE FOR LUGGAGE, TRANSPORTAION OR FUNDING
OF PATIENTS IF TERMINIATED FOR ANY OF THE ABOVE REASONS.
PATIENTS WILL BE EXPECTED TO DEPART THE FACILITY WITHIN 10
MINUTES WHEN BEING DIRECTED BY STAFF TO DEPART.**

**THIS IS NOT A COMPLETE LIST OF ALL KRC RULES. ALL
RULES AND EXPECTATIONS ARE SUBJECT TO CHANGE.**



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Thought for the Day 08:00-08:30

During daily Thought for the Day sessions, a senior peer will check out the book titled, "Just for Today" or the book, "Courage to Change". These books are located at the TA station. Immediately after completion of Thought for the Day, the book will be returned to the TA station.

Senior peers will alternate facilitating Thought for the Day.

Everyone will then have an opportunity to share in relation to the reading.

A senior peer will close each Thought for the Day by reading a quote at the bottom of the page of that day's date. This will then be followed with a moment of silence.

Thought for the Day will NOT be used for:

1. Advice giving
2. Rescuing
3. Problem Solving
4. Sharing life stories
5. Or any other issues and/or topics unrelated to the subject.

IF IT IS NOT IN THESE INSTRUCTIONS, DON'T DO IT! (Keep it simple!)



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Daily Step-Study Meetings 18:00-18:30

My name is: _____ and I am an addict.

We meet to practice the skills taught at Kitsap Recovery Center while presenting our Personal Recovery Plans (PRP).

Senior peers will rotate patient presentations. The patient's remaining time in treatment will be considered. Presentations will be in the following order.

1. PRP with counselor's approval.
2. If time permits after these items are shared, then a senior peer will
 - a. Read one of the following texts from either the Big Book, 12x12, or NA text:
 - i. Step One
 - ii. Step Two
 - iii. Step Three
 - b. If time permits, patients may be allowed to share about the reading.

We ask that all members adhere to the following guidelines:

1. Respect the individual who is sharing by *not engaging in cross talk*.
This will in turn develop increased trust within the group.
- 2. Stay in the meeting from start to finish.**
3. Use "I" statements.



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4. Listen by staying focused on the speaker/peer sharing.

We will not use this meeting or any gatherings for:

1. Advice giving
2. Rescuing
3. Problem solving
4. "War" stories
5. Or any other issues and/or topics unrelated to the subject.

If we have a desire to provide feedback to those individuals that shared during the meeting, we may do so after the meeting and/or group.

Having the support of the group enhances the opportunity for recovery and helps members feel a part of the fellowship which allows us to do together what we could not do alone.

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House Keeping Expectations

While residing at Kitsap Recovery Center, you will be expected to participate in the care and cleaning of your environment.

1. Your bed must be made, and the surrounding area picked up no later than 08:00.
2. Your assigned restroom will be your responsibility to keep clean.
3. Your personal items should not be left on chairs, beds, and/or floors.
4. Clean tobacco mess instantly if rolling cigarettes.
5. All trash will be placed in provided receptacles and emptied prior to the beginning of daily routine in the morning and before lights out in the evening.
6. No food or beverages are allowed outside of the dining room area. Exception is made for water bottles. Only water is allowed in water bottles.
 - a. Please write your name and room number on your bottle and reuse.
 - b. Each patient will be given one free bottle. If lost or thrown away, you may drink the water in dining room, or purchase a new water bottle from vending machine.
 - c. NO DISHES MAY LEAVE THE DINING ROOM.
7. No pictures or any other items may be placed on your walls.
8. It is strongly recommended that you use your designated laundry facility to wash your clothing upon admission as soon as you are able.
9. Laundry soap is provided. If there is no laundry soap available in the laundry facility, please ask KRC staff for more.
10. All patients are expected to participate in all assigned cleaning chores throughout the facility during designated cleaning times.
 - a. Daily deep cleaning at 13:30.
 - b. After meal chores. Chores are assigned and the chore chart is available in the dining room. The chore list may be changed at any time per KRC kitchen staff.
11. Smoking is only permitted in one designated area outside the facility. No smoking on stairs or in the doorway. Cigarettes must be completely put out and



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butts placed in provided receptacle. No chewing tobacco, vaping products, or any other tobacco products are allowed on KRC premises.

12. On the day of your graduation, vacate your room no earlier than 06:00 or later than 07:30, unless altered check out time approved by your counselor. Return all bed linens and towels to the laundry facility. Bring luggage and other personal items to the TA station to complete the final discharge steps. Return KRC property to TA staff at the TA station.

If asked to leave for a rule violation you need to vacate the facility within 10 minutes.



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Senior Peer Duties and Responsibilities

1. Senior peers are selected as role models of a patient invested in treatment and with a strong desire to establish a lifestyle of abstinence.
2. Gender specific daily morning meditation/Thought for the Day.
3. Co-lead the gender specific peer meeting (step-study) every evening.
 - a. *See Daily Step-Study Meeting guidelines*
4. Welcome new patients and give basic orientation.
 - a. Review different groups, color and gender.
 - b. Identify the location of group rooms.
 - c. Identify the location of the learning center and dining room.
 - d. Review chore expectations.
 - i. Show new patient where the chore chart is located.
 - e. Review telephone policy.
 - f. Review Inpatient Treatment Guide.**
 - g. Provide new patients with Powerless packets.
 - h. Show the new patient where envelopes and paper are located.
 - i. Explain where and when to turn in homework.
5. Senior peer leaders are to turn in group's homework to your Primary Counselor by 08:45 each day.
6. Senior peer is to pick up and distribute homework before step-study each day as per counselor's instructions.
7. It is NOT the peer leader's responsibility to:
 - a. Fix, force, or be responsible for your group leaders.
 - b. Counsel and/or discipline your peers.
 - c. Protect or cover up for your peer members.

It IS your responsibility to:

- a. Model behaviors that suggest treatment focused and desire for life of recovery.
- b. Hold your peer members responsible.
- c. Review KRC rules and expectations.



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Kitsap Recovery Center Staff

Clinical/Program Manager

Marche Ward

Clinical Supervisor

Anthony H.

Inpatient Doctor

T.A. Supervisor

Brian B.

Counselors:

Michael L. (Blue)

Chelise R. (Green)

Cassidy S. (Support)

Elizabeth Y. (Withdrawal Management)

T.A. Staff:

Dave

Jacob

Tiana

John

Stuart

G'Anna

Lisa

Darlene

Scott

Ashlynnne

Katrina K.

Front Office

Julie S.

Housekeeping/Kitchen Staff:

Carmen C.

Limar K.



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INPATIENT WEEKDAY WEEKEND SCHEDULE



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Time	Monday	Tuesday	Wednesday	Thursday	Friday
6:00AM	Wake-Up	Wake-Up	Wake-Up	Wake-Up	Wake-Up
6:15AM	Roll Call	Roll Call	Roll Call	Roll Call	Roll Call
6:30-7:30AM	Breakfast/Cleanup	Breakfast/Cleanup	Breakfast/Cleanup	Breakfast/Cleanup	Breakfast/Cleanup
7:30-8:00AM	Med call/Room Clean up	Med call/Room Clean up	Med call/Room Clean up	Med call/Room Clean up	Med call/Room Clean up
8:00-8:30AM	Thought for the day	Thought for the day	Thought for the day	Thought for the day	Thought for the day
9:00-10:00AM	Gymnasium	Horse rescue/Art therapy (9:30AM)	Personal Time	Personal time	Gymnasium
10:30-11:45AM	Process Group	Art therapy	Process Group	Process Group	Process Group
12:00-1:00PM	Lunch/clean up	Lunch/clean up	Lunch/clean up	Lunch/clean up	Lunch/clean up
1:00-1:30PM	Med Call	Med Call	Med Call	Med Call	Med Call
1:30-2:00PM	Deep Clean	Deep Clean	Deep Clean	Deep Clean	Deep Clean
2:00-4:00PM	Educational discussion/Lecture	Educational discussion/Lecture (2:30)	Skookum/Housing Solutions/Oxford	Educational discussion/Lecture	Educational discussion/Lecture
4:30-6:00PM	Dinner/cleanup/personal time	Dinner/cleanup/personal time	Dinner/cleanup/personal time	Dinner/cleanup/personal time	Dinner/cleanup/personal time
6:00-6:30PM	Step Study	Step Study	Step Study	Step Study	Step Study
7:00-8:00PM	12 Step Meeting	12 Step Meeting	12 Step Meeting	12 Step Meeting	12 Step Meeting
8:00-9:00PM	Med Call/Snack	Med Call/Snack	Med Call/Snack	Med Call/Snack	Med Call/Snack
9:00-10:00PM	Personal time	Personal time	Personal time	Personal time	Movie/Personal time Males-Learning room Females- Fem room
10:00PM	Lights out	Lights out	Lights out	Lights out	11:00 PM Lights out

Time	Saturday	Time	Sunday
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6:00-6:15AM	Wake-Up	6:00-6:15AM	Wake-Up
6:15-6:30AM	Roll Call	6:15-6:30AM	Roll Call
6:30-7:30AM	Breakfast/Clean up	6:30-7:30AM	Breakfast/Clean up
7:30-8:00AM	Med call/Room Cleanup	7:30-8:00AM	Med call/Room Cleanup
8:00-8:15AM	Thought for the Day	8:00-8:15AM	Thought for the Day
9:00-10:00AM	Gymnasium	9:00-10:00AM	Spirituality
10:30-11:45AM	Process Group	10:30-11:45AM	Process Group
12:00-1:00PM	Lunch and clean up	12:00-1:00PM	Lunch and clean up
1:00-1:30PM	Med Call	1:00-1:30PM	Med Call
1:30-3:00PM	Educational discussion/ Lecture	1:30-3:00PM	Educational discussion/Lecture
3:15-3:45PM 3:45-4:30PM	Coffee Social Personal time	3:15-3:45PM 3:45-4:30PM	Coffee Social Personal time
4:30-6:00PM	Dinner/cleanup/personal time	4:30-6:00PM	Dinner/cleanup/personal time
6:00-6:30PM	Step Study	6:00-6:30PM	Step Study
7:00-8:00PM	12 Step Meeting	7:00-8:00PM	12 Step Meeting
8:00-9:00PM	Med Call/Snack	8:00-9:00PM	Med Call/Snack
9:00-11:00PM	Movie/Personal time Males-Learning Center Females- Female day room	9:00-10:00PM	Personal time
11:00PM- 6:00AM	Lights out	10:00PM- 6:00AM	Lights out

Counselor Disclosure Information



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The purpose of the disclosure law regulating counselors is to:

- a. provide protection for public health and safety; and
- b. to empower the client by providing a complaint process against counselors who commit acts of unprofessional conduct.

You are not liable for any fees or charges for services rendered prior to receipt of this disclosure statement.

Clients/patients have the right to choose counselors/treatment programs that best suit their needs and purposes.

The extent of patient/client confidentiality is identified in RCW 18.19.180(I) through (6); however, Federal confidentiality regulations (42 CFR Part 2) supersede every item in RCW 18.19, and of 45 CFR Parts 160 and 164 Health Insurance Portability Accountability Act of 1996 ("HIPAA").

The information disclosed by patients/clients participating in chemical dependency treatment is protected by Federal confidentiality rules (42 CFR part 2)., and (45 CFR Parts 160 and 165). They prohibit Kitsap Recovery Center employees from releasing information unless it is expressly permitted by written consent of the patient to whom it pertains, or otherwise permitted by the 42 CFR Part 2, and 45 CFR Parts 160 and 164). A general authorization for the release of medical or other information is NOT sufficient for this purpose. The Federal rules restrict any use of this information to criminally investigate or prosecute any alcohol or drug abuse patient/client.

REPORTING SUSPECTED CHILD ABUSE/ELDER ABUSE

Any cases of suspected child abuse or actual child abuse and/or neglect, or abuse of any elder or vulnerable person shall be reported per State requirements. Federal confidentiality is waived in these instances. Federal laws and regulations do not protect confidentiality for suspected child, elder or vulnerable adult abuse per 42 CFR, Part 2.12 (c) (6).

UNPROFESSIONAL CONDUCT

Counselors are subject to discipline by the Department of Health. Cause for disciplinary action for unprofessional conduct is found in RCW 18.130.180 and includes the following:

- False, fraudulent or misleading advertising.



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- The commission of any act involving moral turpitude, dishonesty, or corruption relating to the practice of counseling.
- Incompetence, negligence, or malpractice resulting in injury or unreasonable risk of harm to the client.
- Continuing to practice when a certification or registration has been suspended, revoked or restricted by the Secretary of the Department of Health.
- The possession, use, prescription for use, or distribution of controlled substances or legend drugs in any way except for legitimate therapeutic purposes.
- Violation of any Federal or State laws or rules and rules of any health agency
- Aiding or abetting an unregistered or uncertified person to engage in the practice of counseling, unless exempt by law.
- Misrepresentation or fraud in any aspect of counseling.
- Counseling involving contact with the public while suffering from a contagious or infectious disease involving serious risk to the public health.
- Promotion for personal gain of any unnecessary or useless drug, device, treatment, procedure, or service.
- The procuring, aiding, or abetting in procuring a criminal abortion.
- The offering or undertaking or agreeing to cure by secret method, procedure, or treatment. The willful betrayal of a counselor/client privilege as recognized by law.
- Violation of the rebating laws which includes payment for referral of clients
- Interference with an investigation and/or disciplinary proceedings by the misrepresentation of facts, use of threats or harassment against clients or witnesses to prevent them from providing evidence
- Current misuse of alcohol, controlled substances, or legend drugs
- Abuse of a client or sexual contact with a client
- Failure to cooperate with disciplining authority(ies)
- Failure to comply with an order and/or stipulation issued by the disciplining authority



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- Failure to adequately supervise auxiliary staff to the extent that the patient's health and/or safety are at risk.
- Willful betrayal of a practitioner-patient privilege as recognized by law

Anyone who has any questions or wishing to file a complaint should write or call:

Department of Health
Professional Licensing Services Division
Counselor Section
Post Box Office 47869
Olympia, Washington 98504-7869
(800) 633-6828

OR

Department of Health
Residential Care Services
PO Box 47852
Olympia, WA 98504-7452
Complaint hotline: 1-800-633-6828

Salish Behavioral Health Organization
614 Division Street – MS23
Port Orchard, WA 98366-4676
360-337-7050 or toll-free 800-525-5637

OR

Bridges Ombuds Services
Serving Clallam, Jefferson, Kitsap
Counties
360-692-1582 or toll free 888-377-8174

AGENCY NAME and COUNSELOR ADDRESS/TELEPHONE

Kitsap Recovery Center
661 Taylor St.
Port Orchard, WA 98366
(360) 337-4625

All counselors employed by Kitsap Recovery Center are required to meet the minimum education, training, and experience requirements of a chemical dependency counselor as defined by DSHS, DBHR, in WAC 246-811

Counselor	Registration Number	Type of Counseling Provided (Methods are 1:1, Group, Education.)	Meets WAC Req. for SUDP (WAC 246-811)
Marche Ward, SUDP	CP00003683	Substance Use Disorder	YES
G'Anna Gordy, SUDPT	CO61470554	Substance Use Disorder	YES
Anthony Hanley, SUDP	CP00006345	Substance Use Disorder	YES



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Douglas Michael Lawrence, SUDP	CP60866603	Substance Use Disorder	YES
Bruce Davis, SUDP	CP61097177	Substance Use Disorder	YES
Cassidy Smith, SUDPT	CO61305813	Substance Use Disorder	YES
Rachel Murray, SUDP	CP61614347	Substance Use Disorder	YES
James Hoag Jr., SUDP	CP60534205	Substance Use Disorder	YES
Chelise Ramey, SUDP	CP61563018	Substance Use Disorder	YES
Elizabeth Yeager, SUDPT	CO61253880	Substance Use Disorder	YES
Jesse Lyons, SUDP	CP61648364	Substance Use Disorder	YES
Jessica Wadding, SUDPT	CO61363650	Substance Use Disorder	YES
Katrina Kane, SUDPT	CO61411589	Substance Use Disorder	YES
Stuart Hanson, SUDPT	CO61202493	Substance Use Disorder	YES

Kitsap Recovery Center uses evidence-based practices including but not limited to Motivational Interviewing, Rational Emotive Behavioral Therapy, Cognitive Behavioral Therapy, Strengths Based/Person Centered applications, and Moral Recognition Therapy as they relate to substance use disorder treatment services. A Substance Use Disorder Professional Certification is not a credential to allow diagnosis of mental disorders and does not allow the SUDP/T to conduct psychotherapy. The rules for certification under the Revised Code of Washington or The Washington Administrative Code do not include a recognition of any practice standards, nor necessarily imply the effectiveness of any treatment.

SUDP/T's will work under direct supervision of the Clinical Supervisor and Clinical Manager. KRC uses Performance Improvement plans with clinical staff to maintain best practices. Regular supervision meetings are conducted with quarterly chart reviews. All Substance Use Disorder Professional Trainees are required to report to a designated supervisor to monitor and co-authenticate the SUDPT's work which is used as a training tool. This designation falls with the Clinical Supervisor of KRC.



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Residential Patient Rights

Individual Rights (WAC 246-341-0600)

1. Each behavioral health agency must protect and promote individual participant rights applicable to the services the agency is certified to provide in compliance with this chapter, and chapters 70.41, 71.05, 71.12, 71.24, and 71.34 RCW, as applicable.
2. Each agency must develop a statement of individual participant rights applicable to the services the agency is certified to provide, to ensure an individual's rights are protected in compliance with chapters 70.41, 71.05, 71.12, 71.24, and 71.34 RCW, as applicable. To the extent that the rights set out in those chapters do not specifically address the rights in this subsection or are not applicable to all of the agency's services, the agency must develop a general statement of individual participant rights that incorporates at a minimum the following statements.

"You have the right to:"

 - a. Receive services without regard to race, creed, national origin, religion, gender, sexual orientation, age or disability.
 - b. Practice the religion of choice if the practice does not infringe on the rights and treatment of others or the treatment service. Individual participants have the right to refuse participation in any religious practice.
 - c. Be reasonably accommodated in case of sensory or physical disability, limited ability to communicate, limited-English proficiency, and cultural differences.
 - d. Be treated with respect, dignity and privacy, except that staff may conduct reasonable searches to detect and prevent possession or use of contraband on the premises or to address the risk of harm to the individual or others.

"Reasonable" is defined as minimally invasive searches to detect contraband or invasive searches only upon the initial intake process or if there is reasonable suspicion of possession of contraband or the presence of other risk that could be used to cause harm to self or others.
 - e. Be free of any sexual harassment.
 - f. Be free of exploitation, including physical and financial exploitation.
 - g. Have all clinical and personal information treated in accord with state and federal confidentiality regulations.



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- ## Rights and Protections (WAC 182-538-180)

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- ii. Helping people give or get the information the agency needs to decide or continue eligibility.
 - iii. Helping to request continuing benefits.
 - iv. Explaining the reduction in or ending of benefits.
 - v. Assisting with requests for administrative hearings; and
 - vi. On request, reviewing the agency's decision to terminate, suspend, or reduce benefits.
- c. Receiving the name, address, telephone number, and any languages offered other than English of providers in a managed care organization (MCO);
 - d. Receiving information about the structure and operation of the MCO and how health care services are delivered.
 - e. Receiving emergency care, urgent care, or crisis services.
 - f. Receiving post stabilization services after receiving emergency care, urgent care, or crisis services that result in admittance to a hospital.
 - g. Receiving age-appropriate and culturally appropriate services.
 - h. Being provided a qualified interpreter and translated material at no cost to the person.
 - i. Receiving requested information and help in the language or format of choice.
 - j. Having available treatment options and explanation of alternatives.
 - k. Refusing any proposed treatment.
 - l. Receiving care that does not discriminate against a person.
 - m. Being free of any sexual exploitation or harassment.
 - n. Making an advance directive that states the person's choices and preferences for health care services under 42 C.F.R. Sec. 489 Subpart I.
 - o. Choosing a contracted health care provider.
 - p. Requesting and receiving a copy of health care records.
 - q. Being informed the cost for copying, if any.
 - r. Being free from retaliation.



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- s. Requesting and receiving policies and procedures of the MCO as they relate to health care rights.
- t. Receiving services in an accessible location.
- u. Receiving medically necessary services in accordance with the early and periodic screening, diagnosis, and treatment (EPSDT) program under WAC 182-534-0100, if the person is age twenty or younger.
- v. Being treated with dignity, privacy, and respect.
- w. Receiving treatment options and alternatives in a manner that is appropriate to a person's condition.
- x. Being free from seclusion and restraint.
- y. Receiving a second opinion from a qualified health care professional within an MCO provider network at no cost or having one arranged outside the network at no cost, as provided in 42 C.F.R. Sec. 438.206(b)(3).
- z. Receiving medically necessary health care services outside of the MCO if those services cannot be provided adequately and timely within the MCO.
- aa. Filing a grievance with the MCO if the person is not satisfied with a service.
- bb. Receiving a notice of action so that a person may appeal any decision by the MCO that:
 - i. Denies or limits authorization of a requested service.
 - ii. Reduces, suspends, or terminates a previously authorized service; or
 - iii. Denies payment for a service, in whole or in part.
- cc. Filing an appeal if the MCO fails to provide health care services in a timely manner as defined by the state or act within the time frames in 42 C.F.R. Sec. 438.408(b); and
- dd. Requesting an administrative hearing if an appeal is not resolved in a person's favor.

Resident Rights (WAC 246-337-075)

The licensee must establish a process to ensure resident rights are protected in compliance



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with chapter 71.12 RCW, this chapter, and other applicable laws, and are based on the service types provided in the RTF. This process must address how the RTF will:

1. In an understandable manner, inform each resident or their personal representative, designee or parent or guardian, of the following:
 - a. All rights, treatment methods, and rules applicable to the proposed health care of the residents.
 - b. The estimated cost of treatment.
 - c. The name, address and telephone number of the department.
 - d. How to file a complaint with the department without interference, discrimination, reprisal or facility knowledge; and
 - e. Use of applicable emergency interventions such as:
 - i. Behavior management.
 - ii. Restraint or seclusion, if used in the RTF.
 - iii. Special treatment intervention such as room or personal searches.
 - iv. Restrictions of rights; and
 - v. Confidentiality parameters based on terms of admission or confinement.
2. Treat each resident in a manner that respects individual identity, human dignity and fosters constructive self-esteem. Each resident has the right to:
 - a. Be free of abuse, including being deprived of food, clothes, or other basic necessities.
 - b. Be free of restraint or seclusion, except as provided in WAC 246-337-110.
 - c. Participate or abstain from participation in social and religious activities.
 - d. Participate in planning their own health care and treatment.
 - e. Review or have their personal representative, designee, or parent or guardian review the resident's files in accordance with chapter 70.02 RCW.
 - f. Refusing to perform services for the benefit of the RTF unless agreed to by the resident, documented in the individual service plan and in accordance with applicable law.



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