

**PARTICIPANT ORIENTATION HANDBOOK
RESIDENTIAL DRUG ABUSE PROGRAM**

Federal Prison Camp
Leavenworth, Kansas



Today, I Accept Recovery As A Life Long Process...

Dear RDAP Participant:

I would like to welcome you to the Residential Drug Abuse Program (RDAP) at the Federal Prison Camp in Leavenworth, Kansas. You have chosen to enter an intensive residential program that is both demanding and rewarding. There are many things that you might be wondering at this point about the program and what the next nine months of the residential component of your treatment will be like. The purpose of this orientation handbook is to provide you with information that should answer many of your questions. It details the various aspects of the program including the overall philosophy of the treatment program and our rules and expectations of you within the program.

It has been shown upon successful completion of RDAP, participants have a better chance of not returning to prison than non-participants. With that said, I will note that much like anything else in life, what you put into your own individual treatment is what you will get out of it. I challenge you to take the program seriously and work towards gaining some valuable tools to aid you in your return to a sober and responsible lifestyle.

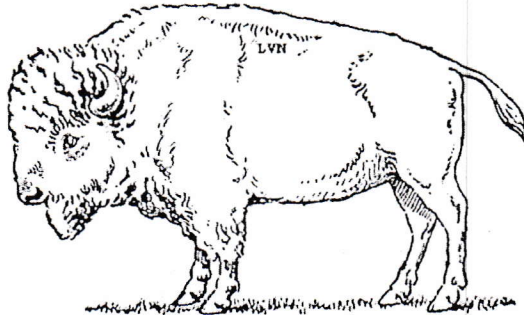
If you have any questions about the program please feel free to ask your assigned mentor, one of the Drug Treatment Specialists or me. On behalf of the RDAP staff, we look forward to working with you.

Sincerely,



Dr. Wells, DAPC

FDC LVN RDAP STAFF



RESIDENTIAL DRUG ABUSE PROGRAM
LEAVENWORTH, KANSAS

ADMINISTRATIVE STAFF

Mr. Hudson	Warden
Ms. Armijo	Associate Warden of Programs
Dr. Bleier	Chief Psychologist
Dr. Torres Torres	North Central Regional Drug Abuse Programs Coordinator

TREATMENT STAFF

Dr. Wells	Residential Drug Abuse Program Coordinator
Ms. Wilson	Drug Treatment Specialist, Residential Drug Abuse Program
Ms. Katz	Drug Treatment Specialist, Residential Drug Abuse Program
Ms. Weber	Drug Treatment Specialist, Residential Drug Abuse Program
Ms. White	Drug Treatment Specialist, RDAP Follow-Up, Drug Ed., Non. Res.

UNIT STAFF

Ms. Main	Camp Administrator
Mr. Heim	Case Manager
Mr. Bailey	Case Manager
Mr. Drinkard	Counselor
Mr. Gildner	Counselor
Ms. Collins	Secretary

CORRECTIONAL OFFICERS

One correctional officer is assigned to the unit for each shift.

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TREATMENT ELIGIBILITY

All individuals participating in the Bureau of Prison's Residential Drug Abuse Program have a verifiable substance abuse problem and have signed contracts indicating they wish to participate in a structured treatment program. Individuals are either eligible or ineligible for early release consideration. Determination of 3621(e) eligibility is made at the DSCC. You will be notified by the DAPC of your eligibility for early release benefit once the determination has been made.

PROGRAM DESCRIPTION

The FPC LVN Residential Drug Abuse Program (RDAP) is an intensive 500-hour residential drug treatment program for participants with a verifiable documented substance abuse problem. Program activities are scheduled Monday through Friday with the exception of federal holidays and institutional emergencies. Additional planned RDAP activities take place on the weekends. The program hours (groups and community meetings) are between 7:30 a.m. and 10:45 a.m. Program participants are given assignments and additional activities to be completed outside of regularly scheduled program hours as well. Treatment within the program is a 24/7 expectation.

Program participants are required to work and/or attend school outside of program hours. Each RDAP participant should have a work or educational assignment for the remainder of the day.

Personal business needs to be handled outside of program hours. **No RDAP participant should be on the telephone or engaged in any other non-RDAP activity during treatment hours** (unless authorized by RDAP staff). **No visits are permitted during treatment hours.** Please plan your visits accordingly and communicate this information with your family and friends who may plan to visit you during your time in RDAP.

The program is divided into three phases. Each participant is required to attend and actively participate in all program activities, complete all assignments and demonstrate treatment progress in order to advance to the next phase.

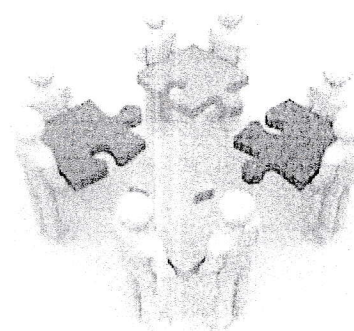
The **biopsychosocial model** of addiction underlies all drug treatment programs in the Bureau of Prisons. As an introduction to treatment, it is useful to briefly review the biopsychosocial model of addiction. The model recognizes there are genetic/biological, family cultural and other developmental factors which all interact and influence a person's decision to use or not use drugs. However, this model emphasizes personal choice and the ability of the individual to change his or her behavior. Basically, the biopsychosocial model of addiction takes into account the various reasons individuals become addicted to drugs including heredity, environment and individual differences but recognizes an individual's ability to **make choices** and change.

The FPC Leavenworth RDAP is designed as a **Modified Therapeutic Community**. Not only will RDAP participants learn from all the treatment staff, but participants will interact and grow by observing their peers, listening to positive and constructive feedback from other community members, and providing positive and constructive feedback to other community members. Participants interact with each other throughout a variety of community activities in order to grow

and learn the importance of utilizing a support network. The RDAP program staff members utilize a team approach for recovery. Therefore, the DTS's collaborate on a daily basis. Additionally, the DTS's use team teaching as a means to bring program material to participants.

DRUG TREATMENT STAFF

During the first week of programming, participants are assigned a primary **Drug Treatment Specialist (DTS)**. The assigned PRIMARY DTS will facilitate small groups. Participants need to contact the assigned primary regarding treatment and/or program issues. If an important concern arises and the assigned primary is unavailable, another DTS may be able to assist. Beginning participants are also assigned a mentor (who is an inmate who is in the later phases of the program). This individual will assist participants becoming adjusted to the unit and the program. This individual can answer most basic questions about the program.



Drug treatment staff uses their knowledge and clinical expertise to provide the tools necessary for the participants to avoid relapse and live a life of recovery. The primary DTS will work with each participant in preparing a treatment plan, and then they will periodically review the progress toward treatment goals. Additionally, the primary DTS will write a treatment summary about each participant when he completes the residential component of the program.

RDAP staff functions as a treatment team and shares information daily about the program and the participants within the program. Drug treatment staff will enforce Bureau of Prisons' rules and provide consequences for the participants who violate the rules of the program and the institution. RDAP staff may check the progress of participants' recovery through reading mail, searching lockers, and listening to telephone conversations. Behaviors that are contrary to recovery may be addressed as treatment issues.

The **TREATMENT PLAN** is a vital document in your RDAP experience. As noted previously, it is the responsibility of your primary DTS to write your individualized treatment plan; however, it is your responsibility to work collaboratively with your primary DTS to develop your own treatment plan. Once the treatment plan is completed you will sign the document and you will be provided a copy of it. You are responsible for knowing the elements of your own treatment plan and will be responsible for working towards the goals outlined in the plan. You should be able to discuss the plan and your progress on it. You will be asked during Treatment Team meetings and other occasions about your treatment plan. You may consider your treatment plan to be the "roadmap" to working your way through the program. You should always have copy of the plan available. You are permitted to write on your own treatment plan to document your own progress on the plan elements and are strongly encouraged to do so.

Drug Treatment staff members have an open door policy during non-treatment hours. Specific office hours may be posted for each treatment staff. It is useful to place specific requests on a

request to staff member form (cop-out). Your primary DTS should be your first line resource for treatment related issues. Your primary DTS may refer you to speak with the DAPC based upon the request/issue presented.

DRUG ABUSE PROGRAM PHILOSOPHY

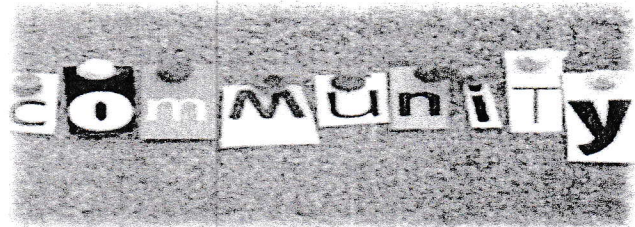
At the inception of FPC Leavenworth's RDAP, participants wrote a program philosophy. The entire community recites the philosophy daily during programming as a reminder of the purpose for the community and treatment activities. Each participant is required to memorize the philosophy, and it is considered an honor to lead the community in reciting the philosophy during their nine months of programming.

"Today / I accept recovery as a lifelong process. / I control my thoughts and actions / and my willingness to participate in treatment / will be the key to my success. / I will examine myself honestly / and strive to become caring / in my relationships with others. / I am not alone / and through the strength and support from others / I can succeed. / I possess the power to create my future as a sober / responsible / member of my community. / My future is not limited by my past. / Today / I accept recovery as a life long process. -FPC LVN RDAP PARTICIPANTS

(/denoted where one should pause while reading)

UNIT BASED HOUSING

All individual participating in the RDAP must reside together in D unit. All individuals, including those waiting to participate in the program, residing in D unit have a verifiable substance abuse problem.



The unit-based housing is critical to building a sense of community and cohesiveness among participants and staff. The unit-based housing promotes conformity and compliance with the program rules and philosophy. Unit purity is of great concern to the FPC LVN RDAP program philosophy. *There will be no inmates allowed in the unit that are not assigned to the unit. Likewise, there should be no RDAP participants in any other non-RDAP unit at any time. Even if you are in RDAP or not you are not allowed in another unit that is not your assigned housing unit.*

PROGRAM COMPONENTS

Community Meetings

Every morning at 7:30 am, the program begins with a **Community Meeting** to energize, motivate, and prepare individuals for treatment. All individuals residing in D unit are required to participate in the Community Meeting, including saying the philosophy, clapping, showing respect to others who are leading activities, speaking when moved to do so, and participating in the

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upbeat ritual. Please see your primary Drug Treatment Specialist if you wish to request religious accommodation. All program participants are required to wear full green uniform beginning with the community meeting and continuing throughout the programming day while on the RDAP unit. Those that work on certain inmate details (such as those working inside the USP) are permitted to wear other clothing to the community meetings with RDAP staff approval.

While attending any RDAP activities to include: Community Meetings, Process groups and Phase groups no inmate is allowed to eat/consume the following items: food, drinks, candy or medication without prior authorization from RDAP staff.

Process Groups

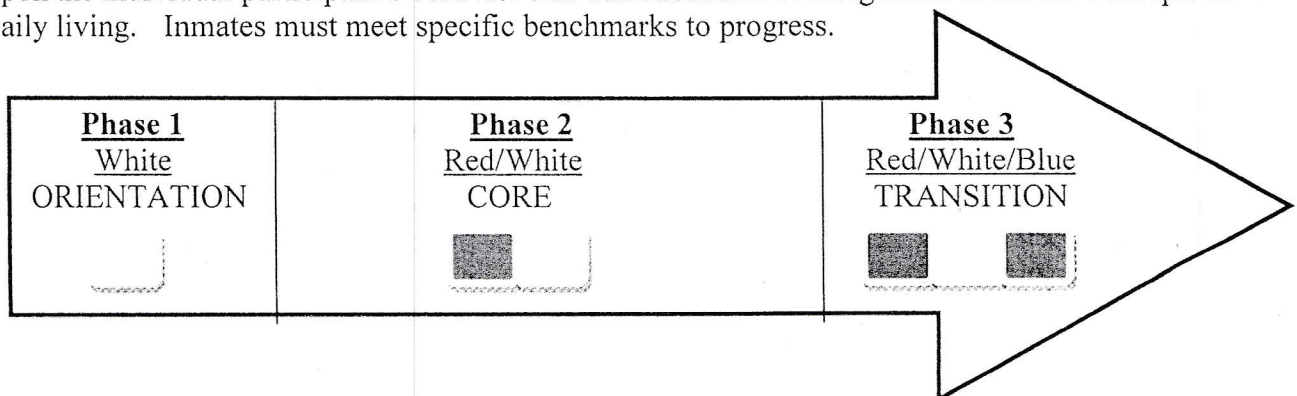
Participants are scheduled to be in process groups twice a week. There are approximately 12 participants in each process group, representing each of the three phases. The purpose of process groups is to provide a supportive atmosphere where individuals can discuss personal thoughts, feelings, and situations. Individuals will receive feedback from other participants who may be experiencing the same feelings and facing similar challenges. Process group also provides a safe and accepting place where participants can practice the recovery skills learned in the program. All participants are



required to participate in process groups by discussing their issues and providing feedback to others. Confidentiality is imperative for the group, meaning group members are not permitted to talk about other people's issues outside of the group. Participants may discuss their own issues with other people in the community. Breaking confidentiality may lead to removal from RDAP.

Phase Groups

The drug abuse program is organized into **three different phases**. Orientation Phase is a minimum of 3 months; Core Phase is a minimum of 3 months; and Transition Phase is a minimum of 3 months. Individuals not only need to learn the materials in each journal but they also need to demonstrate what they have learned by applying the principles to their everyday living. Drug treatment staff will decide if the program participants will proceed to the following phase based upon the individual participant's behavior and demonstration of integration of RDAP concepts in daily living. Inmates must meet specific benchmarks to progress.



Orientation Phase:

All individuals in this first phase will examine the nature of addiction, motivation for change, and positive attitudes for successful treatment. Participants are responsible to learn the Stages of Change and be able to analyze where they are at in this process individually. Although many individuals may enter the program due to external motivation, such as early release, participants are expected to make a commitment to change and to the program by the completion of Orientation Phase.

Core Phase:

The focus is on effective communication, distinction between rational and irrational thinking, healthy relationships, and criminal thinking. Core Phase participants are responsible for learning, recognizing, and decreasing the use of criminal thinking and behavior. Individuals are not only expected to learn the material, but they are required to apply and integrate the concepts into their everyday behavior.

Transition Phase:

These participants create an individualized recovery maintenance plan, including components of a balanced lifestyle, support systems, and wellness. Participants will identify triggers and early warning signals. Transition phase is very individualized and requires the participant to explore his specific situation. Participants must identify individuals in the community who are supportive of their recovery and learn how to incorporate them into their written recovery maintenance plans.

******* You should know about each of the 3 Phases of the Program
AND What Phase You Are Currently In*******



COMMUNITY SERVICE GROUPS

Each participant is expected to make a contribution to the community through participation in a community service group. Community service groups allow individuals an opportunity to assist in creating a positive environment within the RDAP community. This is an integral part of your treatment process.

Core Committee: Core group members are individuals identified as positive role models in the community. Members are expected to set an example, reinforce positive behavior, and demonstrate appropriate conflict resolution skills. Core group members have no authority over other program participants. They ensure efficient circulation of all pertinent information. They act as a communication bridge between DAP Staff and the community.

Cultural Diversity: Cultural Diversity group members are expected to educate the RDAP community members about the unique differences we all have, to show respect for, give recognition to, and increase awareness about the uniqueness of all people including socioeconomic status, race, gender, age, and family background. Service group members encourage equal representation in all activities involving program participants.

Community Meeting: Community meetings group members are responsible for planning all community meetings. Service group members are available to provide assistance to those participating in the meetings. They are also responsible for the set up (to include seating and sound) for the community meeting each day.

Mentoring/Welcoming: Those inmates in Phase III are eligible to be Mentors within the program. New RDAP participants are assigned an RDAP Mentor who meets with the new RDAP participant daily during Phase I of their treatment. The Mentor will serve as a guide with regard to program rules, unit expectations, general behavior and other related information that new participants should acquire as they progress in the program. The Mentor must display those qualities inherent in a Phase III participant and serve as a positive role model for his Mentee and all other new participants. The Mentor will continue to keep periodic contact with his Mentee even after his Mentee completes Phase I of the program and work to ensure the participant is on track with regard to his treatment plan.

Personal Wellness: Members of this group strive to enhance the RDAP Community by improving personal responsibility levels, hygiene, grooming, unit sanitation, language, positive attitudes, physical fitness and team work. As well as building self-esteem for a healthy body and mind. This group is also responsible for treatment related artwork and other cosmetic items which serve to provide a preferred housing atmosphere. Personal Wellness members teach others how to structure their leisure time in healthy and positive ways. They also provide weekly awards for those showing leadership in these areas.

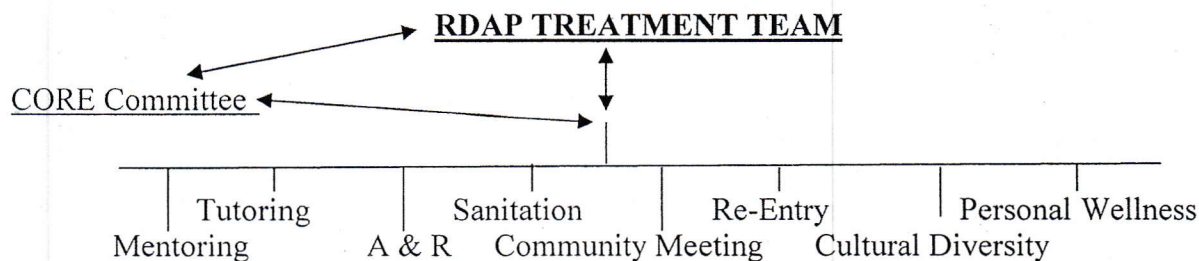
Re-entry: Members of this group strive to assist the RDAP community with any of their re-entry issues. These issues, whether they are pre-release or post-release concerns, may include obtaining a Social Security Card or birth certificate; completing a resume; answering questions regarding housing, employment, or credit; or sharing interviewing tactics/techniques, just to name a few.

Sanitation/Maintenance: Members of this group ensure sanitation standards are high within the unit. They work closely with unit orderlies and assist in the daily cleaning of the unit. Members divide responsibilities under the guidance of the committee chairperson. Additionally, this group provides notice to the unit team and treatment staff of any mechanical, electrical or other unit related needs.

A & R (Attitude Checks & RSA's): Members of this group ensure the community is able to receive optimal use of the primary tools that the program teaches to aid in recovery; Attitude Checks and RSA's. They track, review and give weekly feedback on these forms as they are turned in and distributed to the DTS. In addition, these members educate the community to improve the quality and effectiveness of these exercises.

Tutoring: Tutor group members assist their community brothers with educational needs including those pursuing a GED and individuals who demonstrate difficulty completing written work within the residential program. Members of this committee are required to have a minimum of a GED.

INFORMATION FLOW



ALCOHOLICS ANONYMOUS & NARCOTICS ANONYMOUS MEETINGS



As a supplement to the RDAP curriculum, 12-Step meetings are offered. Alcoholics Anonymous (AA) meets on Tuesday evenings at 8 PM and Thursday evening at 7 PM each week. Narcotics Anonymous (NA) meets each week on Saturdays at 5:30 PM. In society, 12-Step meetings are the most common and readily available means of continuing a program of recovery. Self-help programs such as AA and NA are often powerful and important interventions in an individual's recovery from alcohol and drug abuse and dependence. Familiarity with the 12-Step concepts and the general meeting format is a valuable addition to the materials presented in the residential treatment program.



WEEKEND ACTIVITIES

There are scheduled weekend therapeutic activities to assist community members with interacting with each other and getting to know each other better. Treatment continues twenty-four hours per day, seven days per week.

TREATMENT is 24/7

Due to the design of the modified therapeutic community, a great deal of your treatment occurs outside of regularly scheduled groups. Weekends activities serve to keep community members focused on treatment by working on therapeutic activities and projects. Various activities including treatment films, athletic events and other leisure activities (such as a monopoly tournament) take place over the weekends. They are scheduled and facilitated by RDAP community members on the Personal Wellness Committee. Additionally, other service groups are expected to have ongoing treatment related activities planned for participants on weekends and holidays.



BEHAVIORAL EXPECTATIONS

Program participants are expected to display **8 Attitudes of Change**. Behavioral expectations are outlined with reference to these attitudes:

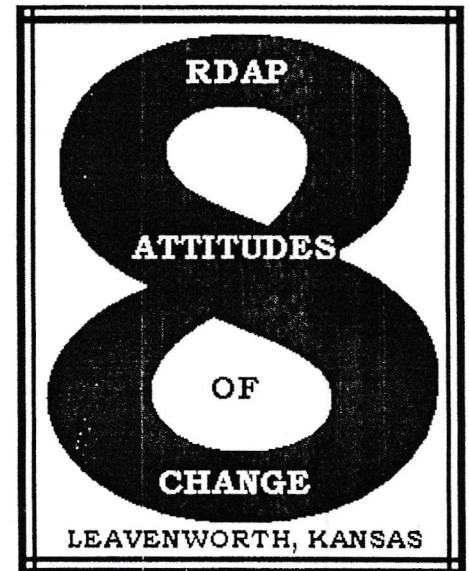
Honesty: Participants will strive for honest, open, sincere interactions with staff and peers. Participants are required to disclose personal information while in group.

Open Mindedness: Participants will be open to the material and information presented to them. They must take recovery seriously and ask for help when needed. Participants must be willing to listen to feedback.

Willingness: Participants must be willing to be involved in treatment and challenge themselves to move beyond their comfort zones. Participants demonstrate willingness when they arrive on time and stay for the entire scheduled time for every group. Although staff recognizes the importance of visits and encourages visits, participants need to consider the RDAP schedule and plan accordingly. Absences from programming could have an adverse effect on participants' advancement in the program. Individuals will participate in all programming activities. Participants will be prepared with pencils, notebooks, etc. when attending programming. Participants will complete all assignments on time. Individuals shall be dressed appropriately in full khakis during program hours. Clothes need to be ironed. Coats should only be worn during program activities when participants are already wearing khaki shirts. Pants are to be worn around the waist with a belt and are not permitted to sag. Head wear is not permitted during programming or in the D units (with the exception of religious head ware). Participants are expected to exhibit exceptional grooming and hygiene. Participants should utilize breaks between program activities to take care of personal needs, including restroom breaks.

Humility: Participants must be humble during recovery. This attitude is demonstrated by being involved in the Community Meetings and other therapeutic exercises as required. Being overly concerned about others' perceptions has led to negative consequences for most participants in the past.

Caring: Participants will show respect towards self and others. Participants will follow the rules of confidentiality. Participants will provide feedback, support, and positive role-modeling to fellow community brothers. Participants will not create or engage in excessive noise in the unit or in class. Quiet hours with the RDAP dorms are from 10:00 pm until 6:00 am daily. Noise should be kept to a minimum around staff offices at all times. Individuals need to be mindful of others studying and reading.



Responsibility: Participants are not allowed to leave programming without first obtaining staff permission. Participants will inform their primary drug treatment specialist and any staff supervising groups, prior to missing any scheduled programming. A request to miss group (other than for a call-out) must be submitted in writing and approved 48 hours in advance. Participants should never place staff in a position of tracking individuals down for accountability. Every RDAP participant must maintain institutional employment.

Objectivity: Participants need to accept feedback from staff and other participants. Individuals do not make positive growth in recovery if they do not hear about how others live in a pro-social way.

Gratitude: Participants demonstrate gratitude for the positives in their lives. The way an individual thinks influences the way he feels. Participants can make a choice to interpret their situations from a positive or a negative perspective. However, it is crucial to change negative thinking and behavior.

There are **Eight Common Thinking Errors** program participants are expected to identify in order to improve their behavior. These are:

Absolutes: Participants demonstrate absolutes when they think in extreme manners, overgeneralize or stereotype. When they believe there is only one solution, exaggerate with such words as always, never, everything or forever. They use words that judge other people unfairly. Participants must use truthful facts and not exaggerate when completing pull-ups, attitude checks, RSA's and other material completed in this program.

I Can't: Participants demonstrate I Can't statements when they make excuses for not doing something, to justify giving up on a difficult task or tell themselves and others that they are unable to do something which they are clearly able to do. Participants are required to complete all treatment material. All material given to participants is set at a 5th grade level so that all are capable of completing the tasks. All participants are required to open up and share about themselves in group this includes personal information that is required to remain confidential.

Rhetorical Questions: Participants demonstrate rhetorical questions when they hide negative thoughts and opinions in a question or use questions to express a statement of belief. They may also ask a question to produce an effect instead of seeking a reply. It is against the program rules to mislead or cause other distress for your own entertainment. Participants are required to be honest and open and not try and hide their thoughts and opinions in questions.

Demands: Participants demonstrate demands when they make demands on themselves, others and the world and insist that things had to be a certain way. This type of thinking often uses terms like, have to, need to, should and must. Participants are not allowed to make demands of anyone in prison or in treatment. They may ask others in an appropriate manner but demands will only cause communication problems. Participants are required to learn to confront and level.

Statements of Fact: Participants demonstrate statements of fact when they make assumptions without knowing all of the facts, consider partial truth to be the whole truth, state opinions as facts and dismiss the opinions of other. Participants are to learn to be objective with all information that is presented and to be honest when sharing any of the information they may share in treatment.

Loaded Words: Participants demonstrate loaded words when they use profane, offensive words to express their anger at someone or something, they use specific words that are disrespectful to a person's race or ethnicity or may disrespect someone in order to make themselves seem more important. They purposefully use words or phrases to put others down. Inmates are to refrain from the use loaded words. Participants are to learn to respect others and not cause conflict or intentionally cause situations that could lead to hostile conflict.

Blaming: Participants demonstrate blaming when they find fault with other people and things. They do not take personal responsibility for their actions when bad things happen to them and will hold others accountable but not themselves. They may point their finger at others for things within their control. Responsibility is an attitude that participants are required to demonstrate when in treatment. It is important the participants learn to take accountability for their actions and not blame others for their responsibilities.

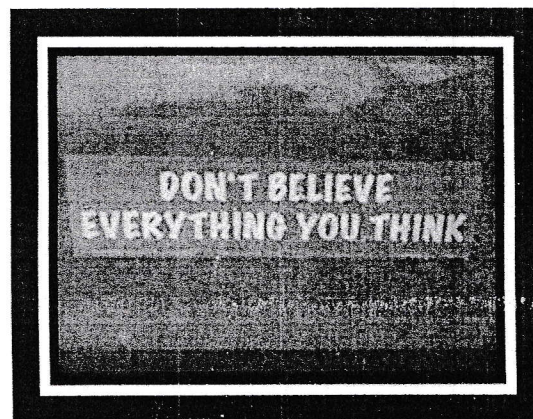
Awfulizing: Participants demonstrate Awfulizing when they express or exaggerate situations with others. They make any personal situations and make them seem worse than they actually are. They have a tendency to think that they cannot handle unpleasant feelings and may overlook or ignore the positive side of situation. Gratitude is an attitude that participants are required to demonstrate when in treatment. It is important the participants learn to become grateful for those individuals in their lives and not awfulize situation that are out of their control.

There are **Eight Criminal Thinking Errors** program participants are expected to identify in order to improve their behavior. These are:

Mollification: Participants demonstrate mollification when they lie, minimize, justify, or make excuses for their rule-violating behavior. Participants are not allowed to have any unauthorized items and must provide proof of ownership for authorized items, including magazines and books. Participants will not gamble or have any gambling paraphernalia.

Entitlement: Participants demonstrate entitlement when they have a sense of privilege, being special, being different from others, and being an exception to the rules. Participants are not allowed to ask for special privileges or favors.

Cut Off: Participants demonstrate the use of cut offs when they suppress feelings in order to engage in a rule violating behavior and turn off their conscience. Participants will refrain from the use of foul language. All participants will refer to one another by their legal names. No nicknames/street names/gang names/aliases, etc. will be used.



Sentimentality: Participants demonstrate sentimentality when they focus only on the good things they have done or accomplished, without realizing the destruction they have caused as a result of their criminal activity. They will describe things such as charity work, previous jobs, education, good things they did for their children as a way to deny the negativity of criminal behaviors. Participants will offer their help without asking anything in return.

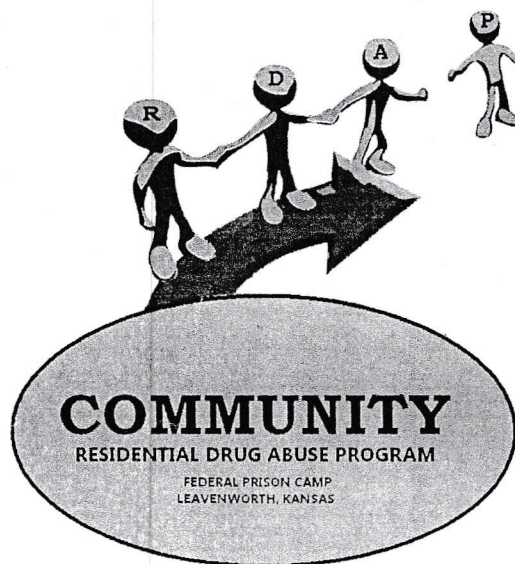
Superoptimism: Participants demonstrate super-optimism when they believe they can engage in negative behaviors with little risk of receiving negative consequences or they look at one mistake they made rather than the many poor choices. Participants are not allowed to engage in sexual activity. Risk of sexually transmitted diseases is ten times higher in the prison population than the general population.

Cognitive Indolence: Participants demonstrate cognitive indolence when they look for shortcuts or the easy way out of a situation. This behavior may be demonstrated by lying, cheating, and refusing to take part in or complete a task or assignment. Individuals are to be out of bed and have their beds made and areas cleaned by 7:00 am. The only exceptions are those with medical idle slips specifying bed rest. Bunks are to be neat and orderly at all times. Participants will work as a team to maintain a high standard of sanitation.

Discontinuity: Participants display discontinuity when they are inconsistent and lack real follow-through. All unit and institution rules are to be followed. Participants remain free from illegal, non-prescribed drug and alcohol use. Participants are required to inform primary drug treatment specialist any time they are corrected by institutional staff on their behavior regardless of disciplinary action is formal or informal. Participants will **not use the phone or e-mail system during scheduled program hours**. Participants will not use the washers and dryers during program hours. Please be mindful that the items in your possession are a reflection of your values and may be detrimental to your recovery or the recovery of your peers. Participants will respect their peers' treatment issues and the community by refraining from displaying any pictures glamorizing the criminal lifestyle. This respect includes not displaying gambling paraphernalia or sexually suggestive pictures on their lockers, bulletin boards, windows, or cups. If you choose to possess items not conducive to treatment, the issue will be addressed therapeutically.

Power Orientation: Participants demonstrate power orientation when they try to bully or intimidate someone else, often through posture, tone of voice, and word choice. Individuals will engage only in non-violent, non-aggressive verbal and/or physical behavior. Horse play is not permitted. Staff instructions are to be followed. Argumentative behavior is not tolerated.

UNIT EXPECTATIONS & LIVING IN A TREATMENT COMMUNITY SETTING



The notion of **COMMUNITY** implies that you live together, work together, are in treatment together and look out for each other's treatment needs. Looking out for each other includes pointing out thinking errors and other treatment issues as they arise. This must be done in a constructive manner and each RDAP participant should expect this consideration from the other. Likewise, remember this is a treatment environment and have an expectation that other Community members (including treatment staff) will point out issues to you along the way. This is part of treatment and areas that you likely should devote attention to.

The appearance of the RDAP unit is very important for a number of reasons. While each unit has inmate orderlies, you are among a community of men and each man must do his part within it. You and your bunkmate are responsible to ensure the areas around and behind your bunk are clean. This includes ensuring the floor, walls and window areas around and behind your bunk are clean (no dust, spider webs, or other debris). Additionally, as this is where you will live during your time in RDAP, it is your "Home." Take pride in your area and keep it looking sharp at all times. While our facility is indeed old, it can still be very clean and orderly. It should emulate a treatment atmosphere. Anyone who walks through the RDAP units should easily see that they are better than any of the other units at the Federal Prison Camp.

Sanitation expands beyond your own area and into the unit. If you drop something – pick it up. If you spill something – clean it up. Just as on the street, if you see a piece of garbage in front of your house, you should pick it up and do something with it rather than expect someone else to pick it up.

Be part of the **COMMUNITY**. In a **COMMUNITY**, individuals know each other and interact with one another. To aid in this process, each of you will have your name and picture on the front of your bunk. You should know the names (not nicknames) of each member of your **COMMUNITY** and a little about each as well. Where are they from? Do they have children? What hobbies do they have? How are they doing in their own treatment?

Specific FPC LVN RDAP Unit Expectations

All inmates residing within the RDAP unit will be expected to abide by the unit rules regardless of RDAP status – WAIT, PART or COMPLETE.

Lights ON, Out of Bed and Ready to Go

- All inmates will be out of their bunks by **7:00 am, Monday through Friday**. Exceptions are documented medical idles and for night workers on a case by case basis with the approval of the DAPC.
- Lights will be turned on and **remain on** throughout the day from 7:00 am until lights out.
- All bunks are to be **properly** made when not in use. Blankets covering the bunk and drawn tightly to present a sharp looking bunk. There should be **NO REASON** for **ANY** inmate to be **lying in bed or sleeping** from 7:00 am until 4:00 pm (exceptions for documented medical idles and approved night workers). All bunks will display the RDAP photos of those participants who are assigned to the given bunk. These photos shall be appropriately maintained.
- Chairs are to be **stacked in the front and back of the unit each morning** when not in use from 7:30 am until 4:00 pm. Chairs may be used at any time during the day, however, when not in use they must be stacked in the appropriate location.
- All inmates must be in approved uniforms until 4:00 pm.
- All inmates must report any Incident Reports to their DTS or DAPC within 24 hours of receiving the report.

Storage

- There should be no storage racks or shelving units outside of your locker or affixed to your bed. **All** property should remain in your locker when not in use, including gym bags, water containers, etc.
- Food items – There will be **no** food items (including bowls and containers) outside of your locker.
- Winter coats are to be hung on the rear posts of each bed.
- One pant and shirt may be hung out of sight, behind lockers or behind bunks. These must be ironed/pressed and are for visitation purposes.
- Tops of lockers may include **ONLY** fans, awards, and alarm clocks.
- Approved medical equipment (C-Pap machine) upon RDAP staff approval.
- You may have pictures of family members on the inside of your locker, arranged in an orderly fashion. No pictures are permitted to be hung outside of your locker. No pictures of nude or scantily clothed women are permitted inside or outside of your locker.
- There is to be nothing affixed to the outside of your locker including pictures, calendars, unauthorized hooks, magnets, etc.,
- NO reading materials are allowed which glorify drug dealing and criminal activity. If there is a question regarding the appropriateness of the book, you may consult the DAPC.

Excess Property

A property list is available to note what each inmate may have with regard to property. Excess property creates many issues with regard to orderliness and sanitation.

- Magazines – Only magazines which have been sent to you may be in your possession. They should be stored within your locker. This also applies to newspapers. A property list denotes the number and dates of these items that may be retained.
- Clothing – With regard to excess clothing, refer to the property list, which provides maximums of each clothing item allowed. Do not store excess clothing.

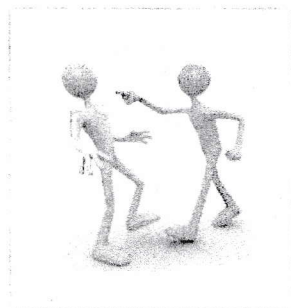
Unit Purity

The RDAP unit is a stand-alone unit. Your programming includes separating RDAP inmates from the general population with regard to housing. This means that **NO Non-RDAP** inmates are authorized on the unit at any time. Incident reports will be written for anyone found within the unit that is not affiliated with RDAP. Likewise, you should not be in Non-RDAP units. You are permitted to visit other RDAP inmates on the opposite floor. If you are found within a Non-RDAP unit you will be out of bounds and subject to disciplinary action. Non-RDAP inmates are NOT allowed in RDAP space.

Smoking

The issue of **SMOKING** within the unit is considered to be a significant issue. Any inmate caught smoking shall lose his entire RDAP IPP for that quarter in addition to receiving an incident report and associated sanctions. Your continued progress in treatment will be reviewed by the treatment team in light of your decision to break program rules.

Apart from the related sanctions associated with this behavior, each participant should keep in mind the idea of community. There are many inmates with health issues who cannot tolerate smoke. Everyone is involved in the treatment of every other man. Smoking in the unit is rude and goes directly against the Attitudes of Change. The lack of Caring displayed is apparent if you smoke within the RDAP unit. The smell of smoke in the bathroom, the unit or stairwell is obvious and will result in appropriate consequences. This is an issue which must be controlled. Smoking within the facility is against Federal Law.



CONFLICT RESOLUTION

Program participants will likely experience conflict with others during various points during the program. Many questions and/or program issues may be addressed by a participant's Mentor or other community member, or a Core Committee member. Next, participants need to contact the assigned primary drug treatment specialist and then the Program Coordinator. If, after speaking to the Program Coordinator, the participant feels the issues are still not resolved, he may follow the appropriate chain of command, including Chief Psychologist, followed by the Associate Warden of Programs, and then the Warden.

URINE SURVEILLANCE

Participants in the residential drug programs shall be subject to the same urine surveillance frequency as the general population. However, unit and treatment staff who suspect alcohol or drug use by a participant in a residential program may contact appropriate staff within the institution to place that participant on the suspect list for an increased schedule of urine surveillance.

INCENTIVE PROGRAM

Participants will receive limited financial awards based upon their achievement and completion of program phases. The awards are based upon achievement not mere attendance. Each program participant must meet the following guidelines in order to receive the standard award:

- No unexcused absences
- 95% promptness rate for scheduled activities
- No incident report for which he was found guilty by the UDC or DHO
- Successful completion of all program assignments
- Be in FRP compliance
- Full Participation in all groups and other activities

The possible amounts for awards are \$40.00 at the successful completion of each treatment phase.

These awards for eligible participants help to offset the loss of performance pay which a participant incurs as a result of participating in a residential program. Historically, participants have cited the loss of pay as a reason for not participating in the program or as a reason for withdrawing from the program.

WITHDRAWAL FROM THE PROGRAM

The RDAP is voluntary. Participants have the right to withdraw from treatment at any time. Participants are first encouraged to discuss this important decision with their Mentor, process group, and treatment staff. If (after following these steps) a participant believes he is no longer interested in treatment, he may sign the appropriate paperwork to withdraw from the treatment program. A participant who voluntarily withdraws from treatment has the right to reapply for treatment at a later date (90 days). Individuals may need to complete treatment exercises prior to being placed back on the RDAP waiting list. Any participant who is reinstated must participate in the entire treatment program regardless of the stage at which he voluntarily withdrew.

DISCIPLINE/REMOVAL FROM THE PROGRAM

The RDAP Coordinator may remove a participant from the program based upon disruptive behavior related to the program or unsatisfactory progress in treatment. Usually a formal warning will have been issued. Significant behavioral issues which merit consideration by staff include

- Used or possessed alcohol or drugs
- Been violent or threatened violence against staff or another inmate
- Committed a 100 level prohibited act
- The participant's behavior is of such magnitude that his continued presence would create an immediate and ongoing problem for staff and participants.

In response to other types of disruptive behavior, drug abuse treatment staff shall:

- Meet with participant to discuss inappropriate behavior
- Develop treatment goals to reduce and eliminate the inappropriate behavior
- Warn the participant of the consequences of failure to alter behavior
- Properly document the treatment interventions and ensure that the participant signs that he is willing to complete the treatment interventions

In the event of a second or third incident of disruptive behavior, the RDAP Coordinator may remove the participant from the program or provide another warning using the same four-step procedure.

Only the RDAP Coordinator or the Warden shall have the authority to remove a participant from the unit-based portion of the residential treatment program.

Participants who are removed from treatment will be transferred to a different housing unit or different institution according to Bureau policy guidelines.

FOLLOW-UP SERVICES

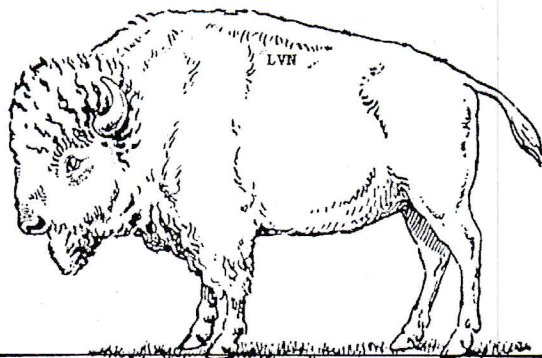
Individuals who complete the residential component of the RDAP, who remain incarcerated, for up to one year after completing RDAP, will attend Follow-Up Services for aftercare. If individuals do not attend aftercare, they will fail RDAP in its entirety. As a Follow-Up Participant if you are found to still be struggling with RDAP concepts and in need of additional treatment assistance, the Treatment Team could chose to place you back in any of the RDAP journals or process group times to assist you with the struggles that you may be having.

TRANSITIONAL SERVICES →

After participants complete the RDAP, they will be recommended for a maximum placement of six months in a Residential Reentry Center (RRC). Even though the recommendation will be made, not all participants will be eligible to transfer to a RRC. Please discuss any concerns regarding this issue with unit staff. While the participants reside in RRC or on home confinement, they will be required to participate in Transitional Drug Treatment. Drug treatment providers in the community will work with the program participants to assist them in making a successful transition back into society. If participants are unable to transfer to a RRC, then they are unable to complete the Transitional Services component required for early release eligibility.

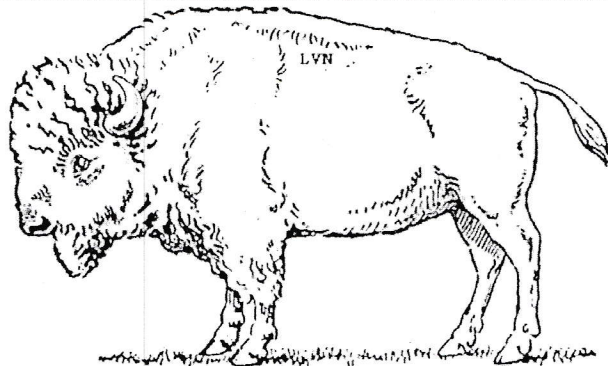
CONCLUSION

Once again, welcome to FPC Leavenworth's Residential Drug Abuse Program. Recovery is hard work, especially in the beginning, but the benefits are great. The ultimate goal is for individuals to live freely in the community while maintaining a healthy lifestyle that is free of mood-altering substances and criminal activity. By learning the tools of recovery, you are giving yourself the opportunity for a second chance at life.



RESIDENTIAL DRUG ABUSE PROGRAM
LEAVENWORTH, KANSAS

FPC LVN RDAP DAILY SCHEDULE



RESIDENTIAL DRUG ABUSE PROGRAM
LEAVENWORTH, KANSAS

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
7:00 - 7:15 am	7:00 - 7:15 am	7:00 - 7:15 am	7:00 - 7:15 am	7:00 - 7:15 am
Service Committee Meetings	Service Committee Meetings	Service Committee Meetings	Service Committee Meetings	Service Committee Meetings
7:15 - 8:00 am	7:15 - 8:00 am	7:15 - 8:00 am	7:15 - 8:00 am	7:15 - 8:00 am
Community Mtg.	Community Mtg.	Community Mtg.	Community Mtg.	Community Mtg.
8:15 - 10:30 am	8:15 - 9:15 am	8:15 - 10:30 am	8:15 - 9:15 am	8:15 - 10:30 am
PHASE GROUPS	PROCESS Group A	PHASE GROUPS	PROCESS Group A	APPLICATION GROUPS A & B
	9:30 - 10:30 am		8:15 - 9:15 am	
	PROCESS Group B		RDAP SEMINAR (Process B)	
			9:30 - 10:30 am	
			PROCESS Group B	
			9:30 - 10:30 am	
			RDAP SEMINAR (Process A)	

Community Meeting Location: *Camp Gymnasium*
Phase Group Locations: *Determined by Current Phase*
Process Group Locations: *Determined by Assigned DTS*
Seminar Group Location: *Camp Gymnasium*
Application Group Locations: *Determined by Staff*

RDAP ACKNOWLEDGMENT