TR AUMA
RECOVERY CENTER
AT MAY DUGAN
ORIENTATION HANDBOOK
Welcome to May Dugan Center (MDC) Trauma Recovery Center (TRC).

We are so glad you are here.

We welcome you as a client of the Trauma Recovery Center at May Dugan. Our desire is to provide professional services in a timely manner, while rendering the highest quality of care possible.
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May Dugan’s Organization

MISSION STATEMENT

May Dugan Center’s mission is;
“To help people enrich and advance their lives and communities”.

OUR ORGANIZATION

May Dugan Center is a social service agency. We are an independent, not-for-profit organization operating as a lifeline for over 8,000 individuals and families from all ages, not only from the Near West-Side but also from the Greater Cleveland community since 1969. May Dugan provides this support through its Community Education, Food and Clothing Program, Information and Referral Services, Comprehensive Case Management, and Counseling Services, as well as the Trauma Recovery Services under the Victims of Crime Act. The diverse ethnic, cultural, and economic backgrounds of the clients who visit May Dugan are virtually all living at or below the poverty index level under Federal guidelines. In addition to our programs and services, May Dugan provides space in the building to other not-for-profits.

OPERATING PHILOSOPHY

MDC provides services to the citizens of Cuyahoga County in Ohio without regard for race, ethnicity, age, color, religion, creed, gender, national origin, sexual orientation, veteran status, financial condition, handicap, developmental disability, or HIV infection, AIDS-related complex or AIDS.

PURPOSES

The purposes of MDC are:

• To offer professional stabilization, clinical, education, and resource services to such persons;

• To cooperate with other agencies, organizations, systems and groups now assisting in the delivery of needed social services;

• To work toward the establishment of appropriate facilities and service delivery systems to address the social service needs of the community;

• To operate in a manner that serves to enhance the dignity and protect the human and legal rights of all who seek our services;

• To maintain a competent, professional staff team sufficiently implements these organizational purposes.
SERVICE DELIVERY IS TRAUMA-INFORMED

All of the services at MDC are trauma-informed. Trauma-informed care is an operating philosophy that acknowledges that terrible things happen to individuals and these experiences are often kept secret and victims’ stories are often denied and ignored. We endeavor to create an environment where our clients feel safe to express what has happened and find the community where healing can happen. To that end, all our service delivery systems, building protocols, and personnel training are developed to improve health and well-being, support a self-directed life and build community for all people working, accessing programming, or volunteering at May Dugan. As an agency we follow 6 principles of trauma-informed care as established by the Substance Abuse and Mental Health Services Administration (SAMHSA):

Safety
MDC staff and volunteers strive to make MDC facilities and services physically and emotionally safe for everyone.

Trustworthiness & transparency
MDC staff and volunteers will provide clear and honest answers about the service processes.

Peer support
MDC staff and volunteers create opportunities for peers to be valuable partners in service delivery.

Collaboration & mutuality
We believe that healing happens in relationships. Because of this, we also believe that everyone has something to share in the services provided at MDC. Your opinion and your contribution are valued.

Empowerment, Voice & Choice
Services at MDC are strength-based. The strengths of clients at MDC are recognized, built on, and validated. Everyone’s experience is unique and requires an individualized approach. Clients at MDC are encouraged to embrace resiliency. Short and long-term recovery from trauma is promoted.

Cultural, historical and gender issues
MDC offers “culturally-responsive services”, focusing on the unique needs of each individual. MDC rejects cultural stereotypes and biases based on religion, race, color, creed, sexual orientation, gender identity, national origin, age, lifestyle, physical or mental handicap, developmental disability, or ability to pay.

“Understanding someone’s suffering is the best gift you can give another person. Understanding is love’s other name.” – Thich Nhat Hanh
“Trauma creates change you don’t choose. Healing is about creating change you do choose.” – Michelle Rosenthal

At MDC, clients, staff, and volunteers are expected to:

1. Treat everyone in the facility with dignity and respect and observe everyone’s right to privacy;

2. Be a willing partner in the services provided; and

3. Approach conflict with positive outcomes in mind.

Prohibitions:

1. Because MDC is a drug-free work place. Refrain from bringing, or dispensing illegal items, including other individual’s prescriptions, into the building.

2. Firearms and other deadly weapons of any kind are strictly forbidden on the premises of MDC. The term “premises” includes all offices, buildings and property that are operated as part of MDC. This prohibition shall not prevent firearms and other deadly weapons from being kept in vehicles as long as the firearm is properly stored according to state and local law. This policy shall not prohibit (1) law enforcement officers, and (2) probation / parole officers from carrying a firearm on MDC premises. If a handgun, or other deadly weapon, is discovered on a client or visitor, the MDC employee discovering the handgun or other deadly weapon will inform the client/visitor of this policy and notify the Executive Director or other supervisor immediately.

3. Smoking inside MDC is prohibited. It is also against the law to smoke within 20 feet of a public building.

4. To keep MDC open and welcoming, please avoid using vulgar or disrespectful language while on MDC property.
CLIENT’S CIVIL RIGHTS

All individuals requesting services from MDC have a right to receive services without regard to race, ethnicity, age, color, religion, creed, gender, national origin, sexual orientation, veteran status, financial condition, handicap or disability, HIV infection—whether asymptomatic or symptomatic, AIDS-related complex or AIDS in accordance with Title VI of the Civil Rights Act of 1964, as amended, 42 USC 2000d, Title XI of the Education Amendments of 1972, 20 USC 1681-1686 and s. 504 of the Rehabilitation Act of 1973, as amended, 29 USC 794, and the Americans with Disabilities Act of 1990, as amended, 42 USC 12101-12213.

No distinction will be made in determining eligibility for participation in services provided by MDC based on any of these identifiers, conditions or circumstances.

CODE OF ETHICS

All MDC employees are expected to maintain acceptable job performance and to conduct themselves in a professional and courteous manner. MDC follows an ethics policy that address issues in the business provision of service delivery, professional responsibilities, billing, marketing, contractual relationships, admissions practices and human resources. Professional service providers are expected to comply with any codes for professional conduct, trauma-informed practices, and ethical behaviors adopted by their respective licensure or certification authorities.

“When a client offers a gift to an employee, the employee much respectfully decline acceptance of the gift from the client.” Also, “Under no circumstance may a Center Employee solicit clients for gifts for personal benefit”.

“We must be willing to let go of the life we have planned so as to have the life that is waiting for us” – Joseph Campbell
Client Rights/Victim Rights/Survivor Rights

Am I a victim or a survivor? This language is your choice. Often, we talk about “victim” as the person rendered temporarily helpless after an event and a survivor as the same person after he/she/they have had time and space to regain their self-direction. We will endeavor to call you by your name, not a label.

Marsy’s Law Summary
Taken and shortened from: https://www.ocvjc.org/marsys-law-summary
Please see the website or ask for full details.
Constitutional Amendment
Effective February 5, 2018.

Introduction

PLEASE NOTE: This explanation addresses the Marsy’s Law constitutional amendment only. Implementing legislation will refine and define many of the rights discussed herein...It is important to note that this document includes a list of rights that each provision may encompass, it is not meant to be construed as an exhaustive list or definition of what each provision means. The rights are subject to legislative, judicial, and legal interpretation.

On November 7, 2017, an overwhelming majority of Ohio voters passed Marsy’s Law in a record breaking 83% show of support. Marsy’s Law grants Ohio’s crime victims specific rights in the criminal justice process. Many of these rights already exist in Ohio statutes and evidence rules. However, Ohio’s voters have made a clear statement that they want to ensure that Ohio’s victims’ rights are protected and enforced. In addition, in passing Marsy’s Law, Ohio voters have prioritized victims’ rights and the idea that these rights should be enforced no less vigorously than the rights of the accused. Consideration of victim dignity, privacy, and safety must be elevated in the criminal justice process. In addition, remedies are now explicitly available should victims’ rights be violated.

One major change is that Marsy’s Law clarifies that crime victims have standing to enforce their rights via motions and appellate review. Specifically, it states: “The victim, the attorney for the government upon request of the victim, or the victim’s other lawful representative, in any proceeding involving the criminal offense or delinquent act against the victim or in which the victim’s rights are implicated, may assert the rights enumerated in the constitution or any other right afforded to the victim by law.”

Marsy’s Law reinforces the ability for victims to file motions to protect and enforce their rights. It does not give victims the ability to control the criminal case or appeal acquittals. Marsy’s Law does not allow victims to sue criminal justice officials for rights violations.
Who is a Victim?

The definition of “victim” is changed from the definition in ORC § 2930. Victim is now defined as the person against whom the criminal act is committed or the person directly and proximately harmed by the criminal offense.

What are the Victim’s Rights?

To secure for victims justice and due process throughout the criminal and juvenile justice systems, a victim shall have the following rights, which shall be protected in a manner no less vigorous than the rights afforded to the accused:

The right to be informed, in writing, of Marsy’s Law rights.

The victim, the attorney for the government upon request of the victim, or the victim’s other lawful representative, in any proceeding involving the criminal offense or delinquent act against the victim or in which the victim’s rights are implicated, may assert the rights enumerated in this section and any other right afforded to the victim by law. If the relief sought is denied, the victim or the victim’s lawful representative may petition the court of appeals for the applicable district, which shall promptly consider and decide the petition.

- The right to be treated with fairness and respect for the victim’s safety, dignity, and privacy.
- The right, upon request, to reasonable and timely notice of all public proceedings and the right to be present at those proceedings.
- The right to be heard in public proceedings involving release, plea, sentencing, disposition, or parole, or in any proceeding that implicates a Marsy’s Law right.
- The right to confer with the prosecutor, upon request.
- The right to proceedings free from unreasonable delay and a prompt conclusion of the case.
- The right to refuse an interview, deposition, or other discovery request by an accused, except as provided by Article I, Section 10 of Ohio’s constitution.
- The right to full and timely restitution from the offender.
VICTIM’S RIGHTS REQUEST/WAIVER FORM

As a crime victim in Ohio, you have rights. Criminal justice system officials are required to perform certain duties to ensure that you know your rights. Some rights are automatic, but most rights require your request.

This document provides important information about your rights that begin when you report to law enforcement. Page two of this document lists rights that must be requested and provides a form to officially notify law enforcement, jails or other custodial agencies, prosecutors, and judges that you wish to request or waive certain rights. Law enforcement will forward this document to the prosecutor if the suspect is charged.

Law enforcement will provide you with information, in writing, about additional services, resources, and rights that may be available to you. Additional services, resources, and rights are also included in the Ohio Attorney General’s Victims’ Rights Handbook. An online resource to help you research and understand your rights is the

This information is available online at: Victims’ Rights Toolkit
www.victimsrightstoolkit.org

Who is a victim? Who can act as a victim’s representative?

• A victim is any person against whom a criminal offense or delinquent act is committed or any person who is directly and proximately harmed by the commission of the offense or act. The suspect, defendant, or offender is not a victim.

• Crime victims can exercise their rights themselves, and/or choose a representative to exercise their rights. A suspect, defendant, or offender cannot be a representative. Victims can choose a representative at any time, and always have the right to change their representative.

• If the victim is a minor, incapacitated, incompetent, or deceased, a member of the victim’s family or another person may act as the victim’s representative. If there is a conflict of who will act as the representative, each person can ask the judge to choose a representative.

Requesting or waiving your rights

• You can change your mind later about requesting or waiving your rights. However, if you first waive your rights and then request them at a later time, you may give up some rights that only apply at certain stages of the criminal justice process.

• Arraignment is a hearing that can happen quickly after the defendant is charged. During arraignment the judge often decides whether or not to release the defendant on bond, conditions of bond, or issue a protection order. To attend arraignment and be heard by the judge, you should call the clerk of courts, jail, or investigating officer to confirm the time and date.
Restitution and Compensation

- **Restitution:** Upon conviction, the court must order the offender to pay you for verifiable financial costs relating to your victimization.

- **Crime Victim Compensation Fund:** You may be eligible to apply for reimbursement of verifiable financial costs relating to your victimization, even if the suspect has not been arrested or convicted. You may apply for compensation at: http://www.ohioattorneygeneral.gov/VictimsCompensation.aspx or call 800-582-2877.

- You must save receipts, estimates, invoices, pay stubs for lost wages, medical or other bills, mileage logs, and other written documentation.

Privacy and Safety

- **Safe at Home:** May Dugan is a Safe at Home registration site. You may be able to keep your address private by obtaining a Safe at Home address. Learn more at: https://www.sos.state.oh.us/secretary-husted-office/office-initiatives/safe-at-home/victims/ or call 614-995-2255.

- **VINE:** You can receive texts or emails to track offenders in jail or prison. Register at: https://www.vinelink.com/#/home/site/36001.

Your right to refuse an interview, deposition, or discovery request from the accused or any person acting on the accused’s behalf.

- **If the defendant, defendant’s attorney, or anyone else acting on behalf of the defendant contacts you to request an interview or attempt to obtain any information or materials, immediately contact the prosecutor. If the suspect has not yet been charged, contact a victim’s rights attorney.**

Ask your assigned professional for a Right’s Request Form, or find one at https://www.ocvjc.org/marsys-law

“As I walked out the door toward the gate that would lead to my freedom, I knew if I didn’t leave my bitterness and hatred behind, I’d still be in prison.”

– Nelson Mandela (leaving prison)
CLIENTS RIGHTS IN OHIO

You are entitled to be treated in a humane and dignified way at all times, and with full respect to:

Personal Dignity + Right to Privacy + Right to Personal Property + Civil Rights

All individuals requesting services from MDC shall receive a copy of this handbook as part of the screening, intake and initial orientation process, and, if applicable, on an annual basis. Client rights at MDC are aligned with all applicable regulations issued by State, Federal and other funders.

Your rights as a client at MDC include, but are not limited to the following:

1. The right to be treated with consideration and respect for personal dignity, autonomy, and privacy;
2. The right to service in a humane setting which is the least restrictive feasible as defined in the treatment plan;
3. The right to be informed of one’s own condition, of proposed or current services, treatment or therapies, and of the alternatives;
4. The right to consent to or refuse any service, treatment, or therapy upon full explanation of the expected consequences of such consent or refusal. A parent or legal guardian may consent to or refuse any service, treatment or therapy on behalf of a minor client;
5. The right to a current, written, individualized service plan that addresses one’s own mental health, physical health, social and economic needs, and that specifies the provision of appropriate and adequate services, as available, either directly or by referral;
6. The right to active and informed participation in the establishment, periodic review, and reassessment of the service plan;
7. The right to freedom from abuse, humiliation and neglect;
8. The right to freedom from unnecessary or excessive medication;
9. The right to freedom from unnecessary restraint or seclusion;
10. The right to participate in any appropriate and available agency service, regardless of refusal of one or more other services, treatments, or therapies, or regardless of relapse from earlier treatment in that or another service, unless there is a valid and specific necessity which precludes and/or requires the client participation in other services. This necessity shall be explained to the client and written in the client current service plan;

“The best thing about the future is that it comes one day at a time.” – Abraham Lincoln
11. The right to be informed of and refuse any unusual or hazardous treatment/service procedures;

12. The right to be advised of and refuse observation by techniques such as one-way vision mirrors, tape recorders, televisions, movies, or photographs;

13. The right to have the opportunity to consult with independent treatment specialists or legal counsel, at one’s own expense;

14. The right to confidentiality of communications and of all personally identifying information within the limitations and requirements for disclosure of various funding and/or certifying sources, state or federal statutes, unless release of information is specifically authorized by the client or parent or legal guardian of a minor client/ or court-appointed guardian of the person of an adult client/ in accordance with rule 5122:23-11 of the Administrative Code;

15. The right to have access to one’s own psychiatric, medical, educational or other treatment records, unless access to particular identified items of information is specifically restricted for that individual client/ for clear treatment/service reasons in the client’s treatment plan. “Clear treatment reasons” shall be understood to mean only severe emotional damage to the client/ such that dangerous or self-injurious behavior is an imminent risk. The person restricting the information shall explain to the client/ and other persons authorized by the client/ the factual information about the individual client/ that necessitates the restriction. The restriction must be renewed at least annually to retain validity. Any person authorized by the client/ has unrestricted access to all information. Clients/s shall be informed in writing of agency policies and procedures for viewing or obtaining copies of personal records;

16. The right to be informed in advance of the reason(s) for discontinuance of service provision, and to be involved in planning for the consequences of that event;

17. The right to receive an explanation of the reasons for denial of service;

18. The right not to be discriminated against in the provision of service on the basis of religion, race, color, creed, sex/gender, sexual orientation, gender identity, national origin, age, lifestyle, physical or mental handicap, developmental disability, or inability to pay;

19. The right to know the cost of services;

20. The right to be fully informed of all rights;

21. The right to exercise any and all rights without reprisal in any form including continued and uncompromised access to service;

22. The right to file a grievance; and

23. The right to have oral and written instructions for filing a grievance.
AGENCY CLIENT RIGHTS AND PROCEDURES

1. Each agency and each board which itself provides services must have a written Client rights policy which contains the following:

   a. Specification of the client rights as listed in paragraphs (D)(1) to (D)(22) and/or (E)(1) to (E)(12) of this rule;

   b. The name, title, location, hours of availability, and telephone number of the client rights officer with a statement of that person’s responsibility to accept and oversee the process of any grievance filed by a client or other person or agency on behalf of a client; and

   c. Assurance that staff will explain any and all aspects of client rights and the grievance procedure upon request.

2. A copy of the client rights policy must be distributed to each applicant or client at the intake or next subsequent appointment in writing and orally. Each agency policy shall specify how distribution shall be accomplished, and shall include:

   a. Provision that in a crisis or emergency situation, the client or applicant shall be verbally advised of at least the immediately pertinent rights, such as the right to consent to or to refuse the offered treatment and the consequences of that agreement or refusal. Written copy and full verbal explanation of the client rights policy may be delayed to a subsequent meeting; and

   b. Provision that clients/s or recipients of the type of services specified as “community services” (information and referral service, consultation service, mental health education service, prevention service, training service; see paragraphs (D)(11) to (D)(15) of rule 5122:2-1-01 of the Administrative Code) may have a copy and explanation of the client rights policy upon request.

3. A copy of the client rights policy shall be posted in a conspicuous location in each building operated by the agency.

4. Each agency shall provide that every staff person, including administrative and support staff, is familiar with all specific client rights and the grievance procedure.

“You’ve survived 100% of your worst days so far. Keep going” – Peter Katsilis
CONFIDENTIALITY

MDC believes that you have the right to privacy. With few exceptions, everything you say while in receiving services at MDC is private. Clients come to the MDC for help with problems that they consider being extremely sensitive and private. It is, therefore, the obligation of every staff member to preserve this trust. Confidentiality includes, but is not limited to, the fact that a person is coming to the center, financial information about the client, information incorporated into the record, and any contact the staff member has with a client within the MDC or within the purview of the relationship with the client. This information is only to be shared with other staff on a need-to-know basis and may only be shared with non-staff or other agencies with your consent. If there is good reason, a judge can order your records for court review. To provide you the best treatment possible, trauma intervention specialists often ask each other’s advice from other professionals within the agency.

Occasionally, our records are inspected by professional reviewers. Finally, if you say that you’re involved in abuse of the elderly or youth (child abuse includes domestic violence in homes where children live), or if you tell us you plan to hurt yourself or someone else, or that someone is hurting you, we have a legal obligation to report what you have told us. These authorities have an obligation to investigate cases of abuse and are often also authorities who can help you. We will not necessarily stop helping you as our client under these circumstances and may be able to provide additional services.

Recording: We do have the capacity to record interactions at May Dugan. We are prohibited, by law, from taping without your consent.

EMAIL/TEXTING

Email and Text are easy ways to communicate, and the staff of the Trauma Recovery Center has phones for this purpose. However, we want you to consider when it is not a good idea to text or email:

• They can be circulated, forwarded, stored electronically and on paper, and broadcast to unintended recipients.
• Employers and online services have a right to inspect emails sent through their company systems.
• They can be used as evidence in court.
• They are not appropriate for urgent or emergency situations.
• Our staff will refer to 911, Mobile Crisis, 696 Kids if you text the need for emergency intervention.

Please note: providing you the best care possible means that no staff can provide therapy or therapeutic services over text.
Good Use Practices for text and email

• Set appointment times and confirm meetings.
• Use language and discuss topics you would share in a crowded public area.
• Understand that the text or email may be printed and placed in your confidential file.

CLIENT COMPLAINTS OR GRIEVANCES

We encourage you to let your service Provider know if you are not happy with his/her services. If you are not comfortable in doing this or have tried and are not satisfied, ask to speak with the Director of Trauma Recovery Services and that person will work with you to come to a resolution.

MDC has an internal client complaint system through which, in most cases, resolve complaints or grievances quickly and satisfactorily. You can address any complaint you have to the following individuals:

• First, the Director of Trauma Recovery Services
• Second, the Executive Director
• Finally, the Board of Directors

We request you address your complaint with the Director of Trauma Recovery Services first. If it is not resolved to your satisfaction, please complete a Complaint / Grievance form. Forms are available with the Receptionist. Give the form to the Executive Director. Your complaint will be promptly investigated and action will be taken to resolve it.

CLIENT SATISFACTION

The input and suggestions from all clients regarding the quality of service is welcomed at any time. For this purpose, MDC will conduct periodic client satisfaction surveys. Surveys will be utilized for measuring the quality of services being delivered and implementing any needed corrective actions.

SEXUAL HARASSMENT

Sexual harassment is not allowed at MDC. Sexual harassment is using words or actions, of a sexual nature, that make someone feel uncomfortable. It also includes any situation where you feel that your job or success may be in danger if you do not go along with what the person who is harassing you want, whether they say it outright or in a roundabout way. It also includes any behavior, by anyone, that would get in the way of someone doing their job, by making an uncomfortable work environment.

Program participants of all gender expressions have the right to be treated with dignity and respect and must tell their trauma intervention specialist anytime sexual harassment happens. All reports of sexual harassment will be looked into and written down. A written report of what will be done will be given by management. All reports of sexual harassment are kept private.
Services

YOUR RESPONSIBILITIES

While you have several rights protected by law, your success with trauma recovery at MDC will be greatly enhanced by your participation in the services you are receiving and your active and honest engagement when your individualized support plan needs is written and needs to be revised. To make your time in trauma recovery successful, we need to work together. There are a few things you can do to enhance the services you receive and develop a good relationship with our agency. Your part is to take responsibility for the following:

1. MDC asks that all recipients provide the agency and staff with clear, complete and truthful information at all times.

2. Treat others with respect, consideration, and to deal honestly at all times;

3. Respect other’s cultures and cultural differences.

4. Engage with program rules and treatment plans;

5. Bring nothing into the building, which might be used to hurt another person accidentally or on purpose.

6. Keep scheduled appointments and call to cancel or reschedule if you cannot make your scheduled appointment.

7. Make known your concerns related to services provided with staff; ask questions when you don’t understand or when you want more information.

8. Participate actively to create goals that will help you recover. Be very involved in developing and reviewing your plan. And follow the plans that you and your providers have agreed upon.

9. Talk to your trauma intervention specialist often about your needs, preferences and goals and how you think you are doing at meeting your goals.

10. Tell staff members when you are experiencing problems.

11. Take medications as they are prescribed for you by your family physician and to tell your doctor if you are having unpleasant side effects from your medications, or if your medications do not seem to be working to help you feel better.

12. Discuss medication issues or concerns with your doctor, nurse, and/or therapist;

13. Invite the people (family, friends, etc.) who will be helpful and supportive to you to be included in your treatment.

14. Control yourself so you are not harmful to yourself or others;

15. Be respectful with your peers’ issues and do not bring them up at inappropriate times;

16. Respect the confidentiality and privacy of other clients;
17. Follow the steps described in this handbook if you want to file a grievance or appeal with MDC;
18. Let your provider know if you decide to discontinue services; and
19. Let your provider know about changes in your name, insurance, address, telephone number or your finances.

“Storms make trees take deeper roots.” –Dolly Parton

ADMISSION

Trauma Recovery Centers were established to support you after a traumatic event resulting from a criminal act against your person. Additionally, services are available to those who witnessed or are harmed by the commission of the crime. We provide crisis stabilization to you and your family. All persons meeting this criteria, willing to participate in their individualized support plan, adhere to program guidelines and who do not present an imminent danger to themselves or others will be afforded the right and opportunity to participate in trauma recovery services.

All services must be voluntary on the part of the recipients.

INDIVIDUALIZED SUPPORT PLAN

The goals and activities of clients participating in an assessment at MDC will be documented in an Individualized Support Plan.

Individualized support plans then guide the process of delivering services at MDC.

Individualized support plans are developed with client input and will incorporate a prioritized focus on the problem areas identified in the assessment, the client strengths or assets, weaknesses or limitations, abilities and preferences as were also identified in the assessment.

Individualized support plans will include:

• Problems to be addressed while receiving services through the trauma recovery services;
• Measurable goals developed in response to the client needs;
• Measurable objectives with a time frame for the completion of each objective;
• Frequency, duration and types of services to be provided;
• Original signature of the client;
• Date, original signature and credentials of the trauma intervention specialist who completed the support plan and is qualified to provide the services described.
**Hours of Operation**

Services are provided on-site as well as in the community based on need, professional agreements and staff availability.

**PHYSICAL LOCATION**

May Dugan Center  
4115 Bridge Avenue  
Cleveland, OH 44113

Trauma Recovery Phone: (216) 631-3886  
MDC Main Phone: (216) 631-5800 X100  
Other TRC Phone: (216) 631-5800 X140  
Fax: (216) 631-4595

**MAY DUGAN OFFICE HOURS OF OPERATION**

- Monday 8:00 AM – 4:00 PM  
- Tuesday 8:00 AM – 4:00 PM  
- Wednesday 8:00 AM – 4:00 PM  
- Thursday 8:00 AM – 4:00 PM  
- Friday 8:00 AM – 4:00 PM

“Whatever you want to do, if you want to be great at it, you have to love it and be able to make sacrifices for it.” – Maya Angelou
**APPOINTMENTS:**

Once you have been established as a client of trauma recovery services, you will be assigned to a trauma intervention specialist. First, call your specialist directly at the phone number provided.

**Location of Services:** TRC Services are available at safe locations as determined by you and your assigned trauma intervention specialist. If you receive your services at May Dugan, additional information will be provided for you about the building’s safety procedures.

*Our staff works in the community and works hard to make every appointment on time. Occasionally, because of traffic or weather, we are delayed. The staff member will call if he or she is late. Please also call if you are going to be late.*

**ACCESS TO AFTER-HOUR SERVICES**

Trauma Recovery Personnel are available seven days a week even if your assigned specialist is not available.

If you need Trauma Recovery Support assistance at any point outside of business hours please call:

*Always start with (216) 631-3886. This rings to whomever is on duty. If you reach a voicemail, and it is not an emergency, someone will return your call in the next 24 hours.*

If May Dugan staff is not available, and you are having a mental health emergency, contact the phone number listed below and you are provided with crisis support and resources that are available to you 24-hours / day by phone. *

**All calls are confidential.**

- **Mobile Crisis** (216) 623-6888
- **St. Vincent’s Charity Hospital** (216) 861-6200
- **911 for all other emergency services**

**WEATHER EMERGENCIES**

There may be times during the year when MDC needs to delay opening or, in extreme cases, close the office because of weather related circumstances. If you have a question if MDC is open please call the office at **(216) 631-5800.** If MDC will be closed or delay opening, there will be a specific message you will hear explaining the circumstances.
TRAUMA RECOVERY SERVICES

Trauma recovery services can be provided to the client in his/her home and in other community settings. These services include:

Trauma-Based Education and Therapy Services

- Education for everyone involved on the impact of trauma on the body, brain, family and community
- Stress management, understanding emotions, coping skills, healing support
- Sessions for individual, friends, and family
- No mental diagnosis necessary for support

Advocacy and Stabilization Services

- Support and advocacy with law enforcement
- Immediate needs assessment
- Immediate safety assessment
- Transportation support for medical and legal appointments

Coordination of Care Services

- Advocacy with employers, school administration, and/or others
- Follow-up support coordinating aftercare
- Notary Services
- Financial planning support and advocacy

Victim’s Compensation Assistance

- Education on Compensation Fund
- Support collecting necessary documents
- Support filing for compensation

Long-term stabilization assistance and community reentry

- Assistance transitioning to community supports
DISCHARGE CRITERIA

Discharge planning begins upon admission and is an on-going, collaborative process involving the client, service provider, and referral agencies. Every effort is made to refer client to the most appropriate resource. When it is evident that a client has received optimum benefit from the services provided at MDC, the client will be discharged.

Clients will normally be discharged following successful completion of the agreed upon service plan goals set out in their course of treatment.

Other reasons clients may be discharged may include:

1. Client chooses to withdraw from service delivery area of MDC.

2. Client who fail to attend or reschedule three consecutive appointments or demonstrate a pattern of non-compliance to service recommendations and further attempts to provide treatment is deemed non-beneficial will be considered to be not engaged in treatment and may be discharged.

3. Clients who are in need of services not available through MDC will be referred to other agencies for services. MDC will provide these agencies with information regarding the client’s individualized support plan when authorized by the client and will be limited to what is authorized.

RESTRICTIONS TO SERVICES

MDC reserves the right to restrict services to a client in the event that the client demonstrates behaviors or attitudes that are detrimental to the therapeutic process for themselves and other clients. Aggressive or extreme defiance, refusal to participate in services provided, or hostile or threatening gestures to MDC staff or other persons receiving services shall result in the removal of the client served from some or all of the services available.

MDC will attempt to continue delivering services to the client in an environment that may be more restrictive. When MDC staff determines that the behaviors or attitudes that caused restrictions have been resolved, the client will be allowed to return to the previous level of services. If the behaviors or attitudes continue or worsen, MDC staff will determine if the client is in need of discharge or transition.

“When you change the way you look at things, the things you look at change.”
–unknown
Signs of Trauma

Anyone who witnesses or experiences a traumatic event can be changed in some way. Most reactions are temporary and will resolve fairly short amount of time. However, for some people, particularly children and teens, these symptoms may last for weeks or even months and may influence their relationships with families and friends.

Common warning signs of emotional distress include:

- Changes in eating or sleeping: too much, too little, or not at all
- Pulling away from people and things
- Low or no energy
- Unexplained aches and pains, such as stomachaches, joint pain or headaches
- Feeling helpless or hopeless
- Excessive smoking, drinking/drug use, including misusing prescription medications
- Worrying a lot of the time; feeling guilty but not sure why
- Violent thoughts about hurting or killing yourself or someone else
- Difficulty readjusting to home or work life
- Explosive or intense reactions: feeling excessively angry, sad, happy, or scared in normal interactions

Signs of trauma in children and teens

- Withdrawing from playgroups and friends
- Changes in seeking attention from parents, teachers, and/or other adults
- Having difficulty with transitions: e.g. being unwilling to leave home or school
- Being less interested in schoolwork
- Becoming aggressive
- Having added conflict with peers or parents
- Changes in ability to focus/concentrate
- Acting younger than his/her age
- Vague or conflicting physical problems, particularly stomach aches or body aches

If anyone shows signs of any of the above, please reach out to your assigned staff member for assistance in relieving the effects of trauma. A medical professional can help rule out biological causes of discomfort and support treatment for trauma with a mental health professional to help manage these symptoms in real and practical ways.
Supporting Children and Teens

2-5 years: Provide reassurance, be physically available for comfort, and provide safe zones where they can play and feel secure (quiet corner with their toys/art supplies, for example). Be honest and choose simple words and phrases. Encourage them to express their feelings through play (role play with toys, or express feelings with art).

5-8 years: Provide reassurance about the future. Encourage questions and answer simply and honestly. Offer physical outlets and provide space and time for physical activity. Draw, read, or play together.

8-12 years: Provide reassurance about the future. Create times to talk about feelings and encourage questions. Answer questions directly and honestly. Encourage safe physical outlets for expression as well as quiet places for reading or writing. Monitor social media access.

12-18 years: Maintain a consistent environment. Encourage expression of feelings. Limit or ban social media access. Discourage isolation. Encourage real-time peer support, and seek support groups and/or supportive adults.

TRANSITIONING

Helping yourself and your loved-ones through the first weeks after a traumatic event

Safety: What do you need to feel safe?

Transparency: What questions are you having about the experience?

Peer Support: Who can you trust to help after this experience?

Collaboration: Who do you need to help with this experience?

Voice and Choice: Before you start to send out messages on social media about your experience, look at your answers to the questions above. Sometimes it is a good idea to limit social media exposure until you feel safe, have safe people around you, and have a plan for recovery.

Empowerment: Traumatic events often leave us feeling powerless. What do you need to feel in control of the healing process?

Sensitivity: Blame and shame are often an overwhelming feeling after a traumatic event. Healing does not happen when blame and shame are the most powerful forces at work. Emotions such as compassion, love, forgiveness, and patience promote healing.

“Healing doesn’t mean the damage never existed. It means the damage no longer controls our lives.” –unknown
SUBSTANCE USE AND ABUSE AFTER TRAUMA

Using mind-altering substances to try to cope with the effects of trauma is not uncommon. Adults who experienced neglect, abuse, housing insecurity, and food insecurity as children can also increase the chances of abusing substances. Developing a substance use disorder after victimization is also very common, and often a tempting way to try to “forget” negative experiences and the feelings associated with them. National Institute on Drug Abuse (NIDA) reports that traumatic events are a reason that individuals abuse alcohol and/or drugs. Drugs of abuse may even be selected for their specific effects on the symptoms, like anxiety, hypervigilance, and intrusive thoughts. However, avoiding or replacing difficult emotions associated with traumatic experiences does not fix them. And, the side effects from the drugs may be worse than the original symptoms. If you are concerned that you are over using substances, the following questions may help:

CAGE QUESTIONS ADAPTED TO INCLUDE DRUG USE (CAGE-AID)

1. Have you ever felt you ought to cut down on your drinking or drug use?

2. Have people annoyed you by criticizing your drinking or drug use?

3. Have you felt bad or guilty about your drinking or drug use?

4. Have you ever had a drink or used drugs first thing in the morning to steady your nerves or to get rid of a hangover (eye-opener)?

**Scoring:**

Item responses on the CAGE questions are scored 0 for “no” and 1 for “yes” answers, with a higher score being an indication of substance use problems. A total score of two or greater is considered clinically significant.

CAGE Source: Ewing 1984

“Those who are successful overcome their fears and take action. Those who aren’t submit to their fears and live with regrets.” – Jay-Z
WHY SEEK TRAUMA THERAPY?

Trauma can often be like a disorganized linen cupboard full of pillows and blankets. When that cupboard is not organized, and just stuffed and then forced shut, it can burst open anytime, with all those pillows and blankets pouring out unexpectedly. Trauma can be like that too: emotions, memories, and physical reactions taking us by surprise and dumping all over our day. Trauma therapy gives you the time and space to examine and organize the experience. At the end, the experience will still be there, but you can visit it without getting overwhelmed.

Trauma therapy is not necessarily like other, more traditional talk therapies. It is a directed tool kit of resources to support you and your family understand and move through the experience. There are many well researched approaches to help, but all of them will provide:

**Education and information:** This is an important first step of understanding how trauma effects the body, the mind, and relationships. Reactions to trauma often seem strange, but are often “normal reactions to abnormal circumstances.”

**Affective Modulation** - Increasing the capacity to identify a range of feelings - having a feelings vocabulary and link to appropriate expression; this is where we help to normalize conflicting feelings then methods to deal with these feelings.

**Coping skills:** These are real-world techniques to recognize when your body is reacting to its exposure to the trauma. Even after the experience is over, the body and mind may continue to react as if the trauma is still happening, even if it is not occurring in the current situation.

**Processing:** Once you have your coping skills, most trauma therapies have a processing component where the event is examined in a safe environment. With the coping skills in place, you will have the ability to better support yourself as you go over the experience.

**Finding Community:** Every trauma is different, but healing is often best supported by spending time with family, friends and neighbors who also want the best for you. Once your trauma therapy is complete, we will encourage you to find individuals, organizations, faith communities, activities, and experiences that keep your body and mind healing and healthy.
Important Numbers

Your trauma intervention specialist is: ____________________________________________

Specialist phone number: _____________________________________________________

Specialist’s working hours: ____________________________________________________

Who to call outside of those hours: _____________________________________________

Trauma Recovery Phone: (216) 631-3886
MDC Main Phone: (216) 630-5800 X100

OTHER PROVIDERS/INFORMATION

United Way’s First Call for Help: (216) 436-2000
https://www.211cleveland.org

CEOGC HEAP/PIP Appointment Line (216) 350-8008
https://www.ceogc.itfrontdesk.com

Office (216) 263-6266 or (216) 696-9077
2203 Superior Ave Cleveland, OH 44115

RENT ASSISTANCE

• Catholic Charities Services (216) 781-8262
• Salvation Army (216) 623-7488

HOTLINES PHONE NUMBERS

• Rape Crisis Center (216) 619-6194
• AIDS Task Force (216) 621-0766
• LGBT National (888) 843-4564
• Legal Aid (216) 861-5955
• Human Trafficking (888) 373-7888
• Identification Crisis Collective Birth & Cert (216) 631-4741 X300
• Mobile Crisis Team/Suicide (216) 623-6888
• Domestic Violence Child Advocacy (216) 391-4357
• Stella Maris (216) 781-0550
You have a voice!

And what you have to say is important. The remaining blank pages have been provided as a space for your thoughts, ideas, doodles, art, poems, etc. Got thoughts? Jot ‘em down.
You have a voice!

And what you have to say is important.
WHATEVER YOUR PAST,
YOUR FUTURE IS SPOTLESS.