

TRANSPORTATION

Transportation is provided to medical appointment, court, probation and parole appearances. Our fleet consists of four 25 passenger busses and one 15 passenger van. These vehicles are also used to take clients to outside 12 step meetings to help them find a support network after leaving treatment. A weekly trip to Wal-Mart to ensure clients have necessary personal items.

MILIEU OF RECOVERY

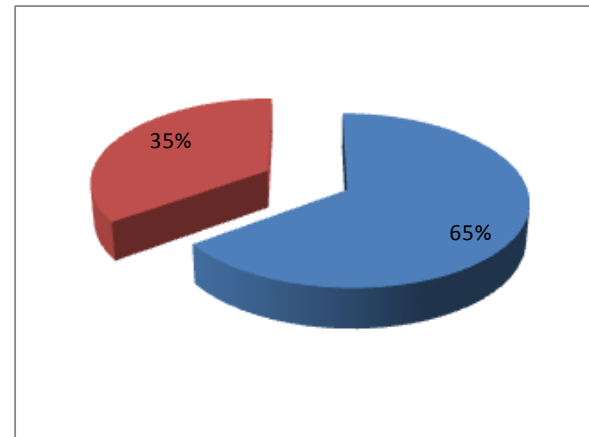
Gateway functions as a “therapeutic community”. All 250 clients are in treatment for addiction. Our client government is an elected body that earns money from grass cutting, etc. The money is used for parties and special events. About half of our population are military veterans. The vets are older and more “broken” than the “civilians.” They are themselves an object lesson in the ravages of addiction and act a role models for the younger men in residence.

Gateway Recovery Systems,
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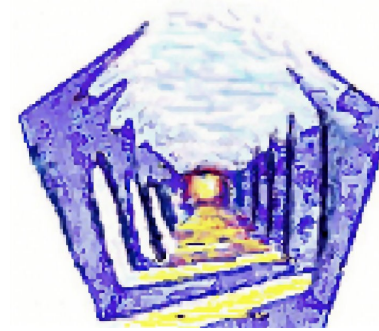
CLINICAL OUTCOMES

Based on data from the 398 non-veterans admitted to Gateway through the “Access to Recovery” program from 2007 to date. All clients who were accepted into the program and participated, however briefly, are included.



**TREATMENT COMPLETED
(40 SESSIONS), COMPLIED WITH
TREATMENT PLAN—65%**

**TREATMENT INCOMPLETE:
LOST CONTACT
UNABLE TO CONTINUE**



GATEWAY RECOVERY SYSTEMS

Residential Treatment for Men with Addictions

BACKGROUND

The “Big Book” of Alcoholics Anonymous indicates that recovery from addictions requires a “psychic change.” This is best accomplished if the addict can reside in a safe environment conducive to change. Standard IOPs or “Intensive Outpatient Programs”, by definition, do not offer this support.

Gateway learned early on that the true outpatient substance abuse model while working well for high bottom addicts did not work as well for low bottom addicts. It is understandable that an addict who has retained his job and goes home to a supportive environment each night can achieve long term sobriety by attending substance abuse sessions 3 times a week outside the home. Outpatient treatment does not work as well with a low bottom addict who has lost the ability to earn a living and in many cases is homeless or goes home to an environment that drugs are easily accessible, if not condoned as proper behavior. The low bottom addict which is so prevalent in the criminal justice system needs a controlled, safe environment, to complement substance abuse treatment for long term sobriety.

Licensed under the Louisiana Department of Health and Hospitals as an Intensive Outpatient Treatment (IOP) center and as Supervised Independent Living (SIL) we can offer both substance abuse treatment and housing.

HISTORY

Gateway has provided substance abuse treatment to the New Orleans area for the last 16 years. We started in 1996 with 28 beds and now are able to serve up to 250.

Prior to Katrina we were predominantly a resource for the Veteran population of New Orleans though we did serve the private community on a limited basis.

After Katrina the Veteran population declined and we began to use some of our resources with the State under the Access to Recovery program 1 (ATR 1). In 2007 the State Access to Recovery 2 (ATR 2) program began allowing us to house and treat up 80 civilian clients mainly in the criminal justice system. We continue to have all these relationships and currently treat and house approximately 110 Veterans along with about 32 civilians under ATR 1 and 40 under ATR 2.

Gateway is economically stable under the same management for 16 years ago. Our stability enabled us to be up and running days not weeks after Katrina and we have avoided layoffs or reductions in staff through these hard times we now encounter.

Gateway offers a quality proven service that would lower the demands placed on the judicial system by helping offenders to become productive citizens. We are willing to modify our services and programs for your clients if change is needed. We now have 50-60 beds available for other programs and can add beds if needed. A tour of this facility can be arranged.

CONTACTS

John McNeely, Executive Dir. 913.9137

J. Cameron Davis, LAC, Clinical Dir. 913.9131

Darryl Chandler, CAC, Administrator 982.3630

HOUSING

Our campus is located in a suburban setting on the west bank of Jefferson Parish. The location is ideal. It is suburban, allowing the clients to see a different way of life that includes hope. All too often facilities such as ours are not in the best of neighborhoods making it hard to see a reason for change. Clients live in spacious two bedroom town homes that are contiguous, allowing us to control our environment. Four clients live in each town home, two to a bedroom.

We encourage a family setting by requiring that all clients within a unit operate as a team in everything from food preparation to house cleaning. We provide a weekly food allotment each Saturday clients. This includes cleaning supplies and personal items such as tooth paste and deodorant. The bonding that occurs between the clients as they begin to live again as sober productive citizens is a major component in the success of the Gateway program. As the clients “heal” they begin to help each other by pointing out unhealthy behavior and supporting each other emotionally.

Gateway does not “lock the clients down” as in a true inpatient facility, but does enforce curfew and other restrictions to movement. For the first two weeks clients are only allowed to leave the premises for medical appointments, after that any time a client wants to leave it must be approved by their counselor. Clients are only allowed overnight passes after they complete the Intensive portion the program. We work with other entities such as forensics that require further controls to movement as needed.



TREATMENT MODALITIES

THE MATRIX MODEL is an evidence-based treatment modality originally developed for and endorsed by SAMHSA. Matrix treatment uses Cognitive Behavioral Therapy (CBT) and Motivational Enhancement Therapy (MET) to teach behavior modification and facilitate short-term sobriety.

THE TWELVE STEPS, the traditional evidence-based model addresses underlying self-esteem and antisocial traits. Solving the need for mind-altering drugs is the long-term solution. The 12 step community can also reach out and provide a support system for the addict

CO-OCCURRING DISORDERS such as depression, bipolar disorder and schizophrenia are statistically present in about 65% of all addicts, especially the socially dysfunctional. Our staff has been trained by 16 years experience working the co-occurring disorders psychiatric staff at the VA hospital. Gateway does not provide mental health care but is expect at dealing with the issues of the “dually-diagnosed” in a residential environment

COORDINATION OF CARE

Client’s needs are assessed holistically. Medical and psychiatric help is sought where needed. Outside care is integrated into the client’s treatment plan. Transportation services are provided to these appointments along with court, probation, and parole appearances as necessary. Gateway has four 25 passenger busses and a 15 passenger van so that we can move our clients in an efficient manner. Our transportation also takes clients to outside 12 step meetings.

CLINICAL STAFF

Clinicians are certified by the *Louisiana Addictive Disorders Regulatory Authority*. They are supervised by a Licensed Addictions Counselor who is also a Certified Clinical Supervisor and certified in the treatment of co-occurring disorders (dual diagnosis)

Clients are assigned to a small group of 12 or less while in the “**INTENSIVE**” phase (IOP). Each group has a permanent counselor who develops and individual treatment plan. To be considered as “**TREATMENT COMPLETED**”, the client must attend a total of 40 sessions (about 8 weeks) and accomplish the goals of his treatment plan

	INTENSIVE Phase (IOP) MONDAY - FRIDAY	SATURDAY	SUNDAY
8:00 a 8:45 a	Morning Meditation: AA or NA thought for the day. Facilitated by an ordained minister		
8:45 a 9:00 a	“Police Call”: General campus cleanup. All clients participate	Grocery Replenish	Church (Optional)
9:00 a 9:30 a	House Cleaning and Inspection Individual Counseling		
9:30 a 10:30 a	Small Group (A, B, etc.): Matrix Model & process group (Counselor facilitator)		
10:30 a 11:30 a	Small Group (C, D, etc.): Matrix Model & process group (Counselor facilitator)		
1:00 p 2:30 p	Individual counseling, 12 Step & Matrix Workbook Individual Study	Visitors	Visitors
2:30 p 3:30 p	(Monday – Thursday): Education Lecture 12 Steps, Medical Model, Discussion (Friday) Orientation for new clients	Client Govern- ment Activities on Holidays	
4:30 p 5:30 p	(Thursday) Client Government (Friday) Recreation	Wal Mart	
7:00 p 9:00 p	12 Step Groups (on site or transported off site) required 30 meetings the first 30 days, then three times a wee minimum	Visitation Ends	Visitation Ends
10:30	Curfew	Midnight Curfew	

Clients are transferred to “**CONTINUING CARE**” upon completion of the INTENSIVE phase. This phase deals with relapse prevention, housing and employment issues.

	Monday - Friday
8:00 a 8:45 a	Morning Meditation
9:00 a 5:00 p	WORK/WORK SEARCH/HOUSING SEARCH
5:45 p 6:45 p	Continuing Care Group: Relapse Prevention, Job Skills, Process group and individual issues
10:30 p	Curfew (unless working)