



Service User Guide and Statement of Purpose for the Charis Primary Programme 2025—2026

Charis Alcohol & Drug Therapy Unit, 31 Mile End Road, London, E1 4TP Reg Charity No. 1154842

The Charis Primary Programme is situated in a modern purpose-built residential unit for men between 21 and 65 on benefits who suffer from alcoholism and / or drug addiction and who are aware of, and want to do something about, underlying emotional problems including childhood issues. It is regulated by the Care Quality Commission. There are up to a maximum of 8 'regulated' places. Charis aims to provide the programme for homeless (in the broad sense) men who cannot obtain funding and who are eligible for housing benefit here. The group work programme is provided free of charge to most applicants.

This guide will give you the information you need to see if Charis is the right place for you. Charis is not for everyone. It is one of a great variety of treatment and rehabilitation units. Different places suit different people and it is important to try and get the right one for you at the right time.

Charis is designed to help you stop your addiction, break from your old negative lifestyle and enable a good and purposeful quality of life. It does this with a programme which is based on abstinence, the Twelve Steps, group work and individual keyworking and counselling. The Primary Programme is 26 weeks long.

This is followed by further longer term residential help on the same site with the same staff. You do not need to start all over again with new staff and a new project. Individual keyworking/counselling and stepwork continue (all twelve steps can be worked through) and help is given with education, training, voluntary work and finding purpose in life.

Finding somewhere to move on to from Charis is the resident's responsibility but Charis will help where it can. Aftercare is then provided whilst you settle into independent living and recovery.

There are a total of 26 places in Charis, including the primary programme.

Stable recovery takes time, probably more than you think. However, it's worth considering how long you've been drinking / using. Consider too, how long you have had underlying emotional problems and how difficult they are to change.

If you really want to change your life and are prepared to be open, honest and willing then read on...

Andy Bannell, Director



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Charis: The Place

- Description of accommodation and facilities in the Charis Primary Programme
- Charis Second Stage
- Charis Terrace
- Where to find Charis

Description of accommodation and facilities in the Charis Primary Programme

At Charis we are able to offer high quality surroundings and therapeutic facilities. We are situated in a quiet close set back from the Mile End Road in East London. Charis offers a peaceful contemporary environment to its Residents.

The experience of staff and other agencies working in the field were drawn on when considering and planning the design. The aim was to create a building of high quality that would afford the Residents the best possible surroundings to start the recovery process. Staff cover is provided 24 hours a day. Nursing care is not provided. Charis Primary Programme is a residential substance misuse service regulated by the Care Quality Commission.



The Lounge

There are single bedrooms with their own desks and wash basins. There is also two lounges, toilet and bathroom facilities and the staff office. On the ground floor there is a dining room, kitchen, a shared laundry, toilets and lobby area. The central feature of a light well and a courtyard with a small fountain and pool give the building light, a sense of space and a feeling of peace. There is a small patio at the back and a garden area in the front.



Our facilities are wheelchair accessible. There is a Stannah chairlift to the first floor.

A Primary Programme room

The Charis Second Stage

Residents can continue their recovery in the Charis Second Stage which is situated on both the ground and the first floor in the Charis building. There are single rooms, two self-catering kitchens, a shared laundry, toilets and bathroom. The Second Stage has its own entrance. Each Resident is provided with a TV if required.

It is also during this stage that voluntary work, training and education, and the search for a clear purpose in life begin. There are no groups during this stage and the emphasis is increasingly on individual responsibility and the establishment by the Resident of his own support networks in the community.



Second Stage Kitchen

The Charis Terrace

The Terrace provides move on accommodation on site for Residents who want to build on their recovery in the Second Stage. There are 12 flats which are designed to help the Resident get used to the responsibilities of living in his own flat whilst at the same time continuing with his individual recovery programme. This is the best preparation for independent living.

Aftercare is available and is planned and agreed on an individual basis between the Resident and his Keyworker / Counsellor.



Ground floor kitchen in the Terrace

Where to find Charis

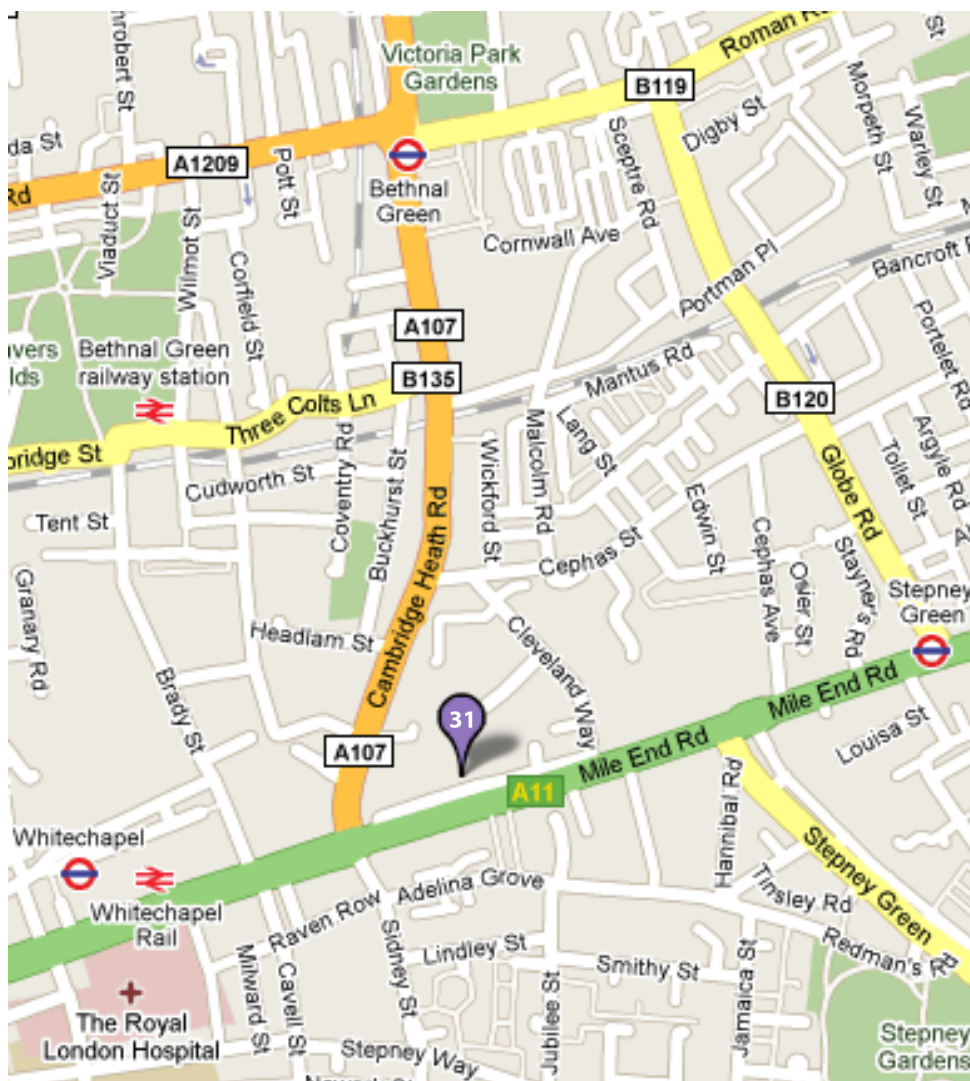
Charis is situated in the heart of London's East End. There are good public transport links. The local area boasts many facilities within walking distance of Charis. These facilities include: leisure centres, swimming pools, cinema, local markets (including Brick Lane market), parks, Whitechapel Art Gallery, the Museum of Childhood, libraries and many others. The Olympic Park is a ten minute bus ride away.

To get to Charis:

By Car: Charis is on the Mile End Road (A11) going into the City, on the right after Stepney Green tube station, or away from the City on the left after Cambridge Heath Road. There is parking on site.

By Tube: Take the District Line, Elizabeth Line, Windrush Line or Hammersmith & City Line to Whitechapel and turn left when leaving the station's only exit. Walk over the first set of traffic lights and Charis is at number 31 Mile End Road. There are large gates and a stone wall.

By Bus: The number 25 and 205 buses stop directly outside in either direction.



The Charis Primary Programme

- Outline of the Charis Primary Programme
- Aspects of the work
- Individual work and Groupwork Programme
- The Primary Programme timetable
- What can I expect in 26 weeks?
- Some comments of residents, former residents and people who know them
- Rules & responsibilities
- Routines and information
- The Purpose of Charis: Philosophy, Aims and Objectives
- The 12 Steps and 12 Promises

Outline of the Charis Primary Programme

The Primary Programme is a specialised programme and aims to help in depth with underlying issues as well as the main problems of alcoholism / drug addiction. It lasts 26 weeks and is for men only.

Two week induction and assessment period

The first two weeks are an induction period during which the Resident gains a first-hand experience in the routine and character of Charis. Written assessments are made concerning alcohol, drug, and gambling histories; psychological, spiritual and social areas; and other practical matters such as housing, legal, debts, etc. During this time he and the staff determine whether Charis is going to be right for him. If it is, a specific individual 'service user plan' is drawn up and the Resident then signs a written undertaking (statement of intent), committing himself to continuing the programme.

Main programme

• Group work:

The Resident will be part of a structured programme of daily group therapy meetings (Monday to Saturday). The group work process is based sharing twice on each set objective with group members giving weekly written feedback to each other. These objectives cover addiction issues as well as attitudes and emotional issues (see pages 11 and 12). There are also two afternoon groups which cover different aspects of recovery practice.

• Individual work:

Life story: The life story is written as fully and deeply as possible with the assistance of the Resident's Counsellor /Keyworker and read out to the group. Stepwork: After the life story comes stepwork. This is the study and understanding of the first three of the Twelve Steps with written self assessments. The Resident's Keyworker/Counsellor and other staff are there to assist and use is made of the American Hazelden literature, Alcoholics Anonymous and Narcotics Anonymous literature and other good quality recovery materials. Other issues: over time the Resident identifies and begins to work on his specific underlying emotional and practical issues.

• One to One Keyworker/Counsellor

Each Resident is allocated a Keyworker/Counsellor with whom they meet weekly.

AA/NA/CA Meetings

Residents are required to attend at least one (preferably two) AA/NA/CA meeting of their choice a week. Fares are provided for this.

Staffing cover

Staffing cover is provided 24 hours a day, 7 days a week.

Completion of Main Programme

When the Resident comes towards the end of the Primary Programme he will need to make a choice about continuing in residential recovery. He will be helped in this by his Keyworker/Counsellor

The Primary Programme finishes with a leaving group letter and a certificate of completion.

Individual Service User Plan

The Individual Service User Plan is drawn up at the end of the induction and assessment period. It is monitored weekly and reviewed internally after thirteen and twenty-six weeks.

Keyworker/Counsellors

Each Resident will be allocated a Keyworker/Counsellor whom they will meet at least once a week.

Aspects of the work

To give an idea of the huge range of other factors involved in recovery, a list follows of some of the areas Residents have had to work through in Charis:

Alcohol /drug addiction	Painful childhood memories	Negative attitudes	Sex addiction
Bereavement and unresolved grief	Emotional insecurity	Loneliness	Fear / anxiety
Physical, emotional and sexual abuse	Low self-esteem	Unforgiveness	Homelessness
Adoption / fostering issues	Hate, anger and resentment	Prostitution	Problems with God
Gambling addiction	Alcoholic / addicted parents	Humiliation	Loss
Criminal activity	Being bullied / bullying	Guilt and shame	Occult involvement
Broken family relationships	False emotional securities	Jealousy / envy	Inner child issues
Rejection (especially in childhood)	Loss of childhood	Search for love	Violence
Psycho-sexual problems	Hurt and damage done to others	Self-pity/victim mentality	Co-dependency
Negative attitudes to authority	Hurt experienced through religious organisations	Pornography	Divorce and marital breakdown

How many of these do you identify with?

Individual Work and Groupwork Programme

The list on the next page has been drawn up on the basis of many years experience of groups and individual work in Charis. It aims to target the key areas in the process of change in recovery both at the addiction level and at the underlying issue level.

There are also two 'blank weeks' where objectives will be chosen by the group with the help of staff. Ideas are listed below.

The list's order should be followed unless there is a pressing issue in which case a 'blank week' can be used ahead of a set objective.

Because the main Primary Programme group is based on objectives, it means that other personal issues and feelings that come up may not get an opportunity to be voiced in the group setting. If something like this comes up the group member can speak with his Keyworker/Counsellor and an opportunity can then be given, if appropriate, to mention it at the beginning of the morning group.

If several group members wish to share other personal issues which are troubling them, then with the agreement of staff, a Tuesday or Thursday afternoon group period can be made free to share them.

Objectives chosen by the group can be made up or chosen from the following suggestions:

Relationships & how to improve them e.g. people, self, pets, places, things etc (select 1 or 2)

Experiences/issues from the past and how you can deal with them more constructively (select 1 or 2)

Emotions/feelings, what they've led to, and how you can handle them more constructively e.g. loneliness, rejection/counter rejection, jealousy/envy, shame, fear, guilt, anxiety/worry, anger, inadequacy/weakness and/or others that you think are appropriate (select 1 or 2)

Negative behaviours/attitudes and how you can handle them more constructively e.g. masks/shields, perfectionism, need for control, grandiosity, intellectualising, prejudice, people-pleasing, denial, co-dependency, blaming, escaping, gambling and/or others that you think are appropriate (select 1 or 2)

Talk about whatever's bothering you

Assets/Virtues and how to develop them e.g. gratitude, caring, compassion, honesty/openness/willingness, humility, hope, patience, perseverance, taking responsibility and/or others that you think are appropriate (select 1 or 2)

Structure, Timeframe and Monitoring Check

Individual Work (Tick when done)	Week	Groupwork Objectives (Tick when done)
	1	Talk about your alcohol/drug history (1 share)
	2	a) Share some of the reasons why you drank/used and give examples b) Share some of the negative consequences caused by your drinking/using
	3	Share feelings past & present towards mother and mother figures (e.g. nan(s), aunts, foster mother(s), older sister, children's home female staff, stepmother etc)
	4	Share feelings past & present towards father and father figures (e.g. granddad(s), uncles, foster father(s), older brother, children's home male staff, step father etc)
	5	Share major hurts experienced by you from the past, including childhood
	6	Share major resentments/hates, including from childhood
	7	Share about major hurts done to others
	8	Share examples of self pity and victim mentality and what you can do to change them (give leaflet)
	9	Talk about Step 1 Powerlessness, how far you've admitted and accepted it, and what you need to do about it
	10	To be chosen by group
	11	Share examples of (sick/negative) pride and self-will and what you can do to change these (give booklet and sheets on pride and humility)
	12	Talk about growth of conscience and remorse and how you can develop these
	13	Talk about Step 1 Unmanageability and what you can do to change it
	14	A) Share examples of jealousy/envy and B) fears/anxieties and what you can do to change them
	15	a) Talk about your inner child and how he affects you/controls you (give booklet) b) Talk about how you can deal positively with your inner child
	16	Put yourself in the shoes of 1)..... and 2).....and share how you feel they felt about your attitudes and behaviour
	17	a) What do you think Step 1 Surrender is and how far are you along the path b) Share blocks to surrender, receive feedback about blocks, and talk about the way forward with them
	18	Talk about experiences of rejection, counter-rejection and self-rejection (include childhood)
	19	Talk about the search (past and present) for love/emotional security
	20	Talk about experiences of grief and loss (include alcohol/drugs, old lifestyle)
	21	Talk about feelings past and present towards Higher Power/God/Spirituality
	22	Talk about shame/low self worth and what you can do/are doing to move forward
	23	Share difficulties with forgiving and receiving forgiveness and what you can do to move forward
	24	Talk about what letting go means and how you can do this (e.g. setting new boundaries, saying no, moving on and choosing new paths, handing over to Higher Power/God, grieving etc)
	25	A) Talk about your need for control and B) share assets and virtues
	26	Share what you have gained from Primary and share your feelings about leaving the group and moving on

The Primary Programme Timetable

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8.00	Breakfast	Breakfast	Breakfast	Breakfast	Breakfast	8.30am Breakfast	
After b'fast -8.50	Household Tasks	Household Tasks	Household Tasks	Household Tasks	Household Tasks	Household Tasks	No Household Tasks
8.50 – 9.00	Prayer & Meditation (Step 11)	Prayer & Meditation (Step 11)	Prayer & Meditation (Step 11)	Prayer & Meditation (Step 11)	Prayer & Meditation (Step 11)		
9.00-10.00	Daily Journal to be handed in by 9.00am	Daily Journal to be handed in by 9.00am	Daily Journal to be handed in by 9.00am	Daily Journal to be handed in by 9.00am	Daily Journal to be handed in by 9.00am	Daily Journal to be handed in by 9.00am	9.00am Optional Breakfast
					9.30am		Visits in: 11.00am – 6.00pm (by prior arrangement only)
					House Meeting	9.45am Change of objectives group	
10.00 – 12.45	Daily group therapy	Daily group therapy	Usually no group	Daily group therapy	Daily group therapy	Visits out: (as agreed) after group – 11.00pm	Visits out: (as agreed) after breakfast – 11.00pm
	Coffee/Tea Breaks	Coffee/Tea Breaks	Individual therapeutic work	Coffee/Tea breaks	Coffee/Tea breaks		
	Daily group Therapy Continued	Daily group Therapy Continued	Visits out (as agreed)	Daily group therapy continued	Daily group therapy continued		
1.00	Lunch	Lunch	Optional Lunch	Lunch	Lunch	Optional Lunch	Optional Lunch
2.00 – 6.00		2.00 – 3.00 Afternoon Group	Free afternoon (unless optional all day trip) Visits in: 2.00 – 6.00pm (by prior arrangement only)	2.00 – 3.00 Afternoon Group		Visits in: 2.00 – 6.00pm (by prior arrangement only)	
	Please complete feedback sheets on the day			Please complete feedback sheets on the day			
	Individual therapeutic work and one to one counselling Leisure activities e.g. gym, library as agreed provided Programme work is on schedule			Individual therapeutic work and one to one counselling Leisure activities e.g. gym, library as agreed provided Programme work is on schedule			
6.00	Evening meal	Evening meal	Optional Evening meal	Evening meal	Evening meal	Optional Evening meal	Optional Evening meal
After meal	At least one AA/NA/CA meeting per week. Be back by 11pm please						
	Can go out for walks/exercise on Mon, Tues, Thurs or Fri but be back by 9.30pm						
9.30	Back by 9.30pm unless at a meeting or at the local cinema if agreed			Back by 9.30pm unless at a meeting or at the local cinema if agreed			
11.00	Back by 11pm	Back by 11pm	Back by 11pm	Back by 11pm	Back by 11pm	Back by 11pm	Back by 11pm
11.15	Retire to own room	Retire to own room	Retire to own room	Retire to own room			Retire to own room (unless day before a Bank Holiday when it is 12:00)
Quiet Please. If listening to music or the radio please use headphones.							
Therapy Room and Lounge are not to be used after retiring time					12.00	12.00	
					Retire to own room. Quiet please	Retire to own room. Quiet please	

What can I expect in 26 weeks ?

What can you expect after 6 months? If you carry out the programme fully, here are some of the things you can expect:

- Six months clean and sober.
- The foundation of a new life without alcohol and drugs.
- Much greater self-awareness, self-understanding and self-control.
- A set of practical ways to handle life and its problems.
- Real hope for the future.
- A strong sense of gratitude for what you now have.
- A clear understanding of how to use and be involved in the 12 Step fellowship meetings.
- A desire and commitment to carrying on the programme of recovery.



The Oasis in Charis

Some comments of residents, former residents and people who know them

The following quotations relate to those who are using or have used the programme constructively. There will always be others who give up or reject the programme for various reasons. Charis would like to think even if the programme doesn't fully work out for someone that they take away something helpful from their stay here.

Some quotations have been altered to preserve confidentiality.

"I came into Charis a broken man, totally dependent and without hope for myself. I'd been through several treatment programmes elsewhere but I relapsed. I saw myself as a failure and I fully believed I'd never change. I worked for many years as an Electrician, but after a few drinks and a couple of joints I portrayed myself as a rocket-scientist to compensate for how I really felt.

Through working the programme at Charis at my own pace, I've gradually learnt the true nature of my problems and how to address them.

I spent most of my life living and struggling in my problems—today, I'm equipped to achieve solutions and successes."

Former Charis Resident who went on into full time employment

"When I came into Charis I thought my life was over— in fact my old life was over. Charis taught me that there is another way to live, a far better way of living I knew nothing of.

I will be forever grateful to Charis for turning my life around.

With the care and skill of the staff I was able to come to Terms with my past and work through things that I undoubtedly drank and used on unknowingly for years.

Today I have a life thanks to Charis."

Former Charis Resident

"Before his admission to Charis, he was unkempt, lazy and lacked interest in anything other than pursuing his habit. He has now regained the sparkle and vitality he had before falling foul of drugs. The change in his physical appearance has been commented on by both friends and members of his family.

He now appears to be relaxed, at ease, in control of his emotions and spiritually happy.

We, his parents, having pursued all avenues in our attempt to persuade our son to abandon his habit, had come to the stage where we saw no future for him. We saw his life ruined and for us the future was bleak. We had reached the stage where we were seriously considering disowning him, because despite trying everything in our power to get him off drugs, we had failed. Now our relationship is that of a normal family. No more worrying every time he leaves the house and we look forward to his visits and company.

We feel that our son was so lucky to be able to be admitted to Charis because there are so many persons wishing to "come off drugs" and so few places offering the standards and facilities you offer at Charis."

Mother and Father of Resident

Some comments of residents, former residents and people who know them, cont...

"I had begun to see Jim as being in a bottomless pit, trapped by his past, scrabbling to climb out, only to fall back down again even more deeply, each time he gained a toehold.

When I heard he'd booked into yet another residential treatment programme I foresaw more years of therapy and self-absorption. Why couldn't he just learn to function in the real world and move forward as an independent adult?

But as Jim worked through the programme at Charis something shifted fundamentally in him. He was no longer destroying himself and his relations with others. He started accepting other people as separate beings with their own needs and wants. He began to father our daughter. I could turn to him for help and support in bringing her up. The transformation in him has been profound—due to his hard work and the safe and loving environment created by the staff."

Ex-partner of former Resident

"Dear Andy and every member of staff,

I would like to thank you from the bottom of my heart for your immense and immeasurable compassion, endless patience, care and devotion that you have shown me. I have not since the death of my auntie been shown this unconditional, consistent and tremendous love.

I thank you sincerely for what you have taught me, which will guide me along the way to be a better person during this second stage of my life. I feel like I have been reborn every day, and I like the way I am now and I thank you that you did not give up on me earlier.

Your perseverance with me is beyond description, and it is only through that, that the Lord is restoring me to sanity daily.

I wish for you all and your families God's love & protection, best of luck, contentment and joy that life can bring.

Thank you so much"

A thank you card from someone leaving Charis

"Without Charis my former husband would now be dead. As his and my insanity grew through the debilitating disease of alcoholism, Charis became the light at the end of the tunnel in his recovery and my recovery where hope, a return to a normal lifestyle, that is one of sobriety, was the prize.

Charis provides the essentials of a new life for all addicts and their families who enter through its welcoming door, a refuge, a place of healing and somewhere where recovery can be achieved with the help of the staff's compassion, patience, guidance, understanding, time and willingness to listen. Following the 12 step programme holds the key to a new lifestyle and the invaluable support of the staff will make life worth living again."

Ex-partner of former Charis Resident

Since Bob came into Charis I have come to know my brother for the first time. Or at least I knew the child but not the man, his early adulthood having been obscured by alcoholism. I always knew he was clever and talented and I knew his talents were exceptional—they shone through even when he was becoming very ill. But what I have learnt is that he is exceptional. A truly awe-inspiring human being with a remarkable strength of character and an enormous capacity for truth and love. Most of us were afraid of these things to a degree, but Bob has learned to embrace them, take them on and find joy in them. From a personal perspective I am very grateful to have this brother who is generous and wise and emotionally honest. I am very proud of him.

Sister of former Charis Resident

"I spent 5 years in and out of detoxes, AA meetings, hospitals before arriving at Charis. Due to the nature of the programme something in me changed and I became more willing to look at myself instead of blaming everybody and everything for what was happening to me.

The first phase of the programme was when I began to get real. Having peers who are all addicted, no matter what, showed me that I wasn't any different to others.

I feel that the staff and counsellors ensure that Charis has a loving and caring environment by their approach to recovery and this plants the seeds of hope in life for the client.

The programme is not easy and without my own efforts and struggles I would not be a recovering alcoholic 'a day at a time', even today. I was taught to get real, in touch with my emotions and have learnt that my Higher Power, at any given time, will not give me a challenge I cannot handle as long as I practice the programme.

The fact that Charis practises the 12 step programme, prepares you for life and gives dignity to the suffering alcoholic is very significant to me."

Former Charis Resident

"Since my dad has come to Charis he has changed completely (for the better). I feel like I know the real him. I am much closer to him, I can now rely on him and trust him. I really enjoy coming to Charis to spend time with my dad, Charis has a calm and friendly atmosphere and it is easy to come and relax and have fun at Charis."

Child of former Resident

"I was very scared and doubtful about committing myself to recovery, but from the day I came into Charis I have experienced great love, care and security and have loved the sense of belonging I have found here.

There is a strong camaraderie amongst the addicts and alcoholics in Charis, and once I learned that I was a lot sicker than I thought I was I have found this camaraderie and understanding invaluable.

My quality of life, my peace of mind, my life expectancy and my happiness increase day by day thanks to Charis. They are showing me how to live in the real world and how to make the best of what God gave me."

Former Charis Resident.



The Charis Terrace

Rules and Responsibilities

1. NO ALCOHOL OR UNPRESCRIBED DRUGS IN ANY FORM WILL BE ALLOWED IN THE PREMISES. NO ALCOHOL OR UNPRESCRIBED DRUGS ARE TO BE CONSUMED AT ANY TIME WITHIN THE UNIT OR OUTSIDE. ABUSE OF THIS RULE WOULD BE A BREAK OF YOUR LICENCE AGREEMENT AND WILL LEAD TO AUTOMATIC IMMEDIATE DISMISSAL. NB This rule includes substances such as "alcohol-free" beers and wines, (super) malt drinks and communion wine.

2. ANY VIOLENCE IN THE UNIT TO STAFF OR OTHER RESIDENTS WILL ALSO LEAD TO AUTOMATIC IMMEDIATE DISMISSAL.

3. No gambling is permitted within the Unit or outside. (This includes such things as bingo, the lottery, fruit machines, raffle tickets etc)

4. Any illegal / criminal activity must cease by admission and throughout your time in Charis. (This includes 'fly pitching', i.e. selling items on the street without a licence)

5. No pornographic material is permitted in Charis.

6. For the sake of the therapeutic process, Residents are required not to start new relationships (as opposed to friendships) during their time at Charis.

7. i) YOU MUST CONTACT STAFF IMMEDIATELY SHOULD YOU SEE OR KNOW OF ANOTHER RESIDENT WHO HAS TAKEN ALCOHOL OR UNPRESCRIBED DRUGS, BEEN VIOLENT, GAMBLER, COMMITTED CRIME, HAS PORNOGRAPHY OR HAS STARTED A NEW RELATIONSHIP.

ii) YOU ARE REQUIRED TO LIVE THE SPIRIT AS WELL AS THE LETTER OF RECOVERY. THIS MEANS STAYING AWAY FROM PLACES, PEOPLE, ACTIVITIES AND SITUATIONS ACTIVELY ASSOCIATED WITH DRINK, DRUGS, GAMBLING, CRIME, PORNOGRAPHY AND NEW RELATIONSHIPS (eg. PUBS, CLUBS, BETTING SHOPS, DRINK/DRUG/GAMBLING HAUNTS AND 'FRIENDS', RACING ON THE TV OR IN NEWSPAPERS, PORNOGRAPHIC MAGAZINES/FILMS, CHATTING UP/ FLIRTING/13th STEPPING etc)

8. (i) All Residents are required to be familiar with, and attend promptly, the weekly program. In particular, getting up and dressed in readiness for breakfast; retiring to your own room at the scheduled time; and carrying out your household task are important.

(ii) The House Routines and Information (see separate sheets) are necessary for the ordinary and effective running of the Unit and must be observed by Residents.

(iii) Sometimes additional requirements are specified in respect of a Resident's therapy e.g. attendance of A.C.O.A, G.A, open Al-Anon or Al-Ateen meetings or

other 12 step fellowships. Such a requirement becomes part of the weekly program for the Resident.

9. (i) Most written prescriptions will be kept by the local Surgery. Staff will go to the Chemist, collect, and book all medication into the medical records.

(ii) Any written prescriptions handed out must be handed into the Charis office immediately on return except those from a hospital that require their pharmacy to be used. In this case, any medicines collected must be bought back to the Charis office and recorded immediately on return.

(iii) Written prescriptions from any other source e.g. dentist must be handed into the Charis office immediately on return.

(iv) It is the Residents responsibility to take and sign for his medicine. It is Charis's responsibility to provide a safe and secure place for the storage of medicines.

(v) No other medicines (including 'across the counter' medicines like mouthwashes, lozenges, diet/vitamin pills, etc) are to be obtained in any other way. Charis Primary Programme has its own supply of homely remedies.

(vi) All Residents are required to register with the Surgery used by Charis.

10. All such substances must be kept in Charis Office.

11. (i) To ensure everyone's peace of mind regarding possible drinking/drug taking, Residents will be tested at the time of admission. They will also be tested at any other time randomly or if drink/drug taking activity is suspected. Refusal to do so will result in immediate discharge.

(ii) When Residents are admitted, a check will be made of their belongings in their presence. Staff also reserve the right to conduct a room search in circumstances where drinking or drug taking is suspected.

12. Charis opposes any form of harassment. Action will be taken against anyone harassing another. (See policy on harassment and sheets on racial prejudice, sexuality prejudice and sexism in the Residents Handbook.).

13. Residents are required not to disclose outside Charis any personal information concerning another person shared within Charis. (See policy on confidentiality)

14. i) Within the first two weeks the Resident must always be accompanied by another Resident who has completed two weeks. If there is no one available the trip out will not be possible. Once the Resident has successfully completed two weeks of the programme he is entitled to go out unaccompanied.

ii) Apart from the time-tabled events, Residents may with the agreement of Senior Staff go out to other AA, NA, GA, or other 12 step or spiritual / religious meetings. Residents need to be back by 11pm in these circumstances.

iii) Residents are free to go for walks after supper Mon, Tues, Thurs & Fri but must return by 9.30pm. Other arrangements e.g. cinema, gym can be made if agreed with senior Staff

15. i) Visits OUT at the weekends to see friends/ relatives etc are allowed after completion of two weeks of the program. These visits must be checked out with your Keyworker / Counsellor. Times for these are:

Saturdays: After group until 11.00 pm (but group must be finished first).

Sundays and After breakfast until 11.00 pm.

Bank Holidays: (please let staff know re supper)

Wednesday: After lunch - 11pm
(when not an all day outing) (please let staff know re supper)

(ii) Other visits (especially to children, family) which cannot occur within scheduled visiting times can in certain situations be arranged for different times but will need the prior agreement of Senior Staff.

(iii) NO OTHER VISITS OUT ARE PERMITTED WITHOUT THE AGREEMENT OF STAFF.

16. i) Arrangements for visitors to Residents are to be made with the Staff by Friday evening. Visiting in times are Saturdays 2pm - 6pm, Sundays and Bank Holidays 11am - 6pm and Wednesdays (when there is no day outing) from 2pm - 6pm. Obviously, any visitor under the influence of alcohol or drugs will not be permitted in the Unit. If you have children visiting you on Sundays/Bank Holidays you may make them a sandwich / snack for lunch.

ii) No casual visitors are permitted whilst on Primary Programme. However, belongings can be dropped off at the main gate if necessary.

iii) If there is some special reason for a visit in outside of these times, the prior agreement of the Senior Staff is required.

17. You must sign in and out in the book provided. This applies if you are going to leave the site and also if you are going to visit someone in the Terrace. You must also sign any Visitors in and out in the "Visitors Book". These books are required for Health and Safety and accountability reasons.

18. Residents are not permitted to use the main kitchen facilities and must stay out of the kitchen.

19. Residents are not permitted in the Office when there is no staff member present.

20. No mobile phones are permitted in the Primary Programme. However, with the permission of Staff, exceptions can be made for maintaining contact with children, paying of housing costs, booking the gym etc.

Mobile phones must be 'cleaned' on admission from dealer contacts, pornography, gambling/dating apps etc.

Computers, laptops etc. and computer games/ consoles are not permitted.

MP3 music players/IPODs are permitted.

21. You are required to attend at least one AA/NA/CA meeting a week.

The Secretary and Treasurer offices are not to be undertaken in the Primary Programme.

22. During the Primary Programme no voluntary work, employment or education /training is permitted.

23. No hats, caps or sunglasses are to be worn during group sessions or mealtimes unless there is a specific medical or religious reason.

24. Dressing gowns or other clothing e.g. T shirt or jogging bottoms must be worn if you are going from your rooms to the showers or bathrooms. Towels around waists are not sufficient.

25. If you come to the Charis Office or go anywhere else in Charis (apart from the showers or bathrooms) you must be dressed in everyday clothing. Dressing gowns/pyjamas are not sufficient. Footwear is required for the dining room and second stage kitchens.

26. Smoking or vaping inside is only permitted in your own room with the door shut. Smoking is not permitted in bed. Vapes must not be visible in groups.

Routines and information

HOUSE ROUTINES

1. Meals and mealtimes

a) During the Primary Programme all meals are provided. Residents are consulted on the menu and on their likes and dislikes. Residents are not involved in preparing or cooking meals.

b) During the Primary Programme, Residents, when in, are required to attend mealtimes, whether you are eating or not. You are expected to stay for a few minutes, at least, equivalent to having a cup of tea or coffee. This does not apply to Saturdays and Wednesdays after breakfast, or to Sunday meal times. No pool is to be played during mealtimes.

c) If you are eating a saved meal or a take away, this must be eaten in the dining room.

d) No food except biscuits, crisps, sweets and fruit is to be eaten in the bedrooms, lounge or therapy room.

e) Occasional food brought in is eaten at Resident's own risk. Cooked food should only be reheated once.

f) If you are going out at weekends, bank holidays or on Wednesday afternoons you must inform staff about the keeping of a meal or no meal will be kept.

g) Money is given on Fridays to help towards lunch on Saturdays, Sundays and Bank Holidays. This arrangement allows flexibility with visiting and with eating.

2. Financial Matters

(a) Residents must keep the Admin Office informed of any Department of Work and Pensions (Benefits Agency) post received. This will help us to help you sort difficulties and problems out.

(b) If you would like us to help with debts / tax issues please bring any letters to the Admin Office.

(c) Residents are responsible for the payment of their contribution towards the housing costs. A record book will be issued by the Admin Office which will act as a receipt book.

3. Fares- Oystercards

a) Fares on public transport in London are usually handled through the Oystercard system. If you do not already have an Oystercard you can obtain one with the help of the Admin Office.

b) Charis will pay for fares to AA/NA/CA meetings up to the cost of two Oystercard Zone 1/2 peak return fares per week. If an additional meeting is required e.g. by your Keyworker / Counsellor, Charis will pay the fares for this too.

c) Charis will also pay one fare to visit children if agreed

with your Keyworker / Counsellor.

d) Charis will also pay for one fare (up to the cost of one Zone 1/2 return per week) to a spiritual / religious meeting if agreed with your Keyworker / Counsellor.

e) Any further arrangements would need to be agreed with the Director.

4. Leisure - Wednesdays

Charis will pay a leisure allowance (currently £10) for a leisure activity on 'free' Wednesday afternoons. You will need to collect this after lunch from the Charis office.

5. Smoking Outside / Use of candles etc.

a) When smoking outside the building please put cigarette butts in the special metal bins (outside the main entrance and the dining room) and do not throw on the ground/drive.

b) The use of candles / oil burners / joss-sticks is not permitted.

6. Household tasks / cleanliness

a) All Residents are asked to clean their rooms regularly and to take part in the cleaning of common areas according to their duties on the daily cleaning rota. Household tasks are normally carried out after breakfast. If however you begin your household task before 7.30 am Mon - Sat please, out of consideration to others, only carry out tasks which can be done quietly.

b) Household tasks should be carried out before the start of the morning group.

c) Please make sure that you clean the bath and toilet after each use.

d) Please do not spray air fresheners in any area apart from toilets. Increasing numbers of people suffer from asthma these days.

7. Sleeping during the day

In order to help re-establish a regular sleep-pattern, Residents should not sleep during the day.

8. Group session breaks

No smoking, tea/coffee or eating/chewing is allowed in the group sessions. There are breaks after each share in morning groups for tea and coffee, and for the toilet.

9. Telephones:

Two payphones are available for personal calls.

10. Valuables

a) You are advised to hand in to the office, for safekeeping, valuable items and large amounts of money.

b) When leaving your room always remember to lock your personal drawer.

c) Always ensure that all personal items that you have not handed into the office for safekeeping are locked in your personal drawer as they are your responsibility.

11. Audio equipment

a) Please keep the sound from radios / music systems etc. down so as not to disturb your neighbours. Use headphones if you wish to listen to louder music.

b) After retiring time, you must use headphones.

c) Radios / music systems etc. are not to be played outside without the use of headphones. This is to prevent disturbance to other Residents and local neighbours.

c) The radio in the dining room should not be played too loudly.

12. TVs/DVDs in common rooms

a) Indecision about T.V. programmes is to be resolved by a straight majority vote.

b) In the event of two sports programmes being on at the same time, others who do not wish to watch sport have the right to watch something else on one of the two TV's.

c) If the same programme is on in both TV rooms, and you want to watch something else, you can (politely!) ask the people in the room with the fewer viewers to move to the other room.

d) A Resident has the right to finish watching a TV programme or DVD which he has already been watching, subject to (b), (c) and (e).

e) In the therapy room, TV has priority over DVD if the lounge is not available.

f) Literature/DVDs of an obviously distasteful nature (e.g. gratuitously violent or sexual) should not be brought into Charis.

g) When extensions are given for TV programmes please keep the rest of Charis quiet because others will need to get to sleep. Make sure the T.V. room door is kept shut.

h) Extensions should be asked for in advance. Extensions of over 20 - 30 minutes will not be given for films or ordinary TV programs which can be recorded. Normally (but not always) longer extensions are given to live sports programmes or highlights of sporting events that have happened during the day.

13. No musical instruments are allowed without the permission of the Director.

14. No pets are to be kept in the Unit.

15. Where applicable, you must use/wear the correct protective clothing e.g. household gloves and safety equipment at all times.

16. When a Resident leaves the Unit, his personal belongings will be stored for ONE MONTH ONLY. After that they will be disposed of.

17. A small sewing kit is available (in Charis office).

18. A hairdressing kit is available (in Charis office).

19. No tobacco selling is permitted.

20. Permission must be sought if a car is to be left overnight in the car park.

21. If a Resident is unable, because of sickness, to attend group he may use the lounge to watch the TV.

22. No drawings or writings which may caricature or disrespect Residents in any way are to be put up in Charis. Notices, rotas etc. must not be written upon apart from the signing of one's own name where it's required.

23. Complementary therapies e.g. Osteopathy may be used providing they do not conflict with the Programme. Please check with your Keyworker / Counsellor

24. No football is to be played on the Terrace lawn.

25. Please do not spit anywhere on the grounds.

26. Please do not feed the squirrels, foxes or pigeons.

27. Drinking red bull or other energy drinks high in caffeine and sugar is banned in Charis.

28. You are not permitted to use therapy room or lounge after retiring time.

Note regarding Alcohol in food, etc...

As part of your complete abstinence from alcohol you will need to abstain from all food which contains alcohol (even if the actual alcohol content has been boiled off). This is accepted AA practice as it is important to steer clear of flavours & tastes which could trigger a desire to take a drink. It is particularly important to be aware of this around Christmas time when cakes, puddings, mince pies and chocolates often contain alcohol.

Communion Wine:

If you attend a church where alcoholic wine is used for Holy Communion you will need to take the bread only. Avoid the wine by leaving the altar rail before the person administering the chalice gets to you. If the procedure is that the bread is dipped into the chalice you will need to indicate beforehand that you do not want this. If this doesn't work, you must refuse it.

The Purpose of Primary Programme: Philosophy

Philosophy:

Charis workers have had many years working and caring for people with chronic addiction problems. Out of this experience comes the very strong belief that problems with alcohol & drugs for this client group can only be dealt with effectively using a programme based on abstinence.

We use the worldwide Twelve Step programme which is based on abstinence not only because it has a proven record of success, but also because it respects and addresses the spiritual as well as the physical, emotional, mental and social dimensions of a person.

Very importantly, it provides an already existing national and international structure of well established, non-residential support groups for residents when they leave the residential setting. (Alcoholics Anonymous, Narcotics Anonymous and so on...)

Relapse prevention is vital to continued recovery and whilst Charis can help to build a foundation for this, it cannot guarantee it in the future. At Charis we attempt to help a resident achieve a clear 'break & make'. As complete as possible a break with the past and the making of a new and purposeful future.

A true break with the past requires facing it and dealing with the issues that arise including those from childhood. A different and purposeful future requires a foundation based on the adoption of positive and constructive attitudes towards the self, others and society.

We believe in enabling a Resident to achieve as high a quality of life as he can in recovery. Such a process requires responding to every aspect of the person including the spiritual dimension.

As trust is the key which unlocks the feelings, one of our highest priorities is the provision of constant, genuine and positive environment. Another high priority is the use of therapeutic and ethical principles which not only help residents find out the truth about themselves but also help them to minimise the effect of past destructive experiences and current negative character traits. Christian ethical principles are included here because they are considered to be among the truest and most effective guidelines available.

Charis aims to be as professional as it can in its approach to the work. Skills are drawn from the disciplinary fields of addiction, recovery, counselling, social work, resettlement work and, where appropriate, Christian healing ministry, to provide as complete and comprehensive a package as possible.

Aims and Objectives

Aims and Objectives:

AIM: To maintain abstinence as the foundation for a new life in recovery.

Objectives (personal goals):

- To admit and accept powerlessness over mood altering substances
- To admit and accept unmanageability of life caused by addiction
- To progress in the surrender process one day at a time

AIM: To develop a more positive mental and emotional way of life.

Objectives (personal goals):

- To identify and own mental and emotional difficulties
- To work towards improving and, to the extent that is practicable, resolving these difficulties

AIM: To develop a positive spirituality

Objectives (personal goals):

- To identify and integrate past personal spiritual experience and understanding
- To identify, own and to the extent that is practicable, resolve past negative spiritual difficulties
- To pursue spiritual fellowship whether through 12 step fellowships and / or other spiritual / faith-based groups

AIM: To address any outstanding practical matters that need attention

Objectives depend on the individual

AIM: To develop recreational and social activities in recovery

Objectives depend on the individual

The 12 Steps and 12 Promises

12 Steps

We admitted we were powerless over alcohol / drugs and that our lives had become unmanageable.

We came to believe that a power greater than ourselves could restore us to sanity.

We made a decision to turn our will and our lives over to the care of God as we understood Him.

We made a searching and fearless moral inventory of ourselves.

We admitted to God, to ourselves, and to another human being the exact nature of our wrongs.

We were entirely ready to have God remove all of these defects of character.

We humbly asked him to remove all our shortcomings.

We made a list of all persons we had harmed, and became willing to make amends to them all.

We made direct amends wherever possible, except when to do so would injure them or others.

We continued to take a personal inventory when we were wrong and promptly admitted it.

We sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for the knowledge of His will for us and the power to carry that out.

Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics and addicts, and to practise these principles in all our affairs.

12 Promises

We are getting to know a new freedom and a new happiness.

We will not regret the past nor wish to shut the door on it.

We will comprehend the word serenity.

We will know peace

No matter how far down the scale we have gone, we will see how our experience can benefit others.

The feeling of uselessness and self-pity will disappear.

We will lose interest in selfish things and gain interest in our fellows.

Self-seeking will slip away.

Our whole attitude and out look on life will change.

Our fear of people and economic insecurity will leave us.

We will intuitively know how to handle situations which used to baffle us.

We will suddenly realize that God is doing for us what we could not do for ourselves.

Charis Primary Programme: Information about additional services and support

- Leisure and recreation
- Health care
- Spiritual and pastoral care
- Financial problems
- Faith and cultural needs
- Health and safety
- Facilities for visitors
- Complementary therapies

Information about additional services and support

Leisure and recreation:

It is an important part of a balanced recovery to enjoy leisure and recreational pursuits. Each Resident is given an information booklet containing details of local resources.

Charis pays for gym membership during the Primary Programme.

Most Wednesday afternoons are 'free' and Residents can choose their own leisure destinations. A small allowance is given towards this. All day outings are also arranged for Wednesdays from time to time.

Charis has its own pool table, board games and a small library. Each of the two common rooms have TVs, and DVD players. No TVs are permitted in individual rooms whilst on the Primary Programme.

Health care:

Resident's appointments are made as a matter of course with the GP, dentist, optician and any other health care professionals as appropriate. The Royal London Hospital is only a few minutes walk away.

Spiritual and pastoral care:

Advice is given on spiritual and pastoral areas. Optional prayer for help and healing is available. This is part of Christian healing ministry and is especially useful in areas where most other professional skills fall short e.g. dealing with occult involvement, difficulties in relationship with God, etc.

Financial Matters:

Help is given with sorting out benefits, debts, fines, tax and other financial matters if required.

Faith and Cultural needs:

Prospective Residents are asked about any special faith and cultural needs during the interview procedure. Every reasonable attempt will be made to accommodate these should admission go ahead.

Local spiritual organisations include several Christian churches, the East London Mosque, Sikh Gurdwara Sangat and London Buddhist Centre which are all within walking distance of Charis. Charis has its own chapel on site which is used for optional private reflection and meditation.

Residents are encouraged to pursue the faith of their choice.

Health and safety:

Each Resident has an individual risk assessment carried out with regard to health and safety needs in Charis. This forms part of the Individual Service User Plan. Residents are also asked to make suggestions regarding health and safety matters. A general risk assessment and many specific risk assessments covering all aspects of Charis have already been made and are reviewed annually.

Facilities for visitors:

Visitors may use all common areas inside and outside of Charis. For legal and health and safety reasons, visitors must sign in and out of the Visitors Book in the reception lobby.

Complementary therapies:

Information about local provision of complementary therapies can be found online.

Charis Primary Programme: Who is it suitable for?

- Criteria for application
- Starting the enquiry and referral procedure
- Overview of the process from start to finish

Eligibility Criteria for application

ALL OF THE FOLLOWING CRITERIA NEED TO BE MET:

- Charis invites applications from men between 21 and 65 (exceptions may be made to this age group) who genuinely seek abstinence-based recovery from alcoholism and / or drug addiction. They would need to be homeless or in danger of becoming homeless (in the broadest sense), and receiving state benefits. Applications from ethnic minorities and gay/ bisexual/gender reassigned men are welcome.
- Charis helps those who do not receive funding. Charis provides the group work programme free of charge for most applicants. The applicant must, however, be able to receive housing benefit here to cover the board and lodging charge.
- The applicant would need to be genuinely honest, open and willing to undertake a 12 step programme and to look at the emotional issues underlying his alcoholism / drug addiction.
- Charis would not be suitable for anyone who is not willing to look into and talk about his childhood.
- The applicant must have (and keep) recovery as their top priority. He must be committed to change.
- Charis would not be suitable for anyone who is closed to the basic spiritual dimension of himself.
- Charis will not accept referrals from applicants on remand or due to be released from prison. Applications would need to be made after release from prison.
- Charis would not be suitable for anyone who was unable or unwilling to participate in group work or to carry out the individual step-work. The Programme requires basic literacy skills.
- Charis cannot accept anyone with a mental health problem.
- Charis cannot accept anyone with an eating disorder.
- Charis is not able to accept those who have committed sexual offences or who have a history of violent offending or arson.
- The applicant must break with any criminal activity and the lifestyle that goes with it.
- The applicant must be willing and able to come off all mood altering substances including anti-depressants, tranquillisers, sleeping tablets etc. and off any strong painkillers AND have come off these before admission. Medical advice should have been taken into consideration where necessary .



Starting the enquiry and referral procedure

Enquiries and referrals are usually made by the applicant himself.

If there are no issues at this stage, the next part of the procedure involves one interview usually. However, the interview procedure is not always straightforward and may require a further meeting.

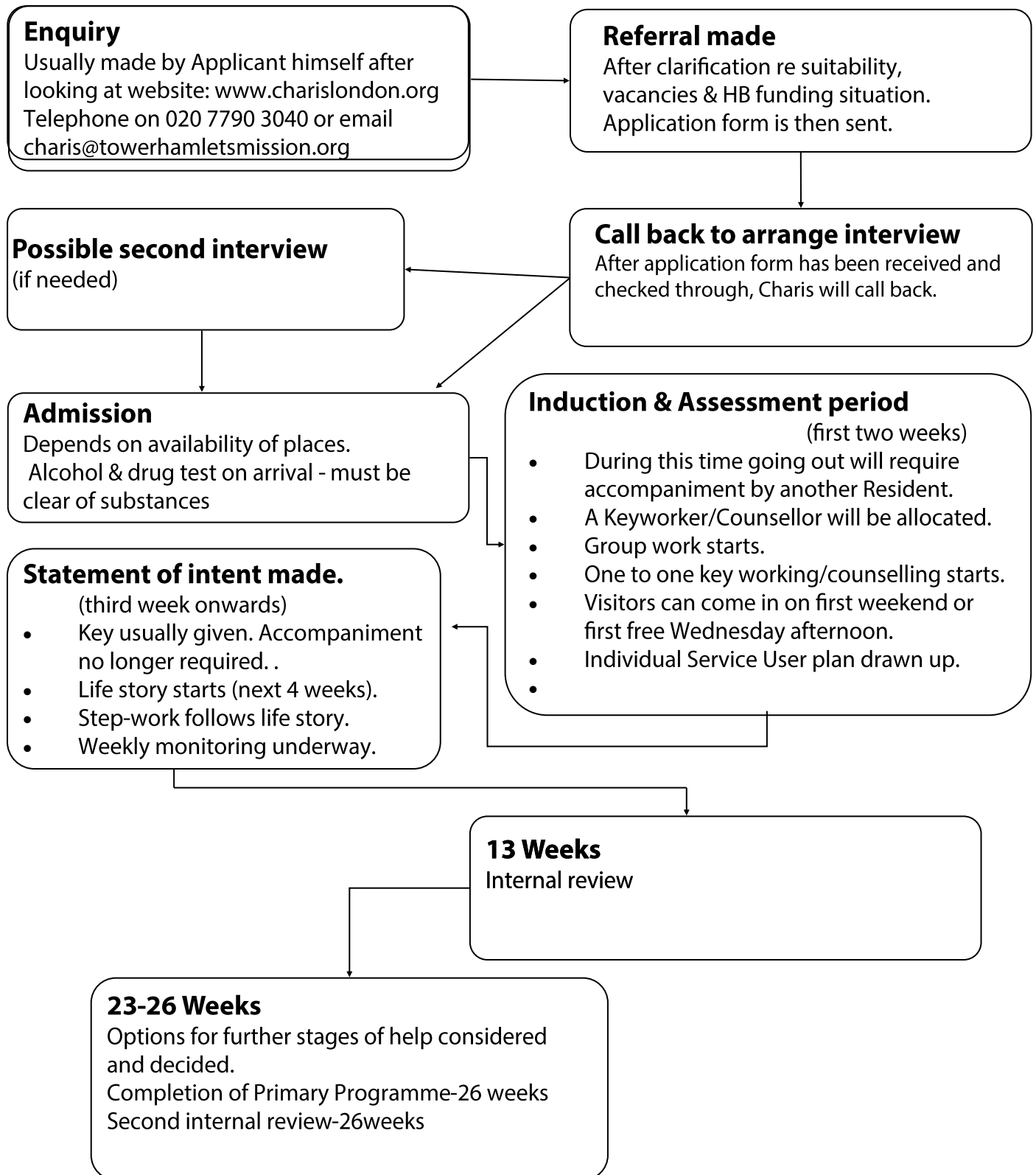
The applicant should be in a reasonable state on the day to undertake the interview procedure or can be in the final stages of a detoxification process.

For referral and enquiries about referral please call between 9 am & 5 pm on 020 7790 3040 or email charis@towerhamletsmission.org. You can also write to: Charis, 31 Mile End Road, London, E1 4TP. It is possible to leave telephone messages outside of office hours.

Alcohol / Drug Test on Admission:

Applicants need to be alcohol & drug free on admission (this includes anti-depressants, tranquilisers, sleeping tablets etc) and a full alcohol and drug test will be carried out. It is very important that the applicant is completely honest with the information he gives at this time. If necessary an admission delay can be arranged.

Overview of process from start to finish



Costs:

- Cost of Primary Programme
- Personal expenses
- 'Extras'
- Sponsorship scheme

Cost of Primary Programme

Charis aims to help those within our eligibility group who do not have funding and who are eligible for housing benefit here. The housing benefit pays for most of the board and lodging costs. The cost of therapy (currently over £210 per week per Primary Programme Resident) is usually significantly subsidised by Charis.

Personal Expenses

Whilst on the Primary Programme the Resident receives personal expenses of £30.65 a week only. All other money (except PIP mobility component) goes towards the gross cost of his stay.

‘Extras’

There are no extra charges.

Sponsorship Scheme

Charis is able to offer all places on a housing benefit basis with the group recovery programme offered free to most applicants. Charis raises money specifically for this purpose. Any applicant would need to be eligible for housing benefit here. They would also need to contribute from their benefits towards their housing and support costs. They would be left with £30.65 personal expenses. The mobility component of DLA is exempt from this but fares would not be provided by us in these situations.

Charis: Personnel and organisation structure

- The Managing Committee
- Mission Statement
- The Staff
- Organisational Chart of Tower Hamlets Mission

The Managing Committee

MANAGING COMMITTEE:

Chair: Dan Richter MA, BA Hons, Dip Mgt, FRSA

Treasurer: Mr Richard Smith ACA

Dr Timothy Robson OBE, BSc, MBBS
Gareth Roach BA Hons
Elizabeth Lamont BA Hons
Vincent Buchanan BA Hons, Dip Counselling
Tamara Bennett BSC Hons, MSc

Associates

Mr Godfrey Featherstone, MBE, BA Dip CE Civ Eng

Mission statement

Tower Hamlets Mission is a Christian Charity, committed to working with people suffering from alcohol and/or drug dependency, who are homeless or in danger of becoming homeless and are receiving state benefits. Our aim is to enable them to break the cycle of chronic addiction definitively and to rebuild purposeful, stable lives through the provision of high quality, comprehensive and long term residential therapy, rehabilitation and resettlement.

Registered Manager– Charis Primary Programme:

Mr G White, Tower Hamlets Mission, 31 Mile End Road, London, E1 4TP

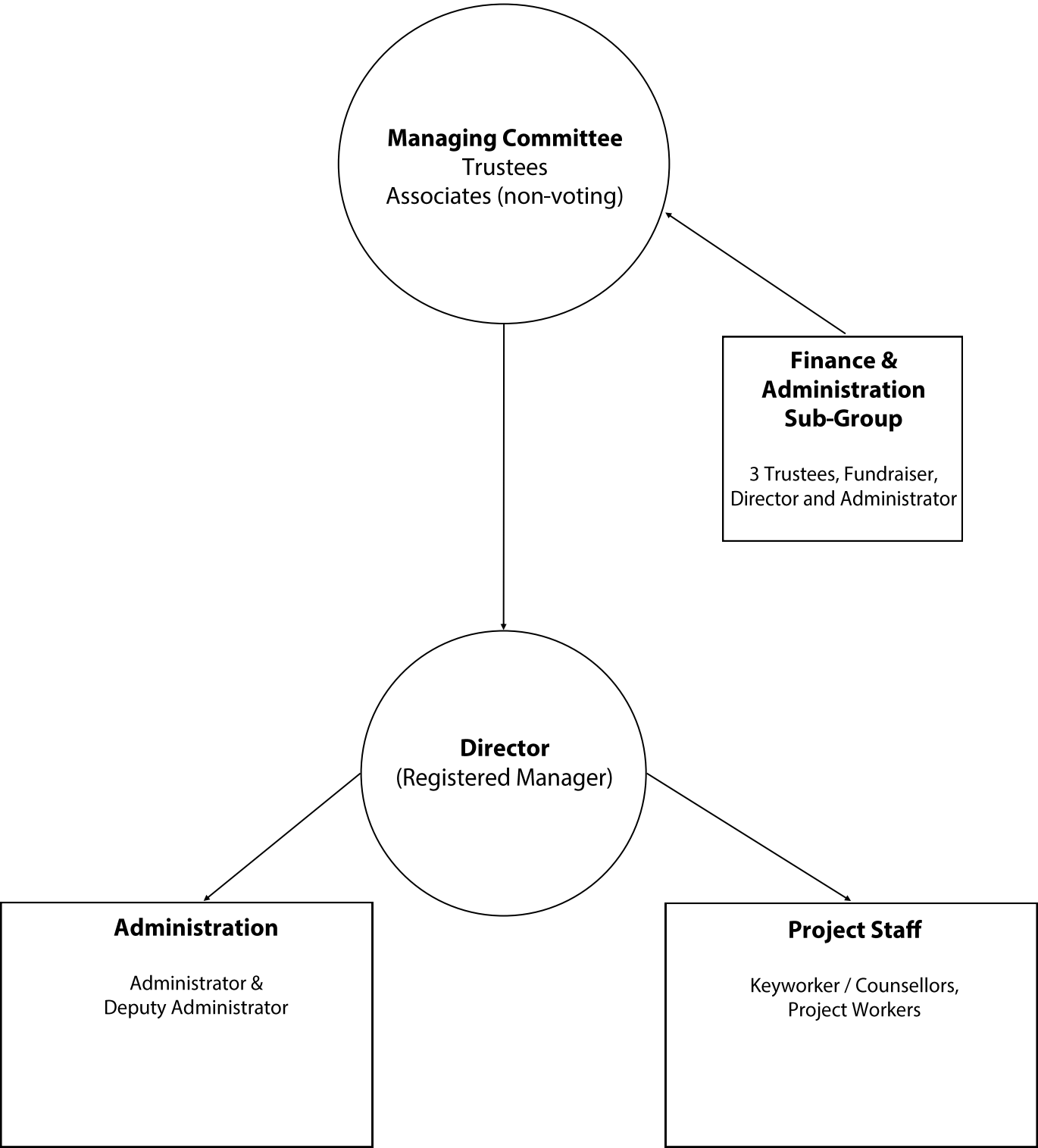
Screening of staff:

All Tower Hamlets Mission staff are required to have a DBS criminal records check in line with the requirements of current legislation.

The Staff

Andrew R Bannell Director &	BA Hons (Law) BA Hons (Phil/Theo) Dip Soc Wk CQSW, Cert MHSC NVQ Level 4 Management, Registered Managers Award 39 years experience in addiction/homelessness field
Jonathon Mabbutt P/T Deputy Administrator	17½ years experience in addiction/homelessness field
Natalie A Bannell P/T Administrator	CSS 40 years experience in addiction/homelessness field
Melanie J O'Reilly P/T Senior Key Worker/Counsellor	BSc Hons (Soc Sci) (Psy) DASS CQSW 40 years experience in addiction/homelessness field
William A O'Reilly Senior Key Worker/Counsellor	BA Hons (Theol) Diploma in Counselling (CSCT) 36½ years experience in addiction/homelessness field
Geoffrey B White Senior Key Worker/Counsellor/ Registered Manager	BSc Hons, Certificate in Counselling Theory (CSCT) Certificate in Alcohol & Drug Counselling Skills (CSCT) Registered Managers Award NVQ Level 4 Management 30½ years experience in addiction/homelessness field
Simon P Sanders Keyworker/Counsellor	BA Hons, Diploma in Counselling 21½ years experience in addiction/homelessness field
Ros White P/T Project Worker	BSc Hons Diploma in Counselling (CSCT) 30½ years experience in addiction / homelessness field.
Steve Dodd Project Worker	BSc, PGCE, Diploma in Counselling 12 years experience in addiction/homelessness field Certificate in Contemporary Chaplaincy
Susanne Lynch P/T Project Worker	BSc (Pharm), NVQ Level 3 Professional Cookery 13 years experience in addiction/homelessness field
Akik Miah Project Worker	NVQ2 Diploma in Professional Cooking 12 years experience in addiction/homelessness field
Joe Cox Keyworker/Counsellor(tr)/ Project Worker	Certificate in Systematic Theology Diploma in Counselling, Level 5 Theology/Counselling 10 years in addiction/homelessness field
Danielle Chamberlain P/T Project Worker	BSW 3 years experience in addiction/homelessness field
Steve Fletcher Project Worker	17 years in addiction/homelessness field

Organisational Chart of Tower Hamlets Mission



Charis Primary Programme: More information

- Rights and responsibilities
- Dignity and privacy arrangements
- Restrictions on choice and freedom
- Participation
- Sample contract
- Equal opportunities policy
- Formal complaints procedure
- Confidentiality policy
- Discharge and disciplinary matters policy and procedure
- Policy on prejudice
- Quality Assurance
- Health and Safety
- Care Quality Commission

Rights and responsibilities

Right	Responsibility
The Resident has the right to be treated with respect by other residents, staff and visitors.	Resident has the responsibility to treat others with respect.
The Resident has the right to be treated without discrimination and abuse.	The Resident has the responsibility to treat others without discrimination and abuse.
The Resident has the right to recovery and to receive effective treatment professionally and caringly carried out, including assessment and drawing up of an individual service user plan in his environment.	The Resident has the responsibility to cooperate honestly, openly willingly and full with the staff, the programme, the house rules and routines.
The Resident has the right to confidentiality from both the staff and other residents.	The Resident has the responsibility to keep the confidentiality of others as required by the programme.
The Resident has the right to make suggestions about the service, express concerns and have recourse if necessary to an effective complaints procedure.	The Resident has the responsibility to make suggestions, express concerns and if necessary, make complaints in a positive way with an honest and genuine motivation.
The Resident has the right to discharge himself from Charis at any time.	The Resident has the responsibility to deal with the consequences of his actions in this regard.
The Resident has the right to participate in the continuing development of the policies, procedures and services that affect him.	The Resident has the responsibility to participate in these matters and constructively for the betterment of all.

Other rights:

The Resident has the right to information in plain language about the programme and the service that Charis provides.

The Resident has the right of access to his case record and any information kept on computer in accordance with the Data Protection Act 1998.

The Resident has the right of referral for a second opinion, in consultation with the GP, when referred to a consultant.

The Resident has the right to participate in the self-help groups of AA/NA/CA and other 12 step fellowships.

Residents have the right to be represented in the Management structure in so far as this involves the services which affect them.

The Resident has the right to a written statement of these rights and responsibilities.

Dignity and privacy arrangements

Privacy

Charis provides single rooms with wash hand basins for all Residents. Room and front door keys are given upon admission and neither staff nor other Residents should enter rooms without permission. Exceptions to this would be a room search in the case of suspected possession of, or relapse on alcohol or drugs and emergency maintenance procedures.

Post is not opened. Belongings however are searched upon admission, in the presence of the Resident. There is a screened off payphone in the entrance lobby for general use.

The confidentiality policy covers any giving out of information. Charis is very slow to agree to various forms of public interest (e.g. media interest)

Privacy is limited however by the requirements of the programme and living together in common.

Dignity

From a Christian and recovery point of view, Charis respects each individual resident as having God-given intrinsic worth and dignity and as having the right to recovery. One of the main aims of the programme is to help the Resident gain or regain that felt sense of dignity for himself. Charis respects the dignity of each Resident by valuing and helping with ALL dimensions of the person - mental, emotional, behavioural, social, physical and spiritual.

Restrictions on choice and freedom

Restrictions on choice and freedom are set out in the Charis contract, programme, rights and responsibilities, the rules and routines and in the timetable which are all part of the Individual Service User plan. They are considered necessary for the effective running of the Charis programme . It is your choice and responsibility in undertaking the programme to respect and implement them.

During the six months of the Primary Programme the focus must remain on the therapeutic change needed as the foundation for success. Education, training and occupational considerations are deferred until completion of the Primary Programme.

Restrictions in various respects are reduced once the Primary Programme is completed.

Decision making and risk taking

Within the limits set out above, Residents make their own decisions and take their own risks provided any difficult situations are talked through first with their Keyworker/Counsellor or with staff. Good recovery practice will always consider risks that jeopardise abstinence before making decisions. Talking with peers in Charis and with staff in such circumstances is wise and prudent. Further recovery advice is available in the 12 step self-help groups.

Participation

Residents have the following ways to participate in the day to day running of Charis, to contribute to the development and review of policies, procedures and services and to voice any concerns:

- Speak to staff at any time.
- Speak to one-to-one Keyworker/Counsellor.
- Write in their Daily Journal.
- Via weekly house meetings when a record will be kept and feedback given regarding action taken.
- The Director will invite a Resident from either Primary, Second Stage or the Terrace to give feedback to the Annual General Meeting.
- Access to Charis policies and procedures is available. They are kept together in a file in the Administration Office.
- Significant changes to the User Guide and Statement of Purpose will only be made after consultation with residents.
- Residents will be consulted regarding the continued stay of new residents after their first two weeks.
- Where possible, Residents will be consulted in the confirmation in post of new staff.
- Resident's satisfaction comments will be asked for each time their individual plan is reviewed.
- Residents are consulted on their dietary needs.
- Residents choose their planned group outings (within financial limits!).
- All Residents will be formally consulted annually on Health and Safety matters and Policies and Procedures in addition to all the options above.



Upstairs in Charis

Sample Licence

LICENCE AGREEMENT between **TOWER HAMLETS MISSION**

(Proprietor) and

MR XXXXXXXXXX (Resident) relating to the acceptance by the Resident of temporary rehabilitative accommodation in Charis Alcohol & Drug Therapy Unit, 31 Mile End Road, London E1 4TP.

Upon payment of the weekly licence fee, the Resident is granted permission to temporarily reside in **ROOM XX** of Charis Alcohol & Drug Therapy Unit from **XX/XX/XXXX** according to the conditions and requirements laid out in this Agreement and any subsequent alterations to them. The room is specifically designed and intended for the purpose of rehabilitation from alcohol and drug addiction. Fuller details of the conditions and requirements are contained in the rules and responsibilities and policies and procedures. The Resident may be required to move rooms.

The accommodation is offered on a weekly basis. It comprises a furnished room within a shared facility. Keys to the room, the ground floor entrance and (after satisfactory induction) the main external gate will be provided. All keys must be returned when the room is vacated.

The licence fee for the room is **£555.36** per week and includes the cost of full board and lodging, insurance, management charges, furniture & laundry services, communal facilities and repair & maintenance. The licence fee should be paid in advance or four weekly in arrears if you are able to claim housing benefit. Any personal contribution after housing benefit must be paid fortnightly or monthly if receiving Universal Credit.

The licence fee for the room is also inclusive of Council Tax, Water Rates and TV Licence.

The licence fee will be reviewed periodically.

The Proprietor is responsible for all repairs, maintenance and replacements regarding the room except where the Resident deliberately caused the damage. In that case, the Resident may be required to pay for the cost of repair/renewal.

The Proprietor reserves the right of entry and holds keys for this purpose. Situations where right of entry would be exercised include emergencies, urgent repairs, searches for alcohol and/or drugs and where immoral or illegal activities were involved. Notice will be given wherever possible and appropriate.

All furniture and fittings remain the property of the proprietor and must remain in the room. Items that you do not wish to keep in your room can be stored by the Proprietor.

The Resident should notify his Keyworker/Counsellor, the Director or the Administrator should he see any equipment or any part of the room in need of repair. Any matter of health and safety should also be so notified.

The Resident agrees to contribute from his benefit towards the cost of the ineligible charges and the one to one therapeutic help provided at the rate set by the Proprietor. He will be left with the current annual personal expenses amount. Any cold weather payments are to be given to Charis. Any money owing

to Charis from any back payment from the DWP must also be paid.

The Resident is required to keep his room clean and tidy and to comply with all instructions relating to the use of electrical and other equipment including the annual portable appliance testing of any electrical equipment. The Resident is also advised to follow the basic rules of food hygiene where appropriate.

The Resident is solely responsible for any damage or loss to his personal property. The Proprietor does not insure the Resident's personal property.

When the Resident leaves the accommodation, he must arrange for prompt collection of his personal belongings. If they have not been collected within one month, the Proprietor will dispose of them.

The Proprietor has insured the buildings and the furnishings provided by the Proprietor.

Should the Resident require in-patient hospital treatment at any time, the Proprietor undertakes to retain the accommodation for the Resident whilst payment is still forthcoming.

The Resident is required not to cause nuisance, noise, or disturbance to other Residents or neighbours in adjoining properties. This is particularly important with regard to music centres, radios, or similar equipment that must be operated at a reasonable and sensitive level. Use of musical instruments requires agreement with Staff first.

The accommodation must not be used for any illegal or immoral purpose or activity.

Use of paraffin, calor gas or other sorts of heaters other than those provided by the Proprietor is not permitted. No candles (unless agreed for Hannukah), oil heaters or joss sticks are permitted.

Making any alteration or carrying out any redecoration without the Proprietor's agreement is not permitted.

The Resident needs to ask the Proprietor before bringing in any items of furniture or furnishings, or a bicycle.

Other conditions of residence, not referred to above, which apply to Charis Primary Programme, must be complied with.

TERMINATION OF LICENCE

This Licence Agreement will be terminated by the Proprietor if the conditions herein are not adhered to by the Resident.

Automatic (and immediate) dismissal applies in some situations (see rules and responsibilities). In most other situations the usual process of verbal warning followed by written warning will apply.

The Proprietor also reserves the right however to dismiss a Resident immediately, if exceptional circumstances should occur which constitute, in the Proprietor's judgement, a very serious or gross moral or legal misconduct by the Resident.

Equal opportunities policy

Charis works with a specific group of men who have become severely disadvantaged through addiction and actual or potential homelessness. It offers a specialist medium and long-term residential method of recovery based on abstinence and the Twelve Steps. Charis provides one service amongst many available.

Charis' service is open to all applicants within the definition above who are able and willing to undertake the programme.

To this end, Charis is committed to the elimination of unlawful or unfair discrimination on the grounds of race, disability, colour, ethnic and national origin, sexuality, religion, age or HIV / Hepatitis status.

Charis requires that each Resident is treated equally and with respect. The Charis programme has a number of inbuilt feedback and monitoring processes which help to ensure a respectful and non-discriminatory environment.

Any action on the part of staff which is contrary to this policy will be treated as a disciplinary matter.



Formal complaints procedure

TIME	STAGES	ACTION
Within one week	A Resident makes a complaint via their Keyworker/Counsellor ↓ (Written or verbal)	1. Record in formal complaints book 2. Director informed
Within a further week Satisfied?	Informal meeting with Keyworker/Counsellor & Director ↓ ←————→ Dissatisfied?	Record basic details in formal complaints book 2. Resident is given a record of outcome 3. Act if necessary 4. Advise Resident about the next stage if necessary
Within a further 4 weeks Satisfied?	Formal meeting with Keyworker/Counsellor, Director ↓ ←————→ Dissatisfied?	1. Record basic details in formal complaints book 2. Resident is given a record of outcome 3. Act if necessary 4. Advise Resident about the next stage if necessary

If a complaint is not resolved write to the Chairperson of the Tower Hamlets Mission Managing Committee. If still not resolved write to the Local Government Ombudsman.

At all stages a Resident has the right to have another Resident with him.

The Resident must make it clear that he is initiating the Formal Complaints Procedure and must act in good faith.

Should the complaint involve a member of staff related (e.g. married to) to the Keyworker/Counsellor, or Director, an unrelated member of staff will replace the related member.

Charis' intention will be to resolve any issues quickly as possible. The stated time limits are intended to be maximum ones.

The Resident is reassured that no victimisation will follow the making of a complaint.

POLICY ON CONFIDENTIALITY

GENERAL PRINCIPLES

1. This policy relates to personal information given by a Resident which is or can be identifiably linked to him either directly or indirectly.
2. Charis will do its utmost to rigorously safeguard such information so as to ensure confidentiality and anonymity.
3. In Charis, confidentiality is to the staff team as well as the Resident's Keyworker/Counsellor.
4. The Law whilst upholding and supporting the right to confidentiality does not make this an ABSOLUTE right.
5. Residents are required to maintain confidence about each other's personal information shared in Charis.

USUAL SPECIFIC SITUATIONS WHERE CONFIDENTIALITY IS INVOLVED

6. (1) Where a Resident requires referral to another agency or body (e.g. another alcohol / drug agency, or to housing department for rehousing), Charis will need to agree with him the sorts of information that will need to be passed on. This is on a 'need to know' basis only. Charis' general professional assessment of how the Resident is doing and any disciplinary matters are not however confidential information in these situations.

(2) Often, personal information sharing agreements between professional agencies have already been made by the Resident as part of the helping process. Where this is not the case, Charis will follow the wishes of the Resident as to whether any personal information should be passed on.

(3) Where personal information is required by an agency about a former Charis Resident, written or verbal authorisation by that Resident is required prior to any disclosure of information.

(4) Where relatives or friends request personal information, none will be given unless the Resident wishes this to be done.

(5) The fact that a Resident has left Charis is not confidential information.

HIV / AIDS / HEPATITIS

A Resident's status regarding HIV AIDS / HEPATITIS is confidential to Charis staff.

INFECTION PREVENTION AND CONTROL

8. Information regarding infections is required to be shared when a Resident moves to, or is admitted to, another healthcare setting (e.g. hospital) or is transported in an ambulance (Health and Social Care Act 2008 Code of Practice).

EXCEPTIONS TO THE RIGHT OF CONFIDENTIALITY

9. (1) If Charis is required by a written Court Order to do so.

(2) If Charis considers that the Resident or some third party is presently at serious risk or in real danger of major harm or there is a matter of 'public interest' involved e.g. serious current safeguarding matter which requires disclosure.

(3) If the Resident himself chooses to break confidentiality by going to a third party e.g. as in the case of a complaint to an outside body or by talking with a relative who then rings Charis for clarification.

These situations are rare.

STEPS 4 & 5

10. In Charis, Step 4 and Step 5 are carried out by the Resident with the help of his Keyworker/Counsellor and with his Step 5 confidant. Those parts of Step 5 which have not already been mentioned in Charis are confidential to his Keyworker/Counsellor and Step 5 confidant only. However, the exceptions listed in 9(1), (2) and (3) above still apply. In addition, these two Steps must not be used to manipulate Charis from applying the consequences of breaking the rules and responsibilities by the Resident should they have been broken by him.

FILES/RECORDS

11. Charis policy is to keep the least necessary written personal information on file. Most of the written therapy work is self-assessment and is kept by the Resident. Should death occur before or after discharge,

any therapy work becomes the property of Charis.

Any computer data held by Charis comply with the Data Protection Act 2018. Any information (and this is minimal) kept on computer about Residents is pass-worded for security reasons. The computer system is backed up and the back-ups are kept securely.

Case Records are kept securely in the filing cabinet in the Charis office, and are not permitted to be taken off the premises.

Temporary, brief, weekly group update notes are destroyed on a weekly basis except when needed for a little longer e.g. to update a Keyworker/Counsellor who has been on leave. A record is kept of the completion of weekly group objectives and short summary notes are also kept of weekly one to ones as required by the Care Act Regulations 2014. The Resident has full access to his case record.

NATIONAL DRUG TREATMENT MONITORING SYSTEM

12. Public Health England collects information on all individuals accessing treatment so that it can monitor the progress of the National Drug Strategy. Full names and addresses are never given but some details (e.g. your initials, date of birth, gender, drug choices etc) are, in order that individuals are not counted twice. If you do not wish for these basic details to be passed on, you should sign to say so on the Application Form.

USE OF INFORMATION FOR RESEARCH, TRAINING, PLANNING AND STATISTICAL PURPOSES

13. Any information which is necessary for the above purposes will not be identifiable unless you consent.

PUBLICITY/PROMOTIONAL MATERIALS

14. No publicity or promotional materials will contain identifiable Residents' information and/or photographs unless the Resident expressly consents to this.

THE CARE QUALITY COMMISSION

15. The Care Quality Commission has the legal right to inspect Residents' case records held by Charis. This applies to the Primary Programme only which is regulated and not to the Second Stage or the Terrace.

If an Inspector wishes to sit in on a staff meeting for the purposes of carrying out their statutory duty, Charis will not mention Second Stage or Terrace Residents' names, in order to preserve anonymity.

MANAGEMENT COMMITTEE VISITS / MEETINGS

16. Managing Committee (Registered Provider) members may come to Charis from time to time for visits and meetings. Any such person is bound by the same confidentiality rules as Charis staff.

BREACH OF CONFIDENTIALITY - EMPLOYMENT PRACTICE

17. Any intentional breach of this confidentiality policy by a Charis staff member will be treated as a disciplinary matter.

RESIDENT'S RIGHTS FOR BREACH OF CONFIDENTIALITY POLICY

18. If a Resident feels that the confidentiality policy was not adhered to by Charis staff, he has the right to invoke the complaints procedure.

The Resident may also consider legal action.

Discharge and disciplinary matters policy and procedure

GENERAL POLICY

Charis' policy is to encourage and enable follow-on help for Residents who continue to cooperate fully with Charis in their alcohol and drug recovery. Accordingly, Charis will assist each Resident in making decisions about the next stage to move onto including Charis' own further stage housing, if appropriate. Charis will also provide after-care counselling if this is agreed and appropriate for those Residents who wish to remain in recovery and who wish to receive Charis help having left. Charis will be unable to help those Residents who have a wish to relapse or who have no wish to stay in alcohol and drug recovery, or who have not fully cooperated with the Charis staff and programme. Suggestions for further help are contained in the Exit Strategy Procedures which Residents receive upon admission and which are gone through during induction. Help will usually be given with any required fare or transport.

PROCEDURES

Section 1. Planned Discharge For Those Completing The Primary Programme

There are well-established paths in recovery for Residents who complete various stages of the programme.

The usual procedure will be to talk with the Resident, and the Keyworker/Counsellor about various options available. For those who are completing the primary programme, formal discussion normally starts towards the end of the groupwork programme. From our experience over many years, any earlier discussion disrupts the therapeutic process and encourages an unhelpful projection into the future.

There are a variety of second stage agencies including Charis' own to consider and advice and information will be given on these if

appropriate. Referrals will be made by staff as required and fares will be paid for interviews and visits. Residents will also be able to talk through the pros and cons of various agencies with Charis staff.

Section 2. Instances When Residents Are Required to Leave At Short Notice

PLEASE REMEMBER THAT YOU ARE FREE TO LEAVE AT ANY TIME. HOWEVER, BEING IN CHARIS HAS DUTIES AND RESPONSIBILITIES TO OTHERS AND THE PROGRAMME. WE EXPECT YOU TO CARRY THEM OUT AS YOU AGREED IN THE INTERVIEW, THE LICENSE AGREEMENT, THE CARE PLAN AND THE STATEMENT OF INTENT.

(A) Breach of 'Automatic Immediate Dismissal' Rules

If a Resident breaches these rules which are fundamental to the nature of Charis and necessary for the welfare and security of all Residents and staff, he is considered to have broken his contract and discharged himself. He will be asked to leave immediately or refused entry back into Charis.

(B) Not Keeping to Other Rules

If a Resident intentionally or negligently breaks other rules and routines, the resident may be asked to leave immediately, or a written or verbal warning may be given depending on the seriousness of the situation.

(C) Non-cooperation with Charis Programme and Staff

Trouble is taken at the interview and during the induction period to help the Resident understand what Charis requires of him. It is the Resident's responsibility in coming to Charis to comply with the Charis requirements in an honest, genuine and positive way.

If a Resident finds that he is continually 'moaning' about the way things are in Charis; or that he is continually picking fault; or is disrespectful to staff/other Residents; or is unable or unwilling to keep to the basic routine of the programme ('bucking the system'), he will be asked to leave.

Repeated non-cooperation with the programme in any aspect will result in the Resident being asked to leave. Usually a verbal warning is given,

followed by a written one if necessary. If however the situation is considered by staff to be serious, a Resident may be asked to leave immediately.

(D) Unsuitability

If the Resident or staff feel that Charis is not the right place for him or that this is not the right time for him, the Resident will need to leave.

(E) Non Return

Non return to Charis by the specified times without sufficient explanation will result in disciplinary discharge.

(F) Non Payment of Resident's Contribution

Non payment of the Resident's contribution, for no good reason, will mean termination of contract and discharge.

BELONGINGS

Charis will store belongings left behind in Charis for one month only and will dispose of them thereafter if they are not collected.

DISCHARGE AND DISCIPLINARY MATTERS RECORD

A record is kept in the Resident's Case Record of any implementation of the discharge and disciplinary matters policy and procedures.



Policy on prejudice

Racial prejudice:

Charis Residents come from a variety of ethnic backgrounds. Unfortunately, personal racial prejudice can lie in everyone. (white to black, black to white etc.)

In Charis there must be genuine mutual respect, inclusivity and care for each other as equal human beings. Please be very careful to watch that your thoughts, feelings, attitudes and behaviour do not contain or convey racially prejudiced content. Be especially careful with off-hand words and remarks or 'jokes'. Avoid black / white groupings / cliques.

Racial prejudice is negative and destructive and needs to be identified, challenged and excluded. If a Resident is intentionally and deliberately racially prejudiced and chooses not to change, he will be asked to leave Charis.

If a Resident is unintentionally racially prejudiced then he needs to be open to being challenged and to receiving feedback. Though he may not have intended the attitude or behaviour he is nevertheless responsible for changing it. He will be asked to do so. If he chooses not to change he will be asked to leave.

Sexuality/Gender Identity prejudice:

The development of an individual's sexuality/gender identity is a highly complex and personal process which profoundly affects their sense of identity, self-worth and relationship with others. Heterosexuality, homosexuality, bisexuality and transsexuality / transgenderism are commonly accepted terms used.

In this area, as in other areas of diversity (race, sex, etc), there is prejudice, discrimination, ignorance and fear.

The development of sexuality/gender identity starts very early in life and is then influenced by a complex range of factors, biological, psychological and social. The particular form of sexuality/gender identity a person has very often feels fixed by mid to late teens. If it is a form which differs from the person's wishes, it often becomes an acutely painful, confusing and distressing issue. If so, profound shame and secrecy accompany it and the person may go to great lengths to avoid talking about it. Group members are sometimes completely unaware of who has issues here.

These are highly sensitive issues which need talking about (primarily in the one-to-one situation) and coming to terms with so that the individual may move further towards self-acceptance (if they have not already done so). This will not happen if negative attitudes are held and expressed by others. Such attitudes become apparent in jokes, choice of words and conversations and such non-verbal behaviour like avoidance or shunning. Sexuality/gender identity prejudice needs to be identified, challenged and excluded. If a Resident is intentionally and deliberately prejudiced and chooses not to change, he will be asked to leave Charis.

If a Resident is unintentionally prejudiced in this area then he needs to be open to being challenged and to receiving feedback. Though he may not have intended the attitude or behaviour he is nevertheless responsible for changing it. He will be asked to do so. If he chooses not to change then he will be asked to leave.

Mutual respect, inclusivity and tolerance are vital in recovery and especially so in the closeness of group therapy.

Sexism:

All attitudes which stereotype groups of people and treat them as unequal need to be challenged in Charis.

Therefore, negative attitudes which stereotype, discriminate against, or patronise women need to be recognised as such and addressed. Commonly held prejudices include considering women as inferior to men and seeing women as objects for sexual gratification rather than as persons of worth and dignity. Attitudes such as these often become apparent in jokes, choice of words and conversations, and are damaging to those who hold them as well as to women.

As there are no female Residents at Charis these attitudes can often go unchallenged. It is therefore very important that you take responsibility for identifying any prejudices you may hold in the area and take steps to change such attitudes and behaviours.

An important aspect in the recovery process is growth in self respect and in the sense of one's own dignity. It is not possible to achieve this whilst denying it to others, so please be conscientious in developing an attitude of mutual respect which recognises women as people of equal worth and

Quality assurance

There are already several quality assurance procedures in place in Charis.

External inspections are carried out annually by the Care Quality Commission. Periodic inspections are also carried out by the Environmental Health Service in respect of food hygiene and health and safety and the London Fire and Emergency Planning Authority in respect of fire safety.

Quality Assurance, Performance Indicator, Policy and Procedure, and Health and Safety surveys are carried out annually.

Inspection reports by the Care Quality Commission can be viewed online at www.cqc.org.uk

Health and safety

Tower Hamlets Mission is a member of the British Council of Safety. It has a health and safety policy and recorded risk assessments which are reviewed annually. Residents and staff are asked to contribute concerns and suggestions as health and safety concerns everybody.

Fire Precautions

Standard fire safety requirements and precautions operate in Charis which is inspected by the local Environment & Health (health and safety) Office and the Fire Brigade.

Monthly fire drills are carried out as are regular emergency bell and lighting tests. An external inspection of the fire drill procedure is carried out annually.

Although fire extinguishers are situated throughout the building, Residents and Staff are required to put safety first and evacuate the building in the event of any danger.

A specific fire risk assessment has already been carried out and recorded. This is reviewed on an annual basis.

Other Emergency Procedures

There are written procedures in the case of the failure of water, electricity and gas services. There is also a written procedure in the eventuality of serious accidents and other emergencies (See health and safety policy for further details).

Care Quality Commission

The Care Quality Commission is the regulatory body responsible for registered residential substance misuse services.

Their main office is based at:

CQC
Citygate
Gallowgate
Newcastle Upon Tyne
NE1 4PA

Email: enquiries.london@cqc.org.uk
Telephone: 03000 61 61 61

Copies of Inspection Reports on Charis (and other regulated residential substance misuse services) can be viewed on www.cqc.org.uk

Contact Details

Phone: 020 7790 3040
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Web: www.charislondon.org

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