

Suggested Guidelines

12 Step A.A. Man on the Bed

Bedside Patient Meetings

Hospital Requests:

1. Please keep your agreed to appointment time and allow time for parking and check in through security at the Hospital. You will need a driver's license or photo ID to pass security and obtain a badge. When you are contacted directly for this service by a hospital staff member, you will be given the patient's first name and private room number and location. **You will be the ONLY volunteer with this information, so if you can't keep the appointment it is imperative you inform the hospital staff member immediately. They will find a replacement volunteer from the volunteer list. (Be aware of the staffs' hours on site may be different than the visiting hours.)** It is best to call the patient in advance through the main switch board to introduce yourself and arrange a mutually convenient meeting time, or follow the procedures of the hospital contact. Please remember that the call to you implies prompt action for a meeting A.S.A.P. as the patients being stabilized from alcohol are typically only admitted for about 4 days and have specifically agreed to meet a member of A.A. in their room. **You may ask another A.A. to accompany (but not replace) you on this 12 Step call.** Often a newcomer will identify well with a sober person with less than 12 months.

2. **You ought to have your own Big Book.** (Only A.A. Conference approved literature is to be used in these meetings.) The patients may have been given a Big Book by a hospital staff member. In the short term, a **When and Where** or our District approved **Mini 12 Step Room Meeting pamphlet** would be prudent to take and leave behind along with any other appropriate A.A. pamphlets for a newcomer. You might encourage a newcomer on discharge to attend one of the large **12 Step Rooms** first and ask for a free "Newcomer's Welcome Packet", which will have a When and Where and all appropriate pamphlets enclosed.

Familiarize the patient with **Bridging the Gap** for transportation to meetings on discharge and the contact number **786-529-4284**. Offer to call from their room to set that up for them if they wish or help them complete a Bridging the Gap contact form.

3. Please keep in mind you are representing A.A. to the patient and the hospital staff and to present yourself in a tidy, courteous and cheerful manner. Often the first impression will make the difference of whether a patient will want A.A. or not and if we will be invited back or not. **Be familiar with A.A.'s Do's and Don'ts.**

Prudent Practices:

A. Why We Are Here:

We who have come to this facility to share experience, strength and hope with you today are members of Alcoholics Anonymous. In our capacity as AA members we have no affiliation with this facility or any other institution. We are simply sober alcoholics who wish to help you achieve and maintain sobriety in AA. Because the single most important aspect of AA recovery is one alcoholic relating to another alcoholic, the focus of this meeting will stay on the disease of alcoholism.

Many of us, in the beginning, felt we were not truly alcoholics because we used other substances or had mental problems. However, those of us who remained in AA did so because we discovered that regardless of our other problems, when examining our past we found that we could not drink safely. We encourage you to listen to our experiences, to try to connect the trouble in your life with the symptoms of alcoholism, and then decide for yourself whether you are an alcoholic. If you decide that you are, we look forward to having you join us on the road to a happy and enthusiastic life of sobriety.

B Suggested Don'ts:

- + Solicit members
- + Make medical or psychological diagnosis or prognosis
- + Offer spiritual or religious services
- + Engage in education about alcohol
- + Provide housing, food, clothing, jobs, money or any other welfare or social services
- + Provide domestic or social counseling
- + Accept any money for services or any contributions from non- A.A. sources

C. Prescribed Medication

Well-meaning A.A.s often discourage other A.A.s from taking prescribed medication which they mistakenly identify as being harmful. In the pamphlet “The A.A. Member— Medications and Other Drugs,” A.A. members are cautioned not to assume the role of doctors in “prescribing” to other A.A.s.

We are not doctors is also an extremely important guideline for A.A.s who carry the message into treatment facilities. There should be no interference by A.A. members with the policies of treatment facilities regarding the use of medication. The administrators of a facility and the Treatment Committee member have already agreed upon this before A.A. is given permission to hold meetings within the facility. Therefore, A.A. members who “prescribe” to patients in the facility are jeopardizing the very existence of the A.A. meeting within that facility. Remember— A.A.s are invited guests! “Our primary purpose is to stay sober and help other alcoholics to achieve sobriety. (pg. 17 *Treatment Committee Workbook*.)

Follow-up and Feedback:

1. If the hospital referring staff member has requested a call back on completion of visit, please do so promptly and thankfully. Be mindful of traditions of anonymity.
2. Please advise the District 10 Treatment committee of problems, needs and suggestions via email so we may all benefit from improving our service. Treatment@District10miami.org
3. Please attend the monthly Treatment Committee meeting at the Coral Room at 3 pm second Saturday of each month.

