



# **Our Brother's Keeper Shelter**

## **Mission Statement**

*To provide safe, faith-based, short-term shelter for those in need in Mecosta and adjacent counties through volunteers and community support.*

**405 S. Third Ave – Big Rapids, Michigan  
231-629-8033  
obk.shelter@gmail.com**

## **OBK Handbook: Forms**

Form A – Shelter Rules

Form B – Intake Form

Form C – Liability Waiver

Form D – Complaint Form

Form E - Hope Chest

## **WELCOME!**

Welcome to Our Brothers Keeper Shelter. Our staff/volunteers are here to serve individuals and families that find themselves in a housing crisis. We are committed to provide: shelter, food, and access to clothing, and community information.

While you are here, we will expect you to seek permanent housing. Opportunities may be available during your stay to help eliminate the barriers that led to your homelessness. Please let us know of any concerns or needs that you have while here so that we may best assist you.

No person, because of race, color, religion, sex, age, familial status, sexual orientation, or disability, shall be discriminated against or denied participation.

The OBK Shelter provides emergency temporary shelter for persons, who for one reason or another have no place to stay. Our shelter can accommodate a total of 34 persons with 2 family rooms and one partitioned room with 12 men and 10 women single. Participants staying at our shelter are encouraged to take advantage of the community resources that might be helpful. Staff/volunteers are on duty to provide a safe environment for all guests.

This handbook covers important information regarding your stay at OBK Shelter. Please take the time to read this material or ask that it be read to you. We expect the households we serve that come to our shelter to utilize our facilities to gain safety, self-sufficiency and respect for themselves and others.

# **OBK Handbook: Policies & Procedures**

## **Shelter Hours – Admissions**

The shelter is open 24 hours a day/7 days a week. New admissions to the shelter are accepted between the hours of 7:00 A.M and 11 P.M., 7 days a week during the winter months. This is subject to staffing and availability.

## **Shelter Hours for Residents**

In order to ensure that the shelter runs smoothly, there are expectations regarding the times in which certain activities are to occur.

- 8:00 a.m.
  - Beds made
  - Guest dressed and ready for 9 A.M. morning meeting
- 8:00 p.m. evening curfew, unless at an approved meeting or event.
- Guests who work nights need to discuss their schedule hours with staff. Persons working after curfew will be admitted to the shelter. Work hours must be documented.
- Guests that have not returned to the shelter by 8:00 p.m. may lose their bed at the shelter and another guest may take your bed.
- Spending the night away from the shelter is permissible with prior approval of shelter staff. OBK is not responsible for any personal belongings left at the shelter.

## **Length of Stay**

OBK Shelter offers temporary services. Shelter participation consists of a 45 day maximum stay, per shelter season. Your stay in our facility is determined individually; in part by the guest's cooperation and helpfulness, however, an extension of time, is available under certain circumstances. An extension will be determined by shelter director, board member, case manager, committee member, team leader

In the event the guest extension is not approved they must vacate the shelter and its premises with just their belongings within 24 hours.

## **Entry Information/Intake**

Upon arrival, all guests will be asked to fill out the following forms:

- Shelter Rules (See Form A)
- Intake Form (See Form B)
- Liability waiver (See Form C)
- Release of Information

Guests and personal belongings will be searched before entering shelter.

## **Shelter Rules**

See Form A

## **Kitchen Access**

You are welcome to any food provided by the shelter. A limited personal supply of food may be stored and consumed at the shelter. All personal food is to be identified with the guest's name and the date that food was brought into the shelter.

The kitchen is open for meal preparing from 6 a.m. -9 p.m.

All food is to be prepared, stored and eaten in the kitchen. Clean up is expected after each meal. Guests are encouraged to participate in the free community meal programs.

2) Food Storage:

- Perishable food storage in guest refrigerator is limited to what can be eaten in 1 day
- Please label and consolidate food.

3) The kitchen is closed from 9 p.m. to 6 a.m.

4) Snacks and beverages are allowed on the tiled areas only. No food or beverages are to be on the carpeted areas including the lockers and sleeping areas.

## **Shower Hours**

Shower is available from 6:30 a.m. – 10:00 p.m. Clean up is expected after each use. Guests should be courteous with use of water (10-15minutes). Street clothes are required in public spaces.

## **Laundry**

A Laundry mat is available just south of the shelter. See staff/volunteers if assistance is needed. Clean linens are provided by shelter as needed.

## **Shelter Chores**

- Guests are expected to complete housekeeping chores around the shelter.
- Please see the chore list to see what you can help with. The volunteers on duty will request assistance with additional housekeeping chores as needed.
- Guests will sign up for chores during a morning meeting.
- It is the responsibility of each guest to keep his/her own sleeping area, dining area and common areas clean and free from personal belongings
  - Turn off lights, radios, televisions, and other appliances when not in use
  - Make bed and tidy individual sleeping area daily
  - Showers cleaned after each use
  - Personal belongings in guest designated lockers

## **Guest Parking on Shelter Parking Lot**

- Please remember that parking is always at your own risk.
- Only shelter guests and volunteers may park on the lot.
- Guest may not park a non-operational vehicle on the OBK Shelter's parking lot, doing so will result in the car being towed away at the guest expense.

## **Transportation Passes**

There are limited transportation passes available if needed to get to local medical or other appointments at community agencies. If you have an income, you are responsible to purchase your own passes.

## **Medications**

- All prescription medications must be signed in with the Shelter volunteer.
- Your medications will be placed in a plastic bag and locked into the cabinet located in the shelter reception area.
- You are responsible to ask the Shelter volunteer for them at the time the medications are to be taken.
- All medications are taken in the shelter reception area in front of the OBK volunteer
- Minor first-aid supplies are available in the shelter reception area (for example: Band-Aids, gauze, burn spray, etc.)

## **TV Hours & Computer Hours**

There are two televisions available for guest use: one in the kitchen and one in the lounge areas. The television use times are posted on the walls near the television sets. Remember all programming should be suitable for all ages when children are awake.

Guests have all day access to the one computer located in the lounge area for internet and word processing application. Both computers are for applying or searching for housing, employment, or other government related applications. They are not for facebook or other social media, downloading of music, or photographs.

Accessing pornographic websites will result in immediate eviction from the shelter.

## **Mail**

- All mail will be delivered to the shelter at 405 S. Third Big Rapids, MI 49307
- The Shelter Manager is responsible for retrieving delivered mail.
- Guests must come to the office to retrieve their mail.
- All mail will be held for two days, after that time, mail will be returned to sender.
- OBK Shelter will not provide postage on guest's personal outgoing mail.

## **Phone Hours**

- The OBK shelter's phone is not available for guest to use.
- Personal phone calls are not permitted from 11:00 p.m. to 6:00 a.m.
- All electronic devices must be on silent after 11:00 p.m. to 6:00 a.m.

## **Cell Phones**

- Personal cell phones may be used during the hours of 6:00 a.m. to 11:00 p.m.
- An OBK cell phone is available for limited time.
- The OBK cell phone may only be used in the shelter reception area.

## **Smoking**

- Smoking is not permitted anywhere in the building.
- Smoking in the building will result in immediate eviction.
- Smoking is allowed once per hour on the hour between 6:30 a.m. and 10:45 p.m.
- Smoking breaks are limited to 15 minutes long.
- Guest must smoke in the designated area.
- All guest who choose to engage in smoking break time will leave the building together and will be allowed back in the building 15 minutes later or once all smokers have finished smoking a cigarette.
- If you are meeting with an agency representative or the shelter advocate you will be allowed a smoking break once your meeting has concluded.
- All cigarette rolling/making is only allowed in the designated area.
- All children must be kept within visual supervision of the parent(s) at all times.
- No smoke breaks are to be taken after lights out.
- Participants must be dressed in street clothes (including shoes) when out for smoke break.
- No smoking is permitted for anyone under the age of 18.

## **Privacy Policy**

**Guests** should have no expectations of physical privacy; however they can expect privacy of personal identity. No pictures or names are to be given out without permission.

### **Phone Calls**

In order to respect the privacy of guests, volunteers are not permitted to release information over the phone regarding guests (past or present) at the shelter. Volunteers may take the name, number, and a message from the caller.

**Volunteers** are to keep guests identity secure. Information given to volunteers is to be kept confidential, including client's circumstances of why they are need of using the shelter.

## **Visitors of Guests**

- Visitors are not permitted in the shelter.
- Visitors are to ring the doorbell and wait to be greeted by a volunteer or designated guest.
- Volunteers are not to verify whether guests are at the shelter. Volunteers may take the name of the visitor and go and check with the guest. Visitors are to wait outside while the volunteer checks with the guest.
- Guests wishing to see the visitor may meet them at the door.
- Guests should let staff/volunteers know if they are expecting a visitor.

## **Guest Expectations**

You are expected to be acquainted with these expectations within your first days of stay in the shelter. After that the shelter staff/volunteers may need to take action regarding infractions. After the first infraction, guests will receive a review of the expectation and a warning. The second will result in a meeting between the guest and team leader. The third will result in dismissal.

- I will treat staff, other participants and volunteers respectfully.
- I will not swear, sexually harass, or use harsh words against others.
- I will maintain personal hygiene and appropriate dress.
- I will provide true and clear information to staff in order to obtain services.
- I will take full responsibility for the care of my own child(ren) and keep them under my watch at all times (if applicable).
- I will make my bed neatly every day.
- I will adhere to the daily schedule of the shelter.
- I will not bring pets other than service dogs in the shelter or on shelter property.
- I will keep food and beverages on the tiled floor only.
- I will comply with curfew. Guests arriving after 8 p.m. will not be admitted.
- I will not gamble on OBK Shelter premises.
- I will cooperate with staff.
- I will report any action by another person that would threaten the safety or security of another person.
- I will not engage in sexual activities at the shelter.
- I will attend all my schedule times with the shelter advocate.

## **Guest Rights**

- You have the RIGHT to leave the shelter anytime you choose.
- You have the RIGHT not to be discriminated against on the basis of race, ethnicity, age, color, creed, religion, sex, national origin, sexual orientation, gender identity, handicap, physical or mental or development disability.
- You have the RIGHT to be treated with consideration and respect for personal dignity, autonomy and privacy by the staff, volunteers and other participants.
- You have the RIGHT to request an extension of your 45 day stay, provided you have complied with the OBK Shelter's rules and regulations and are actively working on permanent housing.
- You have the RIGHT to be informed of the reason(s) for dismissal and the right to receive an explanation.
- You have the RIGHT to file a grievance in accordance with program procedures. (See Grievance Procedures)

- You have the RIGHT to participate in any appropriate and available services.

## **Safety Drills**

- Shelter participates in safety drills (for example fire and tornado drills) on a regular basis.
- In case you detect a fire, immediately contact staff.
- Fire extinguishers are located in several locations throughout the shelter.
- If you hear alarm and if hallway is safe, proceed to the nearest exit. If the hallway is not safe, leave through a window.
- Wait for staff person or fire department to instruct you to return to the Shelter where fire was located.

## **Discharge & Moving**

- Staff/volunteers are to be notified regarding when a guest plans to move out of the facility.
- Guest(s) will complete the exit process.
- Sleeping areas are to be left clean. Trash thrown out and all personal articles removed from sleeping area and locker.
- Staff/Volunteers will sanitize beds, restock bins and put out new linens.
- Any personal belongings left will be placed in the storage for a maximum of 7 days. After that time, items may be thrown out or donated.

## **Grievance Procedures**

- It is the intent of OBK Shelter Staff/Volunteers that you will be treated at all times with respect and that your current circumstances will be kept in the strictest confidence. We try to provide a friendly atmosphere. However, even in the best of situations, misunderstandings may arise causing a participant to feel she/he has been unfairly treated.
- Each participant shall have the right to express his/her feelings concerning his/her dissatisfaction with the Policies and Procedures of the shelter in an appropriate manner.
- There are three (3) steps to the grievance process:
  1. Discuss the matter with the staff/volunteer involved. If the matter remains unresolved, go to the next step.
  2. Request a complaint form (See Form D) and complete it. Forward the report to a shelter Team Leader. She/He will review the complaint and respond in writing to the participant within five (5) working days of receipt of the report. If the participant remains dissatisfied with the resolution offered, she/he may take the next step.
  3. Request that the complaint form be forwarded to the Board of Directors for review. They will take one of the following two (2) steps:
    - Give the participant a written response which would indicate the final disposition;
    - or
    - Call a conference for the parties involved in the incident(s). The final disposition will be issued within five (5) working days of the conference.



### Guest Grievance Form

Guest Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Step 1:** Discuss the grievance matter with the OBK Volunteer involved.

**Step 2:** *Complete the following form and submit to a Team Leader*

Describe the decision of the OBK Volunteer that you wish to appeal. Include any relevant dates, locations, witnesses, or names of other people involved. You may use a separate piece of paper if necessary.

---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---

Guest's address, if other than shelter: \_\_\_\_\_

Guest's telephone number: \_\_\_\_\_

Guest's signature: \_\_\_\_\_

**OBK USE ONLY**

Received by Team Leader: \_\_\_\_\_ Date Received: \_\_\_\_\_

Team Leader's Decision  Upheld  Modified  Rescinded

Comments: \_\_\_\_\_

---



---



---

Reviewed by Shelter Director: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

## **Shelter Agreement**

Please initial by the following:

\_\_\_\_\_ As a voluntary guest of the OBK Shelter, I attest that I am at least 18 years old

\_\_\_\_\_ As a temporary guest of the OBK Shelter, I understand that this is a temporary arrangement with a limited duration of stay.

## **Shelter Rules**

The following rules are for anyone staying as part of our overnight shelter program. The rules are for everyone's safety, comfort and dignity. Please refrain from using profanity and treat everyone with the same respect and courtesy that you want to be treated with. Violation of the rules may result in temporary or permanent termination of participation in the shelter program.

1. Guests and belongings are subject to search at anytime.
2. Alcohol, drugs, weapons, violence and pornography are strictly prohibited.
3. Any guest suspected of being impaired by drugs or alcohol will not be admitted to the shelter.
4. Guests are not to admit anyone into the shelter or prop doors open.
5. No smoking inside the building. Supervised smoking is allowed.
6. Men and women will be assigned designated sleeping areas by staff.
7. Children must be in visual supervision, by a parent at all times, including trips to the restroom and outside.
8. All medications, including over the counter medications, will be given to the staff and kept locked in a cabinet.
9. Guests are expected to observe quiet time from 11:00 p.m.-6:00 a.m. Common areas are closed and guests are expected to be in bed. Guests choosing to leave after 8:00 p.m. will not be allowed back in to shelter (unless at an approved meeting or event)
10. Guests are responsible for cleaning up after themselves and are expected to keep their sleeping area and belongings neat and orderly. Personal belongings are to be kept within each individual locker.

I understand that OBK Shelter makes every effort to ensure my personal safety and the security of my belongings; however OBK Shelter is not liable for any personal injury or damage to my belongings. I take full responsibility for securing my possessions, both while I am on shelter property and when leaving my belongings on the property in my absence. If I am gone from the shelter for more than 24 hours, I understand that my property will be thrown away or donated.

I have read these rules and by signing below understand that violation of any of above rules will result it temporary or permanent termination from the shelter.

Guest Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Guest Intake

Guest Name (please print) \_\_\_\_\_

DATE: \_\_\_\_\_

Do you have a picture id or driver's license?  YES  NO

Do you have a birth certificate?  YES  NO

Do you have a social security card?  YES  NO

Gender: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Phone Number: \_\_\_\_\_

Are you from Mecosta, Newaygo, Osceola or Other: \_\_\_\_\_

Emergency Contact (Name & Number): \_\_\_\_\_

Health Concerns (disabilities, allergies, medications (prescribed and over the counter): \_\_\_\_\_

1.	2.	3.	4.	5.	6.
7.	8.	9.	10.	11.	12.
13.	14.	15.	16.	17.	18.
19.	20.	21.	22.	23.	24.
25.	26.	27.	28.	29.	30.
31.	32.	33.	34.	35.	36.
37.	38.	39.	40.	41.	42.
43.	44.	45.			

**Shelter Liability Waiver**

Please initial by the following:

\_\_\_\_\_ I waive all liability of and hold harmless, the OBK shelter, its Board of Directors and staff for any loss of property I may experience at the shelter or on its grounds.

\_\_\_\_\_ I waive all liability of and hold harmless, the OBK shelter, its Board of Directors and staff for any injury I may suffer at the shelter or on its grounds

\_\_\_\_\_ I agree that in the event that I am unable to provide informed consent to emergency medical treatment, OBK Shelter is authorized to arrange for such treatment by a licensed physician, including calling 911 and/or transportation to the nearest available medical site.

\_\_\_\_\_ I understand that the data collected during intake is for demographic and tracking purposed only, and will be kept confidential.

Guest Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Housing Assistance**

The guest gives their consent for Our Brothers Keeper Shelter to discuss with the local "Housing Assistance and Resource Agency" (HARA) for helping the guest to seek housing.

Guest Signature \_\_\_\_\_ Date: \_\_\_\_\_

**HOPE CHEST**  
**GUEST SAVINGS PLAN POLICY**

The Hope Chest Guest Savings Plan is mandatory participation requirement for any guest with a regular income. The plan requires 30% of the guest income to be given to the shelter manager to be placed in a savings account. This money will only be accessible to the guest by meeting their goals established with the shelter advocate or upon the guest checking out of Our Brothers Keeper homeless shelter.

- The amount the guest is expected to contribute to the Hope Chest is figured on a daily basis and paid by cash or money order to the shelter manager.
- Daily record of the amount the guest has accrued in the Hope Chest is available from the shelter manager.
- Withdrawal of the monies within the Hope Chest requires approval from the shelter advocate and will be based on meeting established goals.
- If a guest checks out of the shelter they are entitled to all of their Hope Chest funds.

I have been read the Hope Chest policy and understand the shelter manager will follow up with me regarding this policy.

I currently have a monthly income such as; employment, or disability? YES/NO

---

Guest Signature

Date