Breakout 15 — Health and Wellness Basics — Sleep, Food, Movement, Hygiene, and When to Seek Care

One sentence for the board: Taught by LPN staff, this group teaches general health and wellness basics in plain language — sleep, food, movement, hygiene, and how the body works day to day — and when a health question needs a private conversation with staff or a provider, not advice in group.

Purpose	Teach general health and wellness education, taught by LPN staff, in plain language: sleep, food, movement, hygiene, body basics, and when to seek care — in general terms only, with every personal health concern taken private to staff or a clinician and no personal health advice, diagnosis, or medication advice in group.
Who chooses this group	Curriculum groups meet separately for men and for women. Breakout groups are coed unless otherwise specified. Placement for participants who do not fit a men/women split follows the participant's stated preference, confirmed with staff for safety and privacy. Nothing about a participant's placement is disclosed to the group. Any participant who wants plain, general health and wellness education taught by LPN staff. No participant is asked to share any health condition, measurement, or medical history in group. A participant who shares a personal health concern is taken private to staff or a clinician the same day. The stated preference stands unless a stated safety reason requires a private conversation. Safety and privacy are the only criteria. This group is taught by LPN staff.
Length	60 minutes
Materials	Paper and pens for every client, whiteboard or

	flip chart and markers, the topic resources named in this outline, and the program's current medical-referral information, one-page picture/word sheet of the same-day warning signs, posted on the board

Time	Segment	What happens
0–5 min	Welcome	Ground rules, confidentiality limits, right to pass. State plainly at the start: this group is general health and wellness education taught by LPN staff, not personal health advice — personal health concerns go private to staff or a clinician the same day.
5–30 min	Teaching	The teaching points below, in order, on the board: health basics, sleep, food, movement, hygiene, when to seek care, the private path, and keeping the basics on a hard day.
30–45 min	Discussion	Prompts below. General answers are always complete answers — no one is asked to share any health condition or history.
45–55 min	Practice — my wellness basics plan	Clients write one sleep step, one food step, one movement step, and one hygiene step, each dated, and name the private path for a health question. Writing stays with the client.
55–60 min	Close	Takeaways, the private path and medical referral path restated, and one basics step each client will actually do this week.

Teaching points

- **Health basics, taught plainly.** LPN staff teach this group as general health and wellness education — what the body does day to day, in plain words: the heart moves blood around the body, the lungs move air in and out, digestion turns food into energy, the skin protects the body, and teeth and mouth need daily care to stay sound. General information is taught to everyone in the room. Nothing in this group is advice for one person's health, and no one is examined, measured, or diagnosed here. A question about one person's health goes private to staff or a clinician the same day.
- **Sleep: the steady base.** Sleep steadies mood, decision-making, and cravings, and steady sleep is built on steady habits: a fixed wake time, even on rest days; a wind-down routine with dimmer light; caffeine ended well before bed; screens out of the bed; and the bed kept for sleep. Adults need seven or more hours of sleep a night on a regular basis. If sleep problems persist — trouble falling or staying asleep, loud snoring with pauses in breathing, or exhaustion despite long nights in bed — that is a medical conversation, and the facilitator connects the client to medical staff the same day. Sleep aids, including anything bought over the counter, are medication questions for a provider, never group advice.
- **Food: regular and enough.** Regular meals steady mood, energy, and cravings better than any single food choice. The general pattern taught here is simple: eat regularly, build meals around a variety of foods — vegetables, fruits, whole grains, and protein foods — drink water through the day, and keep sugary drinks and heavily processed foods occasional rather than constant. No meal plan is prescribed, no calorie target is set, and no food is forbidden in this group. Clients with diabetes, allergies, eating concerns, or any medical nutrition need take their questions to medical staff or a dietitian, and facilitators never comment on any client's weight, body, or eating in the room.
- **Movement: a little, every day.** Movement steadies mood and stress, improves sleep, and gives the body a daily signal it can use again. The first principle matters most: some activity is better than none, and moving more while sitting less already helps. Start where the client actually is — a daily walk, stairs, stretching, work that uses the body — and build gradually. Anyone with a heart condition, injury, including ongoing pain, or other health concern checks with a medical provider before starting a vigorous or new exercise program. Gentle, short movement — a short walk, gentle stretching — counts, in general terms; what fits one person's pain is a private conversation with a provider the same day.
- **Hygiene: small care, daily.** Daily hygiene is ordinary care that protects health and dignity: wash hands with soap, especially after using the bathroom and before eating; shower or bathe regularly; brush teeth and care for the mouth daily; keep skin clean and dry, care for feet, and change into clean clothes. Cuts, sores, rashes, or skin problems are not examined or treated in group — a client with a skin, foot, dental, or other personal care concern is taken private to staff the same day. No one is singled out for their hygiene, habits, or history in this room.
- **When to seek care — and how.** This group teaches recognition, not diagnosis. Some signs need medical attention the same day: chest pain or pressure, trouble breathing, sudden severe headache, sudden weakness or speech difficulty, a wound that is worsening, fever with confusion, severe pain, or thoughts of harming oneself. Teach this list from the picture/word sheet posted on the board, pointing as each sign is named. In an emergency, call 911 or call or text 988; otherwise, alert staff and medical providers the same day and do not wait for the

next group. Routine care is part of the same teaching: establish primary care, bring a current list of medicines and questions to appointments, and keep dental and vision care in the same plan. The facilitator's job is to help the client name the appointment they need and get connected to staff who can arrange it.

- **The private path for personal concerns.** If a participant shares a personal health concern in group, the facilitator thanks them, does not advise in the group, and takes the concern private to staff or a clinician the same day. The group never examines, diagnoses, or advises on a person's health, and no plan or diagnosis detail is discussed in the room. The facilitator confirms the counselor plan is in place, without reading clinical detail. Asking for private help is a success in this group, never a disruption.
- **Keep the basics on a hard day.** On the hardest days, the plan shrinks to its smallest faithful form: one regular meal, one short walk or stretch, one fixed wake time, one hygiene step, and one honest contact with a support person or staff member. A hard day is not a failed day when the basics were kept. Clients choose steps small enough to keep on a hard day when they write their wellness basics plan below. If the basics cannot be kept for several days running, that is information for the care team, shared the same day — not a private failure to hide.

Discussion prompts

- "Which basic — sleep, food, movement, or hygiene — is hardest to keep steady here, and what gets in the way?"
- "What is one small sleep or hygiene step that would actually fit a real day here, not an ideal one?"
- "What makes it hard to ask for medical help, and what would make asking easier — in private, with staff?"
- "What is one sign every person in this room should act on the same day, without waiting for the next group?"

Practice — my wellness basics plan (10 minutes, your page stays with you)

1. Choose one sleep step for this week: a fixed wake time, a wind-down start time, or a caffeine cutoff. Write the time and the first night you will try it.
2. Choose one food step for this week: a regular meal time, a food you will add, or water you will carry. Write what, and on which days.
3. Choose one movement step: what you will do, for how long, and on which days — starting where you are, not where a guideline ends.
4. Choose one hygiene step: handwashing, dental care, showering, or foot care. Write what, and when in the day you will do it.
5. Name the private path: who you will ask privately if a health question comes up, and when you will ask them. Write the name and the day.
6. Keep your page. It is yours. Nothing written in this practice is collected, copied, or kept by the facilitator or the program.

REDIRECT SCRIPT — MEDICATION QUESTION (say word-for-word)

Thank you for asking. This group teaches general health information only — I cannot advise on your medication here, even though I am LPN staff. I will take this private with [staff/clinician] today at [time/place], and they will answer it with you. Let us go back to the general teaching.

Second press — say: "I hear this matters now. The private conversation today is the fastest safe way to get you a real answer. I will make sure it happens today."

Facilitator boundaries — Health and Wellness Basics

- **Education only — LPN staff teach; no personal advice.** This group teaches general health and wellness information, taught by LPN staff. Facilitators do not diagnose, interpret symptoms, recommend treatments, diets, supplements, or exercise programs for any individual, and do not comment on any client's body, weight, or eating. Every personal health question is taken private to medical staff or the client's own providers the same day.
- **A personal concern goes private — never advised in group.** If a participant shares a personal health concern, the facilitator does not advise in the group, takes the concern private to staff or a clinician the same day, and returns the group to general education. No personal health detail is discussed, examined, or recorded in the group.
- **Counselor plan confirmed in place, no detail.** The facilitator confirms the counselor plan is in place, without reading clinical detail. No plan goal, diagnosis, or clinical detail is recorded or discussed in group, and no facilitator advises on any client's plan.
- **Medication affirmed; decisions referred.** Facilitators affirm clients who use medication exactly as prescribed, never advise a client to start, stop, or change any medication — including sleep aids and over-the-counter products — and refer every medication question to medical staff the same day.
- **Medical concerns go the same day.** A client who reports pain, illness, withdrawal, a worsening condition, or a psychiatric concern is connected to medical staff through program procedure immediately. In an emergency, call 911 or call or text 988. The group never waits, watches, or treats the concern with group skills. See the escalation box at the front of this packet and the Facilitator Guide crisis protocol.
- **No shame; warrior close.** No client is singled out for their health, habits, or history of postponed care. Facilitators correct shaming language in the room, directly and kindly, and keep every discussion at the level of general education and personal planning, never personal examination. Close with the basics kept: "Sleep, food, movement, and clean daily care — one dated step this week, kept like a promise. That is how warriors hold ground: by tending the ground they stand on."

Sources & Evidence

Clinical evidence: U.S. Department of Health and Human Services. Physical Activity Guidelines for Americans, 2nd edition (2018) — adults should move more and sit less; for substantial health benefits, 150 to 300 minutes a week of moderate-intensity, or 75 to 150 minutes a week of vigorous-intensity aerobic activity, or an equivalent combination, spread through the week, plus muscle-strengthening activities on two or more days a week. Centers for Disease Control and Prevention. About Sleep — adults aged 18 to 60 need seven or more hours of sleep per night on a regular basis,

and insufficient sleep is linked with poorer health outcomes.

Recovery-support evidence: Substance Abuse and Mental Health Services Administration — the four dimensions of recovery: health, home, purpose, and community, with health as the dimension that includes physical well-being and the everyday conditions that sustain recovery. General hygiene and everyday body care are taught here as part of the health dimension's everyday conditions, in general terms only. National Institute on Drug Abuse. Drugs, Brains, and Behavior: The Science of Addiction — treatment as a combination of behavioral therapies, medications where indicated and decided with a medical provider, and recovery support, with the everyday conditions of health, sleep, and routine supporting the brain's recovery. No outcome or timeline is promised for this group.

Note: No outcome is promised for any group in this packet.