

FOR THE FAMILY

Information on *schedule*.

A family under stress does not need optimism. It needs a fact, on schedule.

WHAT YOU WILL RECEIVE

Two things, *every* week.

Every Saturday before 1 pm.

A WhatsApp update from Aruna DaCosta. It carries a brief progress note, one or two contextual photographs, and the schedule for the week ahead. The dispatch is logged in the Family Communication Log.

Every fortnight, from week six.

A family session, 60 minutes, with the clinical lead or a counsellor. Held in person where possible, by video call where not.

AND WHAT YOU WILL NOT

What you will *not* receive.

- **A daily update.** The cadence is weekly because the work asks for it, not because we are short-staffed.
 - **Speculation.** We tell you what is happening, not what we hope is happening.
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IF SOMETHING ESCALATES

Same day, by Aruna, directly.

If a significant clinical event occurs — a self-harm risk, a medical event, a serious incident — the family is informed the same day, by Aruna DaCosta directly. The communication is documented in the file.

In a true emergency — an acute medical event, a hospital transfer — Aruna will call the family during the event, not after.

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WHAT WE ASK IN RETURN**What we ask of *you*.**

Three things, no more.

- **One approved contact on the file.** Multiple-relative arrangements complicate the loop and reduce the quality of every update.
- **Honesty in the family session.** The patient hears what is said in the family session; pretending the home is steady when it is not undoes a week of work.
- **Patience in the first two weeks.** The patient settles into the rhythm slowly.

DISCHARGE**The family *discharge* session.**

A discharge session is held with the family in week twelve, or in the final week of the ninety-day admission. A Family Discharge Summary is issued. It covers what to expect post-discharge, what to watch for, when to call.

For the year after discharge, a family check-in is held quarterly with the family liaison. The Family Discharge Summary covers what to expect; the check-ins confirm what is occurring.

READING THE FOUNDATION**A note on what families often *want to hear*.**

Families often arrive expecting a particular kind of language — a recovery narrative with a guaranteed ending, a description of the patient as 'on a journey'. We do not write that way.

What we offer instead is a published cadence, a documented protocol, a named contact, and a refusal to speculate. If the work goes well — and most weeks, it does — the family hears about it on Saturday before 1 pm, in a paragraph that names what happened. If the work goes badly, the family hears about it the same day.

That is what trust looks like in this building.

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