



RESIDENTIAL REINTEGRATION PATIENT HANDBOOK

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PATIENT HANDBOOK

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FAIRVIEW RECOVERY SERVICES INC.

PATIENT RIGHTS (Updated August 2023)

815.5 PATIENT RIGHTS

(a) Each patient has the following rights:

- (1) to receive services responsive to individual needs in accordance with an individualized treatment/recovery plan, which the patient helps develop and periodically update;
- (2) to receive services from provider staff who are competent, respectful of patient dignity and personal integrity, and in sufficient numbers to deliver needed services consistent with the requirements of the provider's operating certificate;
- (3) to receive services in a therapeutic environment that is safe, sanitary, and free from the presence of addictive substances;
- (4) to know the name, position, and function of any person providing treatment to the patient, and to communicate with the provider director, medical director, board of directors, other responsible staff or the Commissioner;
- (5) to receive information concerning treatment, such as diagnosis, condition or prognosis in understandable terms, and to receive services requiring a medical order only after such order is executed by a medical provider working within their scope of practice;
- (6) to receive information about provider services available on site or through referral, and how to access such services;
- (7) to receive a prompt and reasonable response to requests for provider services, or a stated future time to receive such services in accordance with an individual treatment/recovery plan;
- (8) to be informed of and to understand the standards that apply to their conduct, to receive timely warnings for conduct that could lead to discharge and to receive incremental interventions that are strength based, person centered and trauma-informed for conduct contrary to program rules;
- (9) to receive in writing the reasons for a recommendation of discharge and to be informed of the process to appeal such discharge recommendation;
- (10) to voice a grievance, file a complaint, or recommend a change in procedure or service to provider staff and/or the Office, free from intimidation, reprisal or threat;
- (11) to examine, obtain a receipt, and receive an explanation of provider bills, charges, and payments, regardless of payment source;
- (12) to receive a copy of the patient's records for a reasonable fee;
- (13) to be free from physical, verbal or psychological abuse;
- (14) to be treated by provider staff who are not under the influence of substances that would impair their ability to perform the duties stated in their job description;
- (15) to be free from any staff or patient coercion, undue influence, intimate relationships and personal financial transactions
- (16) to be free from performing labor or personal services solely for provider or staff benefit, that are not consistent with treatment goals, and to receive compensation for any labor or employment services in accordance with applicable state and federal law; and
- (17) the following rights apply to patients who reside in an inpatient/residential setting:
 - (i) to practice religion in a reasonable manner not inconsistent with treatment/recovery plans or goals and/or have access to spiritual counseling if available;
 - (ii) to communicate with outside persons in accordance with the individualized treatment/recovery plan;
 - (iii) to communicate freely with the Office, public officials, clergy, attorneys and other persons identified by the patient;
 - (iv) to receive visitors at reasonable times in relative privacy in accordance with the individualized treatment/recovery plan;
 - (v) to be free from restraint or seclusion;

815.5 PATIENT RIGHTS Cont.

(vi) to have a reasonable degree of privacy in living quarters and a reasonable amount of safe personal storage space;

(vii) to retain ownership of personal belongings, to the extent such belongings are not contrary to program rules; and

(viii) to have a balanced and nutritious diet.

(18) participants referred to a faith-based provider have the right to be given a referral to a non-faith based provider.

(19) Patients have the right to placement in gender segregated settings based on their gender identity or expression.

(20) Patients have the right to culturally appropriate and affirming care and to be free from harassment and/or discrimination in accordance with the factors outlined in paragraph (21) of this subdivision.

(21) Prohibition against discrimination in admission. No individual that meets level of care criteria for admission shall be denied admission to any program based solely on the following factors, including but not limited to:

(i) prior treatment history;

(ii) referral source;

(iii) pregnancy;

(iv) history of contact with the criminal justice system;

(v) HIV status;

(vi) physical or mental disability;

(vii) lack of cooperation by significant others in the treatment process;

(viii) toxicology test results;

(ix) use of any substance, including but not limited to, benzodiazepines; or

(x) use of medications for substance use disorder prescribed and monitored by an appropriate practitioner;

(xi) actual or perceived gender or gender identity;

(xii) national origin;

(xiii) race or ethnicity;

(xiv) actual or perceived sexual orientation;

(xv) marital status;

(xvi) military status;

(xvii) familial status; or

(xviii) religion; or

(xix) age.

(22) Patients have the following rights with regard to access to medication for addiction treatment:

(1) Medication for Addiction Treatment (MAT) for Substance Use Disorder.

(i) Patients have the right to be offered or maintained on all forms of approved medication for substance use disorder treatment when admitted or seeking admission to any Office certified program, in accordance with guidance issued by the Office.

(ii) Patients have the right to be educated about all forms of FDA approved medications for the treatment of substance use disorders, including the benefits, risks and alternatives.

(23) Overdose Prevention Education. (i) Patients have the right to receive overdose prevention education and naloxone education and training, and a naloxone kit or prescription, in accordance with guidance issued by the Office.



FAIRVIEW REINTEGRATION SERVICES

Patient Admission Agreement

GUIDELINES FOR LIVING

March 16, 2023

For the duration of stay as a Patient of Fairview Recovery Services, Inc. (FRS), I have read and hereby agree to abide by the following rules and regulations.

1. Positively no alcohol, substance use or gambling. This means any use on the grounds of Fairview Recovery Services, Inc. (FRS, Inc.) *Any drinking, use of illegal substances, or use of prescription medication not prescribed specifically for that resident, or substance brought or found on property, may result in immediate discharge.*

*NO playing cards unless approved by staff. No betting, gambling, pools on sporting events, etc. NO scratch off lottery ticket. NO Gambling of any kind. NO energy drinks permitted. NO products with ALCOHOL in them (example: mouthwash, nail polish remover, vanilla extract, perfume/cologne, etc.)

2. Absolutely no violence, threats of violence, or aggressive physical contact, including “rough-housing.” Such actions are not allowed by any Patient and are detrimental to personal recovery and others’ recovery. *These actions may result in immediate discharge.* Additionally, this is a residential neighborhood and treating neighbors and their property respectfully is required.

3. No verbal abuse, threats, intimidating behaviors INCLUDING VULGARITY/PROFANITY (swearing, etc.). Such actions are detrimental to personal recovery and others’ recovery. *These actions result in an administrative review and may result in discharge.*

4. Sexual behavior between residents is not tolerated. While peer support is encouraged, this type of behavior is inappropriate and unacceptable. *These actions may result in discharge of all persons involved.*

* Residents remains in assigned Women’s / Men’s designated residence unless residents previously scheduled to meet with staff. While parallel, the center offers two (2) separate programs for women and men. Crossing programs (men/women in opposing house or at the Mannion house) *may result in discharge.*

5. Racial slurs, sexual harassment, and/or abuse between residents, or others is unacceptable. *These actions result in an administrative review and possible discharge.*

6. Breathalyzer and/or urine testing is conducted randomly. Refusal of staffs’ request to take such test(s) is considered non-compliant, viewed as a positive screen, and *may result in discharge.* Residents who are asked to produce a urine must do so with 1-2 hrs, also must remain seated in the waiting area.

7. Behavioral Policies: Residents maintain the right and responsibility to confront another resident on their old behaviors. Residents, based on the severity of the behavior, are required to inform staff of said behaviors.

- Vulgarity is unacceptable and is considered “old behavior”. There is no tolerance for vulgarity, and consequences are administered to residents who continually use vulgar language.
- Stealing is unacceptable and is considered detrimental to one’s recovery. Theft of any items and/or property is prohibited and *may result in discharge.*

8. Vandalism Policy: Vandalism of FRS, Inc. property is strictly prohibited and is not tolerated. This includes structural damage (walls, doors, etc.), graffiti, intentional destruction of FRS items and/or materials as well as all appliances and furniture located within all FRS facilities. Residents caught participating in such vandalism receive consequences *leading up to and including discharge.*

* Residents respect FRS property and space evidenced by not putting feet on any furniture or sleep on any of the couches or chairs in the common areas. Patients utilize sidewalks without cutting across lawn to travel between buildings. Residents demonstrate said respect by setting a positive example for new residents.

9. Upon admission, each resident will be placed on a 30-day orientation phase. During this phase, residents will need to “sign out” with another resident who has completed the orientation phase. The ONLY time(s) residents will be allowed to leave property *without a peer* is for medical, treatment-related, or legal reasons. Residents MUST return with documentation from appointment/meeting. **Examples of times where residents will need to be “signed out” with a peer include self-help meetings, going to the store, visiting family off-grounds, etc.

10. Upon admission, personal belongings are limited to three (3) bags. ‘Sharps’, knives, weapons, aerosol cans, or any items (including magazines, Blue Rays, DVD’s, and any/all media) containing discriminating, sexual, intimidating wording, and/or graphics are **NOT** allowed. This is a recovery environment, and these types of materials have no place here. Also, **SOME** products containing alcohol are permitted once inspected and AFTER staff approves, providing there is *no alcohol listed within the manufacturer’s first three (3) ingredients, such as lotions, shampoo, and deodorants*. *Please reference Contraband Policy
Residents maintain a maximum of three (3) bags of belongings throughout stay with the expectation of downsizing personal items as requested at any time. ALL personal belongings MUST fit within these 3 bags, following the guidelines of the pack for stay list.

11. Personal Belongings: FRS, Inc. *is not responsible for personal belongings*. FRS is not responsible to for lost, stolen, or damaged personal property. **Electronics and other items of value are not permitted on property, this includes but is not limited to any device that can be used to access the internet or take photos.** *Residents are permitted to bring in their own TV - not to exceed 32inches. For safety and security reasons, Residents are expected to *always* keep rooms locked. *Personal belongings left behind by a resident who leaves are held for a period of thirty (30) days. After that time, all belongings are considered forfeited and disposed of at the discretion of FRS, Inc.*

-Any non-approved personal belongings confiscated by staff are held for **30 days**. The resident is responsible to arrange for removal of said items from FRS property.

-Residents are **prohibited** from allowing other residents to **borrow their personal belongings** while at FRS. **Selling or trading any items, products, goods, or clothing to another residents is also strictly prohibited.** FRS *is not responsible for “re-acquiring” property* loaned to another resident while admitted to the FRS.

-Additionally, **accessing and/or selling food stamps** by residents is not allowed. The Department of Social Services considers this an act of Welfare Fraud.

12. Personal bags/backpacks/purses cannot have any pockets they must be a small/medium size single drawstring or over the shoulder bag with one opening. IF the resident does not have a single opening bag FRS will provide one. There will be absolutely no exceptions made for bags with pockets or multiple opening/sections. **This includes bags used on property and bags being used to go to and from property. When coming to and from property items in the bags must be kept minimal so staff can property search upon return to property.
–At any time, staff reserve the right to ask residents to downsize the number of items that are being brought to and from property daily.

13. All residents are out of bed; dressed; beds made; rooms orderly; and out of room by 8:30 M-F Sat-Sun by 10am. All lights, fans, TVs, and radios are turned off, garbage emptied, and windows shut, prior to leaving your room. Random room checks are done throughout the day inspecting cleanliness and occupancy. ***Returning to your room prior to 4:00 PM without staff permission is prohibited.**

14. Residents are expected to respect assigned roommates. This includes light and noise volume, relative privacy, and refraining from touching/taking belongings.

15. Personal belonging pick-ups following discharge, MUST be scheduled in advanced. Please call to schedule to pick-up personal belongings between the hours of 8am -4pm Monday -Friday

16. Cross-room visiting is NOT allowed by any resident for any reason. Also, no doors should be propped open, for general and fire safety and security reasons. If you wish to visit with a peer, please use the first-floor common areas or go outside.

17. Mail/Packages: All mail/packages will be opened with staff. Counselor approval is needed before a resident can keep items from mail/packages.(items must be in compliant with “allowed items and pack for your stay list”). **All mail/packages will be returned to sender after a resident has discharged from the program.

18. Room Searches: FRS reserves the right to conduct room searches as part of the protocol required to maintain safety within the center. When the resident is not present, two (2) staff complete the room search. FRS staff reserve the right to confiscate any prohibited items found. All confiscated items are reported to resident and documented on the contraband log sheet.

19. All residents are required to sign out and sign in and to list specific destination on the log located in the dining room. A specific destination must be listed (not “Walk” or “Friend’s House”). Residents are not to sign other resident’s names on the log, as this log is considered a legal document, and forgery of the log may be considered a felony. Residents may take a lunch with them if they cannot return for lunch due to appointments and/or treatment.

20. Residents are allowed to leave grounds for no more than five (5) hours at a time. Any flexibility to this rule must be approved through the residents P.Counselor. Residents MUST be present at the house for a minimum of two (2) hours before they can leave grounds again.

21. Personal Cleanliness Policies: General personal hygiene is imperative. Neglect of such is handled as a recovery related issue. Please observe the following:

- Replace the roll of toilet paper when close to the end, flush the toilet, and put the toilet seat down after use.
- Rinse out the shower/tub after bathing and clear the drain.
- Rinse out the sink and wipe off the mirrors after shaving and brushing teeth.
- Limit grooming time to 15 minutes and turn off the lights when leaving the room.
- Patients are **not** allowed to cut another residents hair.
- **No** large sized quantities of hair coloring solutions, professional, or otherwise, are permitted.
- **Put shower curtain inside the shower** before use and close the curtain after to prevent mold.
 - Hair coloring products limited to (2) individual sized packaging only, products must NOT contain alcohol or other flammable agents.

22. Dress Code Policy

- Always wear shoes.
- Always keep torso covered – no bathing suits or halter-tops.
- No bathrobes or pajamas permitted downstairs before 10:30 PM or after 6:30 AM.
- Residents should ALWAYS be completely dressed including In bedrooms, while in bed/sleeping; to & from bathroom AND shower. Residents should only get undressed AND dressed in Bathroom(s)
- *Staff reserves the right* to request that Patients change to more appropriate dress without dispute.
- **No** clothing with inappropriate language, sexual content, drugs, or alcohol references is allowed.

23. Dinner Protocol: All Residents are required at dinner at **5:00 PM** every day, as this is a daily check in. Before dinner, all residents are to stand behind their chair they intend to sit in.

-Dinner is served until 5:30pm No food or drinks in bedroom, living rooms, hallways, offices, or group rooms; dining area only. Patients are permitted to have a glass of water in room. Any resident arriving for dinner past 5:00 PM will be placed on house restriction for the remainder of the evening until meeting with their Counselor the following morning. **Residents must remain in their seat until 5:30 PM, unless using the restroom or getting more food and/or beverages. Any resident leaving the dining room before 5:30 PM will be subject to consequences. Residents can request to have dinners saved if they are at OP TX during dinner time.

24. Excused Dinner Absence: All residents must obtain permission from P Counselor to miss dinner. Residents that will not be at the facility for a meal must notify the cook. A meal will be wrapped and set aside.

25. Food Policies: Food hoarding, and/or taking over-sized portions is unacceptable. Food is available during the night time hours in the dining room refrigerator. Residents are responsible for their own dishes, food wrappers, crumbs, fluid spills, beverage containers and all debris as well as cleaning up any mess created.

Personal food and drink supplies are NOT to be brought into the facility (this includes coffee). Cereal is for breakfast ONLY, including weekends! Only residents assigned to a job in the kitchen are allowed in the kitchen at any given time. There is no exiting through the kitchen exit door at any time. Residents only enters the kitchen with staff permission when not assigned a chore at that designated time. Once the resident who was assigned kitchen chores complete there should be no one else in the kitchen for any reason. The kitchen door must always be closed/locked.

26. House Chores: Each resident is assigned a House Chore(s) to complete daily. The chores are rotated every two weeks and are listed on a clipboard outside of the office. The AM jobs are completed between 7:00 and 8:30am M-F (Sat&Sun7am-10:30am) and the PM jobs are complete between the hours of 8:30 PM and 10:30PM daily (unless otherwise specified on the job list). Residents are not permitted to “switch” chores. Residents must consult with staff if unable to complete a chore. Residents must report to staff when chore is complete, or he/she will receive a "U". Resident's will receive a mark of : “S” (meaning satisfactory) or “U” (meaning unsatisfactory). If a resident disagrees with assignment of “U,” only a Counselor can change to an “S” if deemed appropriate. **Any resident receiving a “U” will receive consequences:** Included, but not limited to additional chores, house restriction, additional time on orientation, writing assignments, etc. *Continued & persistent chore non-compliance leads to eventual discharge.*

27. Visiting Days, Hours, and Policy: are to be requested through a Visitor Request Form, which is subjected to approval based on tx plan/schedule(s) and progress in program. **Residents are NOT eligible for house visitors within the first 14 days of admission.** Residents may have up to two (2) *approved* house visitors weekly, between the hours 1pm- 7pm . However **NOT during dinner** unless prior approved, on a special occasion, is granted by P Counselor. **Spontaneous visit during mealtimes are NOT permitted.** Approved visitors will ring the bell at the front door, staff will greet and escorting them to the office. Visitors will sign a confidentiality statement and visitor’s log. Visitors **MUST** sign in prior to EVERY visit and are not permitted on FRS property without doing as such. Visitation **MUST** take place in the following locations: Women on front porch of NOH or NOH dining area; Men at FH picnic table (under awning) or FH dining room. **Residents are not permitted to visit anywhere else on FRS property.**

*Patients with visitation including children take **full responsibility** for supervising said children and must **ALWAYS** maintain direct contact. *Approval in advance by a Counselor is required for use of the living-room or other common areas for child(ren), under the age of 12, visiting ONLY.*

28. Weekend Passes: Once residents have successfully completed their orientation phase, they may apply for a weekend pass. These passes are granted for every other weekend or at the discretion of the P.Counselor. Pass requests are to be presented to the P. Counselor at least five (5) business days prior to date of request. Passes will also be processed in the residents assigned FRS treatment group. During this processing, residents will present their plans for their pass including what meetings they will attend, what safety plan they have, and who they will be with.

29. Sick Day due to Illness: Residents are permitted sick days only when **approved by a P. Counselor.** Residents must report directly to a Counselor in the AM, not simply remain in bed. If residents are ill and miss treatment, educational/vocational obligations and/or group sessions, they will be placed on house restriction for that day. (i.e. too sick to leave Fairview property) It is the residents responsibility to call treatment/volunteer.

30. All prescribed and over the counter (OTC) medications must be reported to on duty staff. Residents must follow up with their P.Counselor during their next individual session. Residents are responsible to take any prescribed medication (as prescribed) at designated times. No medications, prescribed or OTC, are kept in residents’ rooms. If discovered, personally stored medications are considered non-compliance and *may result in discharge.*

31. Resident Vehicle Policy:

No resident vehicles are allowed on FRS property. Medical issues involving transportation needs will be considered on an individual basis with physicians orders and reviewed periodically. **NO** motorized vehicles/transportation (ex: electric/gas powered- bikes, scooters, skateboards, hoverboards etc.)

* Residents may not drive at any time unless on a pass for the weekend. However, they still can NOT transport other residents.

32. Phone Policy (expectations and guidelines):

Resident Landline Phone(s): (incoming calls ONLY -Resident can provide number to friends/family, staff cannot)

-Calls are no longer than 15 minutes, one time an hour

-Residents also need to be considerate and respectful of privacy. Residents have the right to ask for privacy and others are to be courteous and respectful of this need. Residents should inform staff if other residents are in non-compliance. NO CALLS AFTER 10PM

-Staff may end social phone calls at any time if the content of the call is inappropriate in any way.

-Program Aides/Counselor Assistants, Nurses, Administrative Staff etc. are not permitted to approve calls, on business lines.

*Phone calls to referral sources, legal entities, and medical are to be arranged with the PC during office hours.

Phone calls to OASAS and/or Justice Center can be made at the request of the individual at any time. Please ask for help with these calls and ask for privacy to make the call if necessary.

***Disclosure of information that could identify a person who is currently in the program during a phone call is potentially a violation of HIPAA.** This is the case even when speaking with a former resident. DO NOT discuss other program members during phone calls other than OASAS and/or Justice Center calls. Doing so may result in an administrative review and possible discharge.

Personal Cell Phone(s):

-Cell phones may be utilized by residents; however, cell phones can ONLY be used when residents are off FRS property. **NO Cell Phone Use on Campus**

-Residents must turn ALL cell phone(s) and charger(s) over to staff upon arrival, this includes non-working cell phones.

-Staff will label cell phones and chargers with resident's name and they will be stored in their labeled contraband bin.

-Residents MUST sign-in and sign-out ALL cell phones when leaving/returning to property.

-Cell phones (working and "non-working") cell phones MUST be signed back into the "shared office" immediately upon coming onto/returning to FRS property.

-Cell phones are NOT to be kept by residents overnight.

-Cell phones will also NOT be used in the shared office for any reason.

-Residents will NOT charge cellphones on FRS property, they will need to charge cell phones when they are off property.

***If residents are not following the cell phone policy/guidelines, including but not limited to having multiple phones, being caught with a "dummy phone" and/or using a cell phone on property they will receive consequences. These consequences may include: loss of up-coming visitation privilege (pass requests and house visits), house restriction, etc. Continued noncompliance could lead up to unsuccessful discharge from the program.*

33. Smoking Policy: Based on OASAS requirements, FRS is a non-smoking, tobacco-free facility.

Tobacco products of any type (including smokeless tobacco, chew, etc.) are not permitted anywhere on the grounds.

Additionally, **NO** 'vaping' is permitted on FRS property. Any tobacco items and/or paraphernalia on FRS grounds will be confiscated. Violators of these rules will receive consequences *including possible discharge*.

***The exception to the tobacco free policy is IF the patient is participating in the Limited Tobacco Program. ALL participants MUST follow rules and regulations of the Limited Tobacco Program policy (reviewed at intake).**

34. Keys: Residents are provided with one key upon admission. If a resident loses their key, within the duration of their stay at FRS, a \$5.00 fee for a new room key will be charged, through deducted from his/her PNA check.

35. Group Attendance: Attendance at ALL assigned groups is mandatory. Absences are only accepted when other medical or recovery related meetings/appointments cannot be canceled and counselors are appropriately notified, prior to group. ***Including Mandatory Community Meeting/House Grp***

group attendance cont... Residents will also work towards successful completion of 5 Life Skill Seminars and 5 CCU Seminars while in programming.

- 36. Career Choices Unlimited (CCU) Participation:** Residents will be responsible to participate in up to 20 hours of work readiness activities (volunteering) while at FRS.
- 37. Five (5) hours of Rehabilitative Service:** Resident understands that participation in treatment planning, to include meeting 5 hours of rehabilitative services per week, is a requirement of the program. *Failure to participate in treatment planning and 5 hours of rehabilitative services is considered non-compliance and may result in discharge.*
- 38. Prescription Co-Pays:** Residents are required to pay copays for their prescription medications. If Residents need assistance with paying co-pays they will need to sign a contract stating they agree to FRS deducting said amount from the Residents PNA checks.

“Hours of Operation” Policies: Please see your assigned Counselor for your individualized schedules

6am -8am -Wake up / Clean Rooms/ Get ready for the day/ BREAKFAST

7am-8:30am - AM Chores

9:30am -1pm ALL TV’s (including TV’s in common areas) should be off

*AM groups/seminars according to schedule/tx plan

11:45am-1pm - LUNCH

*PM groups/seminars according to schedule/tx plan

5pm-5:30pm DINNER

6pm-8pm AA/NA/Recovery Meetings

8:30pm-10:30pm - PM Chores/ Laundry/ Leisure time

10pm CURFEW * Residents are NOT to be outside between 10pm and 5:30am*

Quiet Time: Sun-Thurs 11pm-6am /Fri-Sat 1am-6am (no TV's on during quiet time)

STAFF ARE MANDATED REPORTERS AND REPORT ANY ABUSE AND/OR NEGLECT AS REQUIRED BY LAW.

I am in receipt of a copy of the FRS Resident ‘Admission Agreement and Guidelines for Living. I have reviewed. said agreement and guidelines and have had the opportunity to ask questions. I agree to follow said agreement and guidelines while I am a Client/Resident at Fairview Recovery Services Inc.

I have also reviewed the following policies with my primary counselor, have had the opportunity to ask questions and have receive a copy, if requested. FRS Contraband, Search and Seizure P&P, FRS Grievance P&P, and FRS Incident Management P&P. I agree to follow these policies while I am a Client/Resident at Fairview Recovery Services Inc.

I understand that additions to, alterations or modifications of the rules, policies and procedures contained in this handbook may be made by Fairview Recovery Services at any time and for any reason. If this is occurring, I am obligated to insert those additions into the handbook to assure it is remaining current. I understand that I am to comply with and follow these additional, altered, or modified rules.



THIRTY DAY ORIENTATION PHASE

The clinical staff of Fairview Recovery Services, Inc. has designed this phase to assist the newly admitted residents with an opportunity to connect with his/her peers, clinical staff and community supports. This phase will also provide clinical staff with an evaluation period to assess the residents appropriateness for continued residential stay. To accomplish these goals, the following guidelines are in effect during the 30-Day Orientation Phase:

- No weekend passes
- The resident must obtain approval from on duty counselor prior to leaving FRS premises and must notify on duty counselor upon return to premises.
- The resident must have at least 1 Non-Orientation Phase peer with him/her when leaving FRS premises to attend self-help meetings, to run errands, to attend recreational activities, shopping, etc. and must return with peer(s).
- With the on-duty counselor's approval, the client may attend Outpatient Treatment, Medical Appointments, Legal Appointments, without Non-Orientation Phase peer(s) with immediate return to FRS premises upon conclusion of such appointments.

All residents are expected to attend Orientation group(s)

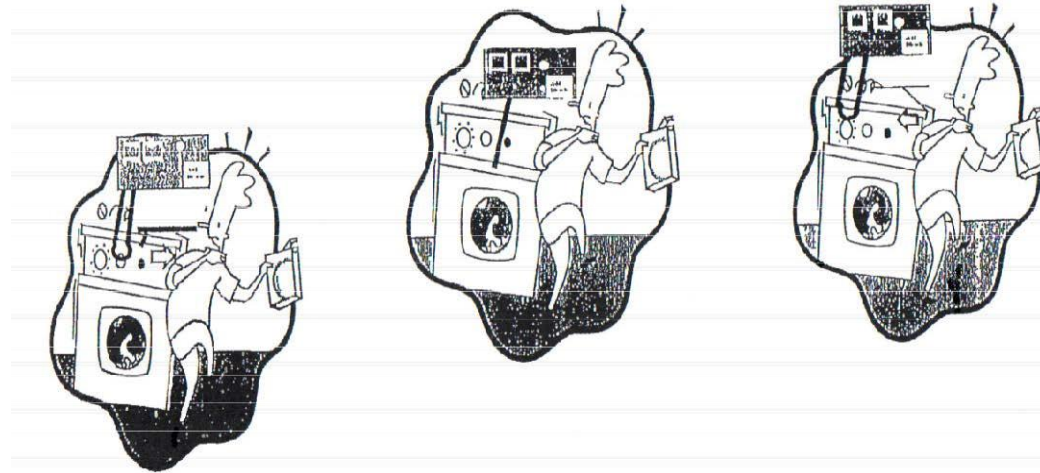
Non-compliance with these guidelines will be addressed as a clinical issue and may jeopardize residency at Fairview Recovery Services, Inc.

If you have any questions about the above guidelines, please talk to your Primary Counselor

How to use the Fairview Recovery Services Laundry Facilities

The first thing you need to do is turn on the water.

You do this by moving the lever on the wall from the left to the right.



-Separate out your clothes by color and type to create each individual load. You then place your clothes into the Washing Machine and close the lid.

-Set the water temperature and load size to the desired setting.

-The soap dispenser is above the Washers in the **blue** container.

-Unhook the soap detergent hose from the dispenser and place it into the Washer.

-Then press the Solid level which corresponds to the size of your load of wash.

-Do **not** push the soap dispenser more than **once**.

-When the soap has completely emptied into the Washing Machine and the hose is empty, reconnect the hose up to the attachment under the soap dispenser.

-Close the Washer and let the machine complete its cycle



Universal Precautions

FOR PREVENTION OF HIV AND HBV IN A HEALTH CARE SETTING

Universal Precautions apply to:

- Blood
- Semen
- Vaginal Secretions
- Cerebrospinal fluid (spinal cord)
- Synovial fluid (joint)
- Pleural fluid (lung)
- Pericardial fluid (heart)
- Peritoneal fluid (stomach)
- Amniotic fluid
- Breast milk

“Body fluids” for which Universal Precautions do not apply: (unless there is visible blood). Use gloves if possible but hand washing with soap and water is recommended:

- Urine
- Feces
- Tears
- Sweat
- Vomitus
- Sputum
- Nasal secretions
- Saliva – except in dentistry or when saliva contains blood.

Universal blood and body fluid precautions:

- Consider all Patients as potentially infectious
- Use appropriate barrier precautions routinely.

Reasons for precautions:

- Prevent spread of infection from Patient to Patient
- Protect Patient from infection carried by health care worker
- Protect health care worker from infection by Patient

Hands should be washed before and after assisting others in personal, sick or injury care.

Gloves should be worn if there is a likelihood of exposure to blood and certain body fluids. Hands should be washed before and after wearing gloves.

Cuts, scratches and other skin breaks should be covered and gloves are to be worn.

Mask and eye protection are needed if splashing is likely to occur.

Spills of blood or bodily fluid must be cleaned up promptly. Wear utility-type gloves for clean up.

Household bleach solution – freshly made – (1 part bleach to 9 parts water) is the best disinfectant for clean-ups. Leave solution on for 20 minutes.

For venipuncture – use only disposable vacutainers and multiple draw needles. Do not recap needles. Wear gloves for all venipunctures.

Discard entire vacutainer and needle assembly immediately into a puncture proof hazard container.

Universal precautions are used to prevent transmission of blood-borne infectious agents – particularly HIV and HBV (Hepatitis B).

Please use these precautions routinely. “Take no risk”.

Recopied from:
Montgomery County Health Department
Division of Communicable Disease and
Epidemiology
2000 Dennis Avenue
Silver Spring, Maryland 20902

TOBACCO USE POLICY AND PROCEDURES

Fairview Recovery Services, Inc.

Original Date: 05/16/08

Revised Date: 10/08/14

POLICY AND PROCEDURE

PROCEDURE FOR: Addressing tobacco use at Fairview Recovery Services, Inc. programs.

PURPOSE: To increase awareness of health dangers relating to use of tobacco.

Policy Statement:

Fairview Recovery Services programs provide crisis, residential and educational services for adults dealing with chemical dependency. Fairview is dedicated to providing quality services in a healthy, drug free environment.

In 1988 the U.S. Public Health Services, under Surgeon General C. Everett Koop, published the report, The Health Consequences of Smoking: Nicotine Addiction. In this report Dr. Koop states, "Smoking is the chief avoidable cause of death in our society." He indicates that nicotine is the substance in tobacco that causes addiction. Nicotine is a mood altering, psychoactive substance that is highly addictive. Since 1980, DSM (Diagnostic and Statistical Manual of Mental Disorders) has listed both nicotine withdrawal and nicotine dependence as diagnosable conditions.

Objectives:

1. To provide quality, comprehensive crisis, residential, and educational services to the Patients at Fairview Recovery Services.
2. To provide tobacco/ nicotine dependence recovery assistance/options to staff.
3. To provide tobacco/nicotine dependence recovery assistance within the care offered to the Patients of Fairview Recovery Services programs through assessment, education, prevention, and treatment.

1. Provide Tobacco/Nicotine Dependence Education and Recovery options for staff

- A. All employees will be offered information on the medical complications of tobacco use and nicotine dependence.
- B. All clinical staff will be offered training on how to identify nicotine dependence. This will include training on assessing, education, treatment planning, and on-going care for nicotine dependence.
- C. All employees will be offered the following:
 1. Pamphlets, brochures and other reading materials to assist and educate them on the effects of using tobacco/nicotine products.
 2. Over-the- counter nicotine replacement when not able to obtain through insurance.
 3. Counseling through EAP referral.
 4. New York State Tobacco Free Quit Line

D. If staff members do not follow the Tobacco Policy, disciplinary action will be handles following Fairview's disciplinary process. (i.e.: verbal warning, written warning...)

2. Provide tobacco/nicotine prevention, education and nicotine replacement treatment for Patients

A. During all intakes and reviews, the clinical staff will assess Patients for tobacco/nicotine dependence using the Fagerstrom Test for Nicotine Dependence and document their level of dependence.

B. All Patients, regardless of the tobacco history, will be offered an educational seminar on the effects of tobacco use.

C. During the admission process, all Patients will sign an agreement stating that they have been informed of the tobacco policy.

D. Clinical staff will assist the Patients in obtaining Nicotine Replacement Therapy upon request.

E. All Patients who are identified as needing tobacco cessation will have this area addressed in their service plan.

*The exception to the tobacco free policy is IF the patient is participating in the Limited Tobacco Program. ALL participants MUST follow rules and regulations of the Limited Tobacco Program policy (reviewed at intake).



Fairview Recovery Services, Inc.

To support a tobacco free environment, I agree to the following:

- I will not use any type of tobacco products while on the Fairview Recovery Services premises. I understand this includes the supportive living apartments, parking lots, and vehicles.
- While I am residing in a residential neighborhood, it is expected that I will treat neighbors and their property with respect.
- As a tobacco user I understand treatment goals specific to nicotine dependence will be included in my treatment plan.
- I agree I will not bring tobacco products or paraphernalia including lighters, snuff, chewing tobacco, cigars, cigarettes, etc. to any Fairview Recovery Services site understanding that staff will confiscate and destroy them.
- In the event that I violate such policy I understand that my case will be reviewed with possible revisions to my treatment plan. I understand that if I am found to be smoking in any of Fairview Recovery Services facilities I may be discharged from that program immediately.
- In an effort to support peers who have also agreed to this initiative, I agree to take measures to remove the odor or evidence of smoking from my person before I enter any of Fairview Recovery Services facilities (i.e. washing hands).
- As a non-smoker as part of the Fairview Recovery Services admission process I have been informed of this policy.

*The exception to the tobacco free policy is IF the patient is participating in the Limited Tobacco Program. ALL participants MUST follow rules and regulations of the Limited Tobacco Program policy (reviewed at intake).

FAIRVIEW RECOVERY SERVICES, INC.

Patrick Haley, LMSW
Executive Director

FAIRVIEW RESIDENTIAL REHABILITATION
SERVICES
NEW OUTLOOK HOUSE RESIDENTIAL
REHABILITATION SERVICES
SUPPORTIVE LIVING
CAREER CHOICES UNLIMITED
HEALTH HOME CARE MANAGEMENT

5 Merrick Street
Binghamton, NY 13904
Phone (607) 722-8987
FAX (607) 722-6767

ADDICTION STABILIZATION CENTER
247 Court Street
Binghamton, NY 13901
Phone (607) 722-4080
FAX (607) 723-1858

VOICES RECOVERY CENTER
340 Prospect Street
Binghamton, NY 13905
(607) 821- 7811

Naloxone / NARCAN TRAINING

Fairview Recovery Services Inc. is registered to operate an Opioid Overdose Provention Program. Fairview Recovery Services (FRS) will provide individual and small groups Naloxone/ NARCAN Training per requested.

Patients should see their assigned Counselor to set up a trainging with a FRS naloxone/ NARCAN trainer.

NARCAN Training is also offered at Southern Tier AIDS Program (STAP) on Mondays, Tuesdays, Thursdays and Fridays and offered at VOICES Recovery Center intermittently.

Signature: _____

Witness: _____

Date: ____ / ____ / ____



Fairview Recovery Services

Patrick Haley, LMSW, Executive Director

www.frsinc.org

Administration
Rehabilitation Services
Reintegration Services
Shelter + Care
Housing + Care
Health Home

Career Choices
Unlimited

5 Merrick Street
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607.722.8987
Fax: 607.352.4778
fairview@frsinc.org

VOICES Recovery Center
340 Prospect Street
Binghamton, NY 13905
607-821-7811

**Addiction Stabilization
Center**

247 Court Street
Binghamton, NY 13901
607-722-4080
Fax: 607-723-1858

Fairview Recovery Services Inc. (607) 722-8987

Fairview Recovery Services Executive Director- Patrick Haley ext. 224
Fairview Recovery Services Clinical Director- Heather Orner ext. 232

Fairview Residential Rehab Staff Contact Information:

New Outlook Residential Reintegration (REHAB) Program Director
-ext. 230

Fairview Residential Reintegration (Rehab) Program Director
-ext. 253

Residential Clinical Coordinator - ext. 245

Addiction Stabilization Center- 607-722-4080

Voices Recovery Center- 607-821-7811

NYS Justice Center contact information:

NYS Justice Center for the Protection of People with Special Needs

161 Delaware Avenue

Delmar, New York 12054-1310

General Phone: 518-549-0200

Patient Advocacy: 1-855-373-2122

Email for general inquiries: webmaster@justicecenter.ny.gov