



Addiction Stabilization Center Patient Handbook

updated 2/2024

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PATIENT HANDBOOK
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FAIRVIEW RECOVERY SERVICES INC.

PATIENT RIGHTS (Updated October 2022)

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 strengthbased, 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 ADDICTION STABILIZATION CENTER

Patient Admission Agreement

GUIDELINES FOR LIVING

Updated October 2020

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:

In addition, I understand FRS Addiction Stabilization Center Program is an inpatient program and I am NOT permitted to leave the Stabilization property without being escorted by FRS staff. This includes leaving the property of approved appointments within the community.

1. Positively no alcohol, drug (including paraphernalia), tobacco is permitted. This means any use on grounds of FRS including drinking, use of illegal substances, or use of prescription medication not prescribed specifically for that patient, or substances brought or found on property, may result in behavioral contract and/or discharge.
2. No smoking/vaping is permitted on Fairview property based on OASAS regulation as a non-smoking, tobacco free facility. Any tobacco, smokeless tobacco, chew, nicotine item and/or paraphernalia is seen as contraband and will be confiscated. *The exception to this is IF the patient is participating in Limited Tobacco Program (see policy)
3. Absolutely no physical violence, verbal abuse, threats, intimidation, vulgarity, aggressive physical contact (including roughhousing) or violence is prohibited. Such actions are not permitted by any patient and are detrimental to personal recovery and others recovery. *These actions may result in immediate discharge.*
4. Racial slurs, sexual harassment, and/or abuse between patients or others is not tolerated. These actions can result in an administrative review or possible discharge.
5. No weapons will be allowed on the person or in the program facilities.
6. No betting, gambling, pools on sporting events or playing cards (unless approved by staff), etc. No scratch off lottery tickets. NO Gambling of any kind. NO energy drinks are permitted. NO products with alcohol.
7. No electric devices including but not limited to IPODS, IPADS, MP3 players, CD players, cell phones, cameras, recording devices, video games, radios, etc.
8. No hoods and/or bandanas of any kind are to be worn inside the ASC.
9. Sexual behavior between patients is not tolerated. While peer support is encouraged, this type of behavior is inappropriate and unacceptable.
10. Each patient maintains the right and responsibility to confront another patient on their old behaviors. Including but not limited to vulgarity and stealing. Depending on the severity of behavior, patients are required to inform staff of said behaviors.
11. Vandalism of FRS property is strictly prohibited and is not tolerated. This includes structural damage (walls, doors, etc.), graffiti, intentional destruction of FRS property including appliances and furniture. Patients caught participating in such vandalism will receive consequences leading up to and including immediate discharge. Please remain respectful of FRS property by not putting feet on furniture, sleeping on couches, chairs or in common areas.
12. Upon admission personal belongings are limited to seven (7) days' worth of clothing, including 1 pair of shoes, 1 pair of slippers, 1 pair of shower shoes and 1 coat. All belonging will be searched and checked upon intake. Excessive belongings or items determined inappropriate will be stored in our shed and are inaccessible until discharge. Any contraband items will be confiscated and if appropriate returned upon discharge. Any sharps, knives, weapons, aerosol cans, or any items including magazines, DVD's and any/all media are not allowed, Also some products containing alcohol are permitted once inspected and after staff approves, providing there is no alcohol within the manufactures' first three (3) ingredients such as lotions, shampoo and deodorants.

13. The following items are not allowed into the facility, scissors, curling irons, straighteners, blow dryers, sharpie markers, cologne, perfume.
14. Razors are permitted however, they must be stored in your locker until use which is monitored by staff. Disposable razors are available in the Intake Office and must be returned to the Nurses Station when finished for proper/safe disposal.
15. One of each of the following personal hygiene items are allowed, eye shadow, mascara, lipstick or lip gloss, lotion, foundation, blush, shampoo, conditioner, toothbrush, toothpaste, comb/brush. The following items are available at the Intake Office: blow dryers, straightener, scissors. It is the patient's responsibility to sign items in/out and sanitize them when done.
16. Cell phone and/or any electronic device will be kept in a locker in the Intake Office until discharge. Upon admission patients must turn all cell phones, chargers or electrical devices to staff, this includes non-working cell phones. Staff will label cell phones, chargers or electrical devices with patient's names and they will be kept in your locker. Patient cell phones, chargers or electrical device will be returned upon discharge from Stabilization.
17. Staff is not responsible for personal belongings. FRS is not responsible to replace lost, stolen, or damaged personal property. Items of value are not permitted on property, Money of any kind, credit cards, check books, are no longer allowed to be stored in your locker, they will be stored in the PD's office in a locked safe. If you discharge after hours or over the weekend you must return the next business day to retrieve items from the safe.
18. Staff does all patient laundry. Please place your dirty clothing in a plastic bag, write your name on a tag and tape it on the outside of the bag. Place the bag in the laundry basket outside of the laundry room. Patients are not allowed in the laundry room.
19. Patients are expected to maintain personal hygiene on a daily basis. General personal hygiene is imperative. Neglect of such is handled as a recovery related issue.
20. Upon admissions patients will be given a skin assessment to determine if any underlying medical conditions are present i.e. skin abscesses. Patients will shower and change into scrubs provided by staff that will be returned upon completion of intake. All patients' belongings entering the building including on your person will be washed and returned.
21. Female patients will be pregnancy tested upon admission to assure proper medical care is provided.
22. Patients are screened upon admission and at random. The frequency and type of screening is dependent upon the patients' individual needs and progress in their recovery, along with a trauma informed care lens.

If FRS staff observe any concerning patient behaviors or actions, staff may request a toxicology screening, and the patient is required to cooperate with screening. If a patient refuses to cooperate with a screening the primary clinician will be notified; treatment plan will be adjusted, along with the possibility of patient being placed up for administrative discharge. This will also be documented in the patient's chart.

23. Bathroom etiquette is imperative. Please observe the following: replacing the roll of toilet paper, flushing toilet, rinsing the shower after bathing including cleaning drain and rinse sink after brushing teeth. Please limit grooming time to 15 minutes and turn off the lights when leaving the room.
24. Patients are not allowed to cut another patients hair. No hair coloring solutions. Hair clippers are allowed and must be monitored by staff and stored in your locker in the Intake Office.
25. Patients are required to wear shoes at all times. Always keep torso covered. No bathrobes or pajamas are permitted before 10:30pm- after 6:30am. Patients should always be completely dressed including in bedrooms, while in bed/sleeping, coming to and from the bathroom and/or shower. Staff reserves the right to request patient change to more appropriate clothing without dispute. No clothing with inappropriate language, sexual content, drugs, or alcohol references is allowed.

- 26.** All patients are to be out of bed; dressed; beds made; rooms orderly; and out of room by 8:30am daily. All lights should be turned off, garbage emptied prior to leaving your room. Random room checks are done throughout the day inspecting cleanliness and occupancy.
- 27.** Patients are expected to respect bed assignments and roommates. This includes not moving bed assignments, light and noise volume, relative privacy and refraining from touching/taking belongings.
- 28.** Patients are not to enter another patients room for any reason.
- 29.** Food and Drinks are not allowed in patients rooms outside of mealtimes. Patients are allowed to keep a cup of water in their room outside of mealtimes.
- 30.** Staff reserves the right with permission from Program Director to conduct room and/or facility searches as part of protocol required to maintain safety within the building. Two (2) staff member will complete room or facility. Staff is to document in search and seizure log any confiscated prohibited items. Any confiscated items are to be logged, reported to patient and stored in the shed or contraband bin.
- 31.** *Personal belongings left after discharge will only be held for 30 days.* Personal belonging pick-ups must be scheduled in advance. Please call to schedule pick-up time between the hours of 8am-4pm Monday-Friday. NO personal belongings will be released to anyone other than the patient unless written documentation is provided.
- 32.** Food hoarding, and/or taking over-sized portions is unacceptable. Patients are responsible for their food wrapper, crumbs, fluid spills, beverage containers and all debris as well as cleaning up any mess they create. Personal food supplies are not to be brought into the facility.
- 33.** Only patients that are assigned as cook or assistance cook is allowed in the kitchen during prep time. Cook and assistance cook are to serve patients their food. Once the patients who are assigned to kitchen chores are completed by 10:30pm there should be no one else in the kitchen, for any reason. Assigned cook and assistance cook must wear a mask, hair net and gloves while preparing food.
- 34.** Each patient will be assigned a house chore to be completed daily. The chores are rotated and are listed on a clipboard in the kitchen and in the intake office. The AM chores are to be completed between 7:00am-9:00am Monday-Friday (Saturday and Sunday 7:00am-10:30am) and the PM chore jobs are completed between the hours of 8:30pm-10:30 pm daily. Patients are *not permitted* to “switch” chores. Patients must consult staff if unable to complete a chore.
- 35.** During mealtimes the community eats together, unless given permission by staff to eat separately. There is no individual cooking or preparation of food. Only exception: religion and medical/allergy reasons. Please inform staff asap.
- 36.** Kitchens are closed at 10:00pm; there is no cooking after this time. Snack are allowed with staff permission.
- 37.** Patients are required to participate in the program. Attendance at all groups are mandatory. Absences are only acceptable when medical staff is appropriately consulted and clinical staff approval. Weekly individual session with Primary Clinician/Counselor is mandatory. Successful completion of the program is finalized when all individual and treatment plan goals are achieved.
- 38.** Patient are all permitted sick days due to illness only when approved by Primary Clinician/Counselor and confirmed by medical staff. Patient must report directly to Primary Clinician/Counselor in the AM, not simply remain in bed. Once approved patent must stay in bed, however, patient is still responsible for chore.

39. Phone Call Policy (expectations and guidelines): Patients will be assigned a specific day and time to make a weekly observed social phone call, by their assigned Primary Counselor (PC). Calls are no longer than 15 minutes. Calls are observed by staff. Additional social phone calls may only be scheduled with the (PC), if necessary. Please do not ask Program Aides/Counselor Assistants, Nurses, Administrative Staff etc. to make phone calls. 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. Staff may end social phone calls at any time if the content of the call is inappropriate in any way.

40. Patient drop offs are only allowed in certain circumstances and with Primary Clinician/Counselor's permission. Patients must schedule drop off with PC and are only allowed to have the items approved dropped off.

41. Patients are responsible to take any prescribed medication as prescribed at designated times. No medications prescribed or over the counter are kept in patients' rooms. If discovered, personally stored medications are considered non-compliant and may result in discharge. All over the counter medications are required to have a current prescription from provider.

42. There is no TV watching other than the noted times, unless given special permission by a supervisor or on-call. All movies will be PG-13 or under and all DVD's must be provided by staff. Patients are not allowed to bring in DVDs.

43. All staff members and peers are to be treated with respect and will in turn adhere to this rule. *Non-compliance with Program rules could result in behavioral contract and/or Administrative Discharge from the Program.*

44. All Fairview Recovery Services properties are monitored, in communal areas, by video and audio security cameras. These cameras are visible and in place for your safety and the safety of others. As a Fairview resident, I understand that I am being monitored and I give consent by signing the acknowledgement of this handbook.

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

I am in receipt of a copy of Patients Stabilization handbook. I understand that I can discuss said handbook at any time with any staff person. I understand that if I am in question of any of the previously documented guidelines and regulations, or have any issues surrounding these guidelines and regulation, I am responsible for contacting my Primary Clinician/Counselor.

I have also received a copy of the FRS Contraband, Search and Seizure Policy. I have reviewed the policy, have had the opportunity to ask questions and agree to follow this policy while I am a Patient/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 understand that additions to, alternations and modifications of the rule, policies and procedures contained in this handbook may be made by FRS at any time and for any reason. If this occurs, I am obligated to insure 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 rule.

I understand that my participation in the Stabilization program is voluntary and I am entitled to end my participation at any time.

PATIENT DAILY SCHEDULE MONDAY- FRIDAY

SHOWER & TV TIMES:

5:00 AM - 9:00 AM

3:00 PM - 7:00 PM

8:00 PM - 10:00PM (MONDAY-THURSDAY)

8:00 PM- 12:00 AM (FRIDAY)

MEDICATION TIMES

7:00 AM - 9:00 AM

1:00 PM - 2:30 PM

6:00 PM - 9:00 PM

5:00 AM	KITCHEN OPENS
7:00 AM	WAKE UP & BREAKFAST TIME
8:00 AM	MORNING CHORES, MAKE BEDS, CLEAN BEDROOMS
9:30 AM - 10:30 AM	MORNING MEDITATION FIRST GROUP
11:00 AM- 12:00 PM	SECOND GROUP
12:00 PM- 1:00 PM	LUNCH/LUNCH CLEAN UP
1:00 PM - 2:00 PM	THIRD GROUP
2:00 PM - 3:00 PM	FOURTH GROUP
3:00 PM - 4:30 PM	FREE TIME, TREATMENT PLAN ASSIGNMENTS
4:30 PM -6:00 PM	PREPARE DINNER & EAT
6:00 PM - 7:00 PM	EVENING CHORES
7:00 PM - 8:00 PM	SELF-HELP MEETING (PEER RAN OR AA/NA)
8:00 PM - 9:30 PM	FREE TIME, TREATMENT PLAN ASSIGNMENTS
9:30 PM - 10:00 PM	GRATITUDE
10:00 PM- 11:00 PM MON-THURS- 10 AM TV OFF	LATE NIGHT CHORES KITCHEN CLOSED LIGHTS OUT
11:00 PM- 12:00 AM FRIDAY 12:00 AM TV OFF	LATE NIGHT CHORES KITCHEN CLOSED LIGHTS OUT

PATIENT DAILY SCHEDULE

WEEKENDS

SHOWER & TV TIMES:

5:00 AM - 9:30 AM

3:00 PM - 7:00 PM

8:00 PM - 12:00 AM (SATURDAY)

8:00 PM - 10:00 PM (SUNDAY)

MEDICATION TIMES

7:00 AM - 9:00 AM

1:00 PM - 2:30 PM

6:00 PM - 9:00 PM

5:00 AM	KITCHEN OPENS
9:00 AM	WAKE UP & BREAKFAST TIME
9:00 AM	MORNING CHORES, MAKE BEDS, CLEAN BEDROOMS
10:00 AM - 11:00 AM	MORNING MEDITATION PEER RAN
11:00 AM- 12:00 PM	LUNCH & MORNING CHORES
12:00 PM- 2:00 PM	FREE TIME, TREATMENT PLAN ASSIGNMENTS
2:00 PM - 3:00 PM	SELF-HELP MEETING (PEER RAN OR AA/NA)
3:00 PM - 4:00 PM	FREE TIME, TREATMENT PLAN ASSIGNMENTS
6:00 PM - 6:00 PM	PREPARE DINNER & EAT
7:00 PM -8:00 PM	SELF-HELP MEETING (PEER RAN OR AA/NA)
8:00 PM - 11:00 PM	SATURDAY NIGHT- MOVIE NIGHT SUNDAY NIGHT- GRATITUDE
11:00 PM - 12:00AM SATURDAY- MIDNIGHT TV OFF	SATURDAY NIGHT- CHORES, KITCHEN CLOSED, LIGHTS OUT
10:00 PM - 11:00 PM SUNDAY- 10 PM TV OFF	SUNDAY NIGHT- CHORES, KITCHEN CLOSED, LIGHTS OUT



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, Inc. provides a therapeutic environment that assists individuals with substance use disorder with living independent, healthy, and productive lives by providing a continuum of individualized care and services through patient centered treatment planning by our dedicated staff.

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 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.
- 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

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ADDICTION STABILIZATION CENTER
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Phone (607) 722-4080
FAX (607) 352-4776

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 training 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: ____ / ____ / ____



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

Career Choices
Unlimited

5 Merrick Street
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fairview@frsinc.org

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Fairview Recovery Services Addiction Stabilization Center (607) 722-4080

Addiction Stabilization Program Director-Amy Elliott ext. 328
Addiction Stabilization Clinical Coordinator-Chad Henry ext.339

Fairview Residential Rehab - 607-722-8987
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

OASAS: Patient Advocacy: 1-800-553-5790

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