



SUBSTANCE USE DISORDER SERVICES
Inpatient Chemical Dependency Program

Brooks-TLC Hospital System, Inc.

Irving Campus

845 Main Road Routes 5&20, Irving, NY 14081

Program Rules, Patient Rights, and General Information
Patient Handbook

MISSION

Brooks-TLC Hospital System, Inc. is dedicated to providing patient's suffering from Substance Use Disorders with individualized and patient centered treatment in a trauma-informed environment where patients can work with educated and experienced clinicians to recognize their disease and build personalized coping skills to manage symptoms in a healthy and whole person approach.

INTRODUCTION

The Inpatient Chemical Dependency Unit at the Irving Campus of Brooks-TLC Hospital System, Inc. is confidential and secure to allow our patient's an environment focused on safe treatment. The 20-bed, co-ed unit is staffed 24 hours a day, 7 days a week with medical staff, and clinical staff to assist patients and conduct treatment. Staff is comprised of Medical Doctors, Qualified Health Professionals, Registered Nurses, Licensed Psychiatrist/Psychiatric Nurse Practitioner, Social Workers, Case Managers and therapeutic milieu staff to assist patients with all of their needs. The unit space provides patients with single bedrooms with half baths, community rooms, exercise room, group rooms, counseling offices, and other miscellaneous areas. Brooks-TLC is motivated to remove barriers to access treatment; we will pick patients up for admission at any Community-Based Agency.

PATIENT AGREEMENT

Upon admission, all patients will complete a Patient Questionnaire and are expected to thoroughly read and understand the information covered in this packet and sign off in understanding the rules and requirements of the program. Patients will sign an admission contract stating that patient understands and agrees to adhere to the program rules, and to behave appropriately in alignment with the program standards and respectfully to all participants and staff. If rules are not followed and a patient's behavior is deemed not appropriate, the patient may be discharged from the program immediately. Brooks-TLC reserves the right to adjust program rules at its discretion.

PATIENT RIGHTS

As noted in NYS OASAS Regulations Part 815.5. All patients in NYS have the following rights:

1. To receive services that are responsive to individual needs in accord with an individualized treatment/recovery plan, which the patient helps develop and periodically update;
2. To receive services form 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 alcohol and other 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 an appropriate medical professional;
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 state 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 his or her conduct, to receive timely warnings for conduct that could lead to discharge and to receive incremental interventions for non-compliance with treatment/recovery plans;
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 mental abuse;
14. To be treated by provider staff who are free from chemical dependence;
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 feral law; and
17. The following rights apply with patients who reside in an inpatient/residential setting:
 - a. To practice religion in a reasonable manner not inconsistent with treatment plans or goals and/or have access to spiritual counseling if available;
 - b. To communicate with outside persons in accord with the individualized treatment/recovery plan;
 - c. To freely communicate with the Office, public officials, clergy and attorneys;
 - d. To receive visitors at reasonable times in relative privacy in accord with the individualized treatment/recovery plan;
 - e. To be free from restraint or seclusion;
 - f. To have a reasonable degree of privacy in living quarters and a reasonable amount of safe personal storage space;
 - g. To retain ownership of personal belongings, to the extent such belongings are not contrary to treatment goals; and

- h. 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.

If you feel that your patient rights have been violated, it can be reported to NYS OASAS Patient Advocacy at 1 (800) 553-5790.

PATIENT RESPONSIBILITIES

As noted in NYS OASAS Regulations Part 815.6. All patients in NYS have the following responsibilities:

- Participation in a chemical dependence services presumes a patient's continuing desire to change lifestyle habits and requires each patient to act responsibly and cooperatively with provider staff, in accord with an individual treatment/recovery plan and reasonable provider procedures. Therefore, each patient is expected to:
 - a. Work toward the goal of abstinence from drug, alcohol, and tobacco use;
 - b. Treat staff and other patients with courtesy and respect;
 - c. Respect other patients' right to confidentiality;
 - d. Participate in developing and following a treatment/recovery plan;
 - e. Become involved in productive activities according to ability
 - f. Pay for services on a timely basis according to financial means;
 - g. Participate in individual counseling and/or group and/or family counseling sessions as applicable;
 - h. Inform medical staff if receiving outside medical services;
 - i. Address all personal issues adversely affecting treatment; and
 - j. Act responsibly and observe all provider rules, regulations and policies;

EXPECTED BEHAVIOR

Any possession of medications/drugs, alcohol, drug paraphernalia, tobacco products or any contraband will not be tolerated and will be grounds for immediate discharge from the program. Any acts of violence or threats of violence directed to anyone (staff, other patients, or visitors) are not acceptable behaviors and will be grounds for immediate discharge. Sexual acts of any kind (including physical contact, inappropriate language) will not be tolerated and will be grounds for immediate discharge. Any of these actions are considered a serious infraction of the rules and regulations. Staff members will meet as a team to discuss the infractions and decide on an appropriate action to be taken, which may include a therapeutic behavior contract or discharge from the program. All privileges are subject to the discretion of Chemical Dependence Services.

ADMISSION PROCESS

Each patient will be fully searched after arrival. This is **mandatory**. The search will consist of a staff member completely searching each item brought onto the unit by the patient. The patient will be asked to disrobe completely with a staff member present in order for the clothing that the patient is wearing, including undergarments, to be searched. For modesty, the patient is provided with a hospital gown until the search is complete. If a patient refuses the search, the patient may be discharged for noncompliance. The patient may not be with other patients under any circumstances until the search process is completed. Any additional items brought in during a patient's stay must be searched.

It is the right of the patient to receive treatment in a safe environment. Accordingly, Brooks-TLC reserves the right to limit certain items from entering or being used in the facility to ensure the safety of the environment. Contraband or "sharps" is any item that a patient could use to inflict bodily harm to himself or herself, another patient, visitor, or a staff member. Contraband/sharps also include any item that may contain alcohol, interfere with treatment, or that is valuable and may be taken by another patient, including prescription medications. All prescription medications must be surrendered upon admission. Valuables will be locked up until discharge – cash will be locked in the hospital safe.

Only enough clothing for seven days and five (5) personal items (shampoo, deodorant, makeup, toothpaste, soap, etc.) are allowed. Any other items considered contraband will be confiscated at the staff's discretion. See "Definition of Contraband" for more information. All items brought in on visitation days must be approved by counselor prior to being brought in and will be subject to search.

Upon admission, a patient must submit a Breathalyzer test and urine and/or blood screen. These tests are **mandatory** for admission. Urine collection is done with a staff member or nurse present. Refusal of urine collection will result in a lab draw for screening – one or the other **must** be done upon admission. Patients may be tested several times during their treatment at any time that is deemed necessary or randomly. Refusal to comply with this testing may result in immediate discharge from the program.

All patients are on a blackout for phone privileges for the first 24 hours after admission. Calls to courts, attorneys, CPS or any agency that the patient must call to notify of admission into treatment will be done with a counselor in the counselor's office.

DEFINITION OF CONTRABAND

Contraband is any item that has been determined and designated as contraband. This includes items such as outside food or beverages, cell phones, tablets, alcohol, drugs, certain candies, etc. or other items that may pose a risk to health, safety or security of patients or staff.

Due to hospital policy and health code regulations, blankets, pillows, towels, washcloths, other linens, or stuffed toys will not be allowed. Items of this nature should not be brought to treatment and will be placed in storage for the duration of treatment if they are brought. Bedding and linens are provided for each patient.

Drugs (illicit or prescription), alcohol, drug paraphernalia, tobacco products, or food items brought from outside the unit/hospital will be confiscated and disposed of.

VALAUABLES

We advise patients to keep all valuables at home and not to bring them to treatment. If a patient comes into treatment with valuables they will be placed in storage. Patients will not need to keep cash on them. Brooks – TLC Hospital System, Inc. will not be responsible for lost or missing valuables. Lending personal items is strongly discouraged and is done at patient's own risk. The hospital will provide disposable razors for personal grooming which patients can obtain at the nurses/aides station. These disposable razors are to be brought back to the nurse's station after use and will then be placed in a secure sharps container for disposal.

SAFETY

It is the right of patients and staff in the Brooks-TLC Hospital System, Inc. to have a safe environment, free from unnecessary and preventable hazards or injuries. Doors to patient rooms **may not** be completely closed at any time. Physical contact, sexually inappropriate comments, and harassment of **any** nature are prohibited. Patients are **never** to enter the room of any peer regardless of gender.

To ensure safety, random room searches may be conducted. If the patient obstructs the search at any time, they may expect immediate discharge from the program. Room searches will be done with a patient (randomly chosen) to monitor. All findings will be documented and confiscated. Patient's rooms where contraband has been found, may result in behavioral contract or discharge from the program. Patient's knowingly participating in or covering for these behaviors for another patient may also be put on a contract or discharged.

Patient areas are monitored by video for the safety of patient, staff and visitors.

CONFIDENTIALITY

Authorization for Release of information forms must be signed by the patient to allow Chemical Dependency Services to send and/or receive any information related to their treatment. No information can be released or accepted without written consent. This includes family members. There are six conditions where a patient's right to confidentiality may be limited. In these cases, the patient will be made aware of the fact that this information has been shared. These cases are:

- In the instance of child or elder abuse
- In the event of a medical emergency which places the patient's life in danger
- In the event it is believed that the patient may harm him/herself, or others
- To those responsible for payment of the patient's stay (i.e. insurance company)

- To those reviewers and inspectors, including Joint Commission on Accreditation of Hospitals, OASAS, commonwealth licensure or certification, when necessary to obtain certification as a provider of service eligible
- In an event to respond to a court order

Patients are not to mention names of other patients over the phone, discuss their presence on the unit to anyone, or talk about other patients to visitors in order to protect patient confidentiality and privacy. Additionally, patients are not to mention what is said in a group environment or talk about what other patients disclose at any time.

Since patients are treated by a team of professionals, it is common for a staff member to share information with other members of the treatment team. This is done to ensure continuity of care of each individual. Information shared with a staff member is not generally shared with other patients unless it meets one of the above stated exceptions.

DRESS CODE

The following list gives guidelines of what dress is proper and what is improper:

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| <i>Proper -</i> | dresses (to the knee), skirts (to the knee), pants, shirts covering the stomach, walking shorts (mid-thigh length), jeans (not tight or torn), shoes (must be worn at all times). |
| <i>Improper -</i> | muscle shirts/halter/tank tops, see-through blouses, any attire revealing cleavage, midriff, or buttocks, bare feet, sunglasses (indoors), sweatshirt hoods (indoors), hats/bandanas, clothing with advertisements for alcohol or drugs, or racially derogative themes, ripped/torn jeans, pajamas are only to be worn to bed and not throughout the day, no flip flop shoes and no shower shoes unless taking a shower |

Patients are asked to follow the dress code. **If a patient's dress is inappropriate, they will be asked to change to more appropriate dress.** If disregard for this rule continues, the patient will be put on a behavioral contract and/or the item will be put in storage until time of discharge. Patients are expected to abide by the rules and give the requesting staff member the item in question.

COMMUNICATION/TELEPHONE HOURS

Patients cannot make or receive phone calls for the first 24 hours after admission. After this period, patients will need to attend 9am group in order to be permitted to sign in for phone time. Each patient will have one 10 minute phone time per day. If the patient does not attend 9am group, they will not have any phone privileges for that day. The phone sign in sheet must be utilized and a patient will only be permitted use of the phone during their sign in time. No phone calls will be made or received during group sessions or other program activities and patients will have a therapeutic schedule to know when groups are being held. Patients should make their families aware of their phone times. The number for

the patient phone is 716-951-7952. Telephone privileges may be revoked if it is felt that the patient is not following his or her treatment program or if an abuse of privileges has occurred. The phone can also be shut off or removed if patients cannot abide by phone rules. Staff is not responsible for answering the patient phone, nor will they take messages from this phone.

FREE TIME

During free time, the patient is encouraged not to isolate in his/her room. The group room contains a television, which may be viewed according to the posted schedule and at the discretion of staff.

Television shows are limited to the news and family shows. The television will be removed if any patient is found watching inappropriate shows or making adjustments to the viewable stations. Patients will not be permitted to use iPods, cell phones, MP3 player radios, tablets or lap top computers. Patients are encouraged to review treatment materials during free time and completing homework assignments.

MEDICATIONS

Medications will be dispensed as ordered with last being dispensed by 10pm. Patients may sign in for medication at 5am and not before, and medications will not be passed earlier than 6:30. The first person that gets their medications will then go get the next person signed up for medications and so on until everyone has their medications. If a patient misses their med time, they will move to the bottom of the list. If a patient will not get up and/or refuses, the nurse will document in patients chart refusal for medications. It is the patient's responsibility to report timely for medication pass. It is not staff responsibility to wake you up – everyone is provided an alarm clock and a schedule as to when to be up and ready for the day. Patients are not permitted to leave group for medications, even PRN's – present to the nurse after or before group. Medications are to be taken as prescribed – no chewing medications. No hoodies, sweaters with pockets, books or folders are to be taken into the medication room.

FOOD AND NUTRITION

Meals will be served at 7:35 for breakfast, 11:35 for lunch, and 5:30 for dinner. There will be snacks twice daily. Snack times are at 2:00pm and 7:00pm only. Any food left over from a meal must be returned back to the cafeteria. Only one entrée and one desert per person. **“Double Portions”** need to be requested by a doctor and review by the dietician. When a patient fills out their own menu a call for another option is discouraged, unless there is something wrong with the meal (ex: under done, overdone etc.). All Time Favorites (ATF) are to be requested **ONLY** when the meal choice options are not desired-not in addition to the meal choice. Extra snacks will not be permitted. All silverware needs to be returned after every meal. The only food that is allowed in the patients rooms are gum and wrapped hard candy in a sealed container. Water is the only beverage allowed in the patients rooms at any time. All food and beverages are to be consumed only in the kitchen area or at the tables in the great room.

PROGRAM STRUCTURE

The program is set up on a rotating cycle. A group schedule is available for patients. Staff reserves the right to make changes to the schedule as necessary. The patient is expected to attend each and every group on the schedule. This includes recreation activities and group walks. A refusal to participate in groups on the schedule could result in discharge from the program. No food is permitted during groups.

- **Morning activities** – all patients must be up and dressed appropriately by 7am. Beds are to be made daily. Linen changes are once a week. Patients are responsible for keeping their room and bathroom neat. No clothing on the floor.
- **Exercise** – daily attendance at exercise group is mandatory, Monday thru Friday. Patient participation in exercise on Saturday and Sunday is optional.
- **Goal setting** – there is morning meditation every morning. At this time patients will set a goal for him/her to be completed by the end of the day. Goals will be reviewed each evening during unity. Goals should be specific, reasonable and obtainable. Patients are encouraged to challenge themselves each day with their goal.
- **Group therapy** – group therapy is an integral part of our program. All patients are expected to attend group's daily as well as individual sessions with their counselors. Participation is mandatory.
- **Chores** – patients are given unit chores, such as straightening up the group room, putting away nourishments in the kitchen, and answering the patient phone. These chores are designed to encourage patients to take responsibility for their living environment. While chores do ensure that the unit is cared for, it is ultimately the responsibility of each individual to keep their environment clean. Patients are asked to clean up after themselves and keep their space neat and organized.
- **Rest/bed times** – patients may not lie down on their beds during the day, except after lunch during free time. This time may be used for individual therapy sessions at the discretion of a patient's counselor. Patients will be permitted to go to bed after 9:30 med pass. All patients must be in bed by 11pm (lights out) or within one half hour after taking a sleeping pill. On Friday and Saturday some or all patients may be permitted to stay up until 12 (midnight) if approved by the counseling staff. Doors to patient rooms may not be completely closed at any time. Patients are encouraged to at least attempt to sleep by remaining in their beds for the majority of the night. Patients will not be permitted to eat during the night hours or watch TV.

INFRACTIONS

An infraction is an abuse of a privilege and/or disregard for the rules and regulations outlined in the booklet.

- Any act of violence, or threat of violence toward anyone
- Refusal to take blood/urine/breath tests
- Breaking group confidentiality

- Refusal to take part in any part of the treatment program, including check in procedures
- Sexual relationships/inappropriate touching/suggestive language
- Possession of drugs or alcohol
- Stealing
- Destruction of any property (including your own)
- Having anyone in your bedroom (excluding staff)
- Possession of contraband (other than alcohol and/or drugs)
- Leaving group meetings without permission or being late to group
- Abuse of staff or peers in a verbal manner

All infractions will be considered by the treatment team. It is our goal to help patients change their old behaviors. Treatment goals will be established with patient input. Further infractions could result in discharge from the program.

SAFETY CHECKS:

Each patient room will be monitored and staff will conduct safety checks on all shifts. This is a walk through and not a room search and therefore will be conducted while patients are in group, on a walk or if the patient is in the room, staff will knock first and the patient does not need to leave the room. This will include a walk through each patient's room to check wall sensors, ceiling tiles, outlets and air conditioners/heaters. Patients are advised that the wall sensors are not heat sensors and should never be removed from the wall. These are motion sensors that will activate the heater or air conditioner when there is movement in the room. When idle, the rooms are kept in the 70-74 degree range and will kick on if it gets above or below these temperatures. Ceiling tiles are not to be removed or lifted for any reason. Nothing should be placed on or near air conditioners/heaters. All outlets are not to be tampered with in any way. Individual rooms as well as exercise/shower/great room and kitchen areas – all shared areas will also have safety checks. All issues will be documented and any alterations in room status will be discussed by the counselor with the patient/treatment team and will be addressed appropriately.

VISITATION:

Tuesday evening is family group and if a patient's family comes to that group, they will then be allowed to visit on Saturday otherwise, visiting is only on Sunday. All visitors must be approved by the counselor prior to treatment team meeting on Thursday at 1pm. Visitor sheets will not be accepted after this time unless it is for the following week. Visiting hours on Sunday are from 1-4 or 2:30 to 4. Patients will be instructed where and what time for their approved family/friends to meet – visitors must be on time. If visitors are not on time and miss the elevator, they will have to wait until the second elevator for the second half of visitation or they will not be coming up. Visitors will not be permitted to come up after staff has already taken the group up the elevators. Staff from other departments will not be permitted to allow visitors on the unit.

Family and friends are not here for a meal and the food/snacks on the unit are for the patients only. If patients are giving visitors the food/snacks/pop from the par – you are taking from all the other patients

on the unit and we will not be getting extra. Water is available for visitors. The group on the unit needs to monitor each other in this aspect and be considerate of each other. No food is to be brought in from outside with visitors.

Visitors are not permitted to bring any electronic devices (cell phones, iPods, etc.) on to the unit. All bags and personal property should be left at home or in locked vehicles. Visitors will be breathalized and asked to give staff any cell phones (if cell phones come in – they will be locked up until after visitation). Anyone who violates this will be asked to leave and will not be permitted to visit again. Brooks-TLC Hospital System, Inc. is not responsible for any personal property.

Visitors are not permitted to bring in anything for patients unless prior approval of specific items has been approved by counselor. Anything approved and brought in must be labeled with the patient's name. Hard candy is the only exception to this rule. If a patient's family shows up with anything that has not been approved, they will need to take it back out to their vehicles – it will not be permitted to come in the hospital. Patients are responsible to inform their visitors of this rule and if there is a problem at time of visit (giving staff a hard time) or refusal to take back to vehicle, the visitor will not be permitted on the unit.

PATIENT BELONGINGS LEFT ON THE UNIT AT TIME OF DISCHARGE

All belongings and medications brought in at time of admissions that are left behind by patients after discharge will be held for 5 working days. If no arrangements have been made for the items to be picked up or sent to the patient, the items will be donated or disposed of. All items left behind will be labeled by the patient/dated and stored on the unit. A hold sticker will be placed on the items if the patient contacts the unit within the 5 days.

