

NEW BRUNSWICK COUNSELING CENTER & BURLINGTON COMPREHENSIVE COUNSELING

SUBSTANCE USE PROGRAM Client Handbook



New Brunswick Counseling Center

320 Suydam Street New Brunswick, NJ 08901 732-246-4025 732-246-1214 (Fax)

Burlington Comprehensive Counseling

605 High Street
Mt. Holly, NJ 08060
609-267-3610
609-267-9692 (Fax)

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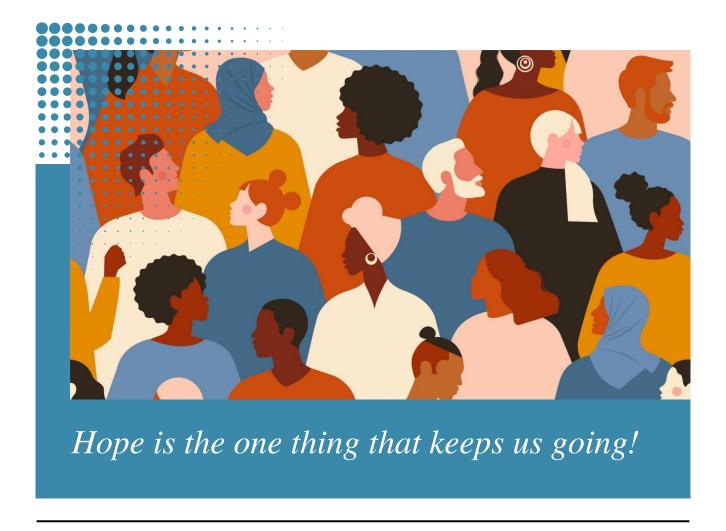


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Welcome Message ____

Welcome! Treatment is a journey towards selfimprovement where you can identify and maximize your strengths, as well as work on your areas of need. This journey takes place within a professional and therapeutic relationship, which we value greatly. Our goal is to make your experience meaningful and helpful.

TO ALL CLIENTS: This handbook must be read and understood by all. Should you have any questions about the content of the Handbook, please speak to your counselor or a supervisor.

Organization Overview

New Brunswick Counseling Center and Burlington Comprehensive Counseling is a CARF-accredited outpatient substance use and mental health treatment center with two clinics in Burlington and New Brunswick, New Jersey. Since our founding in 1970, our team of dedicated staff has remained committed to delivering courteous treatment to all clients.

MISSION

To provide compassionate mental health and substance use treatment to empower individuals to live the life they envision for themselves.

VISION

Our vision is to contribute to compassionate communities for everyone, where individuals can live a meaningful life and mental health and substance use challenges are addressed in a respectful, holistic, and effective way. We prioritize inclusion and equity in all of our work.





01

Person and Family-Centered

Our approach focuses on culturally responsive recovery that centers on the person and their family.

02

Potential

Our inspiration comes from the individuals and families we serve, recognizing their accomplishments and potential for achieving wellness and recovery.

03

Power

Our care is guided by the people, families, and communities we serve, as well as our workforce. They shape our policies and practices.

04

Partnerships

To achieve our mission and work towards our vision, we must establish mutually respectful partnerships and enhance our capabilities while building our capacity.

05

Performance

Our approach involves implementing proven practices, utilizing opportunities, and harnessing technologies to mitigate the effects of mental illness and addiction. Our ultimate goal is to improve the overall health and well-being of the individuals, families, and communities we support.

LOCATIONS, ACTIVITY SCHEDULES AND TELEPHONE NUMBERS

New Brunswick Counseling Center

320 Suydam Street, New Brunswick, NJ 08901

732-246-4025

732-246-1214 (fax)

Regular Office Hours*: Monday-Thursday: 6:00AM-6:00PM

Friday: 6:00AM-1:30PM

Saturday: 6:00AM-9:00 AM (by appointment)

Sunday & Holidays: Closed

Medication Hours: Monday-Friday: 6:00AM-12:00 PM

Saturday: 6:00AM-9:00AM Sunday & Holidays: Closed

*Includes individual counseling, group sessions, Intensive Outpatient, HIV counseling, admission assessments, intake screenings, case management, and doctors' appointments.

24 Hour patient access #: (732) 246-4025 ext.148

Life Threatening Emergency: 911 Suicide and Crisis Hotline: 988

Burlington Comprehensive Counseling

605 High Street, Mt. Holly, NJ 08060

609-267-3610

609-267-9692 (fax)

Regular Office Hours *: Monday - Thursday: 6:00AM-3:00PM

Friday: 6:00-1:30 PM

Saturday: 6:30AM-10:30AM (by appointment)

Sunday & Holidays: Closed

Medication Hours: Monday - Friday: 6:30AM-11:00AM

Saturday: 6:30AM-10:00AM (by appointment)

Sunday & Holidays: Closed

*Includes individual counseling, group sessions, Intensive Outpatient, HIV counseling, admission assessments, intake screenings, case management, and doctors' appointments.

24 Hour patient access #: (+1) 609-819-5082

Life Threatening Emergency: 911 Suicide and Crisis Hotline: 988

TEAM PROFESSIONALS



MULTIDISCIPLINARY TEAM OF PROVIDERS:

American Board of Addiction Medicine Certified Physicians
Registered Nurses
Clinical Psychologists
Nurse Practitioners
Certified Alcohol and Drug Counselors
Licensed Clinical Social Workers
Licensed Professional Counselors
Licensed Counselors
Counselors in training



CLIENT HANDBOOK INTRODUCTION

This client handbook is based upon the agency's mission of building a caring and positive environment in which clients are treated. The purpose of the handbook is to share with clients the policies, procedures, protocols, and benefits of being in treatment at the agency. While we have tried to include answers to most questions people have about treatment at the agency, you will get more information about the agency from your counselor and other treatment team members during treatment.

The contents of this handbook are given to you for information only, and replace any older versions of the handbook. We routinely update policies and procedures to better serve you and will do our best to keep you informed of any changes.

THIS HANDBOOK CONTAINS NO PROMISES OF ANY KIND AND DOES NOT CREATE A CONTRACT OF, OR FOR, TREATMENT. The handbook is not a contract for a specific length of treatment. You may voluntarily leave treatment for any reason and the agency may end your treatment at any time, or deny you readmission, with cause.

We encourage you to discuss any questions or concerns about the agency policy and procedures, protocols, or benefits with your assigned counselor or any other treatment team member.

Finally, no employee, manager, consultant or officer of the agency; other than the President of The Board of Trustees, the Executive Director, Medical Directors, or Clinical Director, has any authority to offer, or enter into, an agreement contrary to policies described above or following.

Thank you for your support and cooperation. We look forward to your successful treatment based on your personal goals and objectives.

Sandra Lutomski, LCSW, LCADC Executive Director



PROGRAM SERVICES

Comprehensive Individual Planning

When you are admitted to Comprehensive Maintenance Treatment, either directly or through Interim Maintenance, you will make an individual treatment plan with your counselor within the first 30 days (about 4 weeks) of treatment. You will be a full participant in making the goals/objectives for your plan based on your individual needs, strengths, abilities, and preferences. Goals will be written in your own words, and you can receive a copy of the treatment plan at their request.

Individual, Group and Family Therapy

You will have a counselor who is responsible for coordinating your care. Individualized, group and/or family therapy sessions take place to help you to reach your goals and objectives.

Levels of Care

Level 1 treatment: 1-8 hours of individual sessions and possibly groups weekly Level 2 treatment 9: 12 hours of individual and group sessions weekly

Psychosocial Education

Psychosocial education is available to clients, families, and care providers in both individual and group formats. Psychosocial education is designed to help clients and their families learn about the disease of addiction and to assist with interpersonal relations, role performance, anger management and communication skills.

Psychiatric Medication Management

Psychiatric medication management is available when appropriate. Through the services of qualified physician or APN, medications are prescribed and monitored. You will get information and education about the reason for taking the medication, its effects, use, side effects and expected outcomes.

Discharge Planning & Criteria

Your counselor will work with you to plan your discharge and follow-up care. After you have stopped taking methadone or buprenorphine, you may wish to continue in outpatient treatment at our intensive outpatient or outpatient program or at another program. If you decide to begin a slow reduction of your dose with a goal of stopping treatment and find that you wish to stop the reduction or wish to return to your prior dose, our medical staff will work with you to increase your dose safely and comfortably.

SPECIALIZED SERVICES

Progress Reviews & Individual Plan Reformulation

You will have regularly scheduled meetings with your counselor to review your progress in meeting your individual goals and to update your Treatment Plan.

HIV Services

- 1. HIV Pre-Test Counseling and Education
- 2. Referrals for HIV Testing
- 3. Case Management
- 4. Psychological Consultation

Referral Services

If after evaluation, NBCC/BCC multidisciplinary team determines that a person requires a different level of care or treatment, NBCC/BCC will assist in the referral process. We refer to mental health counseling, medical, social services, inpatient programs, and detoxification programs.

We offer additional Treatment Programs Including

- Substance Use Evaluations
- Substance Use Psychoeducation
- Alcohol and Other Drug Program (AOD) for DUI Referrals
- Individual Counseling for Substance Use Disorders
- Mental Health Evaluations and Counseling
- Bi-lingual Counselors (may be available)
- Adolescent Mental Health and Substance Use Counseling
- Case Management Services



BASIC INFORMATION, RULES AND REGULATIONS

Entering and Exiting the Building

All clients will enter and exit via the front doors at both locations. The rear doors are for employees and emergencies only. If, due to disability, a patient cannot enter/exit via the front doors; another way will be provided if necessary. Only clients with medication or counseling sessions can go past the lobby. clients with sessions will go past the lobby to check in with the front desk staff when directed by the Kiosk. Our staff will orient all new clients to the building including the location of emergency exits, fire extinguishers, and where to meet if everyone is ordered to evacuate (leave the building) for an emergency. These locations are called re-grouping areas.

To keep our program safe and confidential, you should not bring children, spouses, or friends to the agency unless they are participating in a scheduled event, such as family counseling or treatment planning session. If it is otherwise necessary to bring others to the building, you must get approval from an employee. The restrooms and telephones are only available to clients and not to the public. Absolutely no one but a patient and their children are allowed in the private medication areas.

Emergency Exits

Each room and hall location has a posted emergency evacuation route. You should learn those routes. In an emergency, pick the closest exist or the one that will be easiest and fastest to use and leave as fast as you can. In case of evacuation, everyone in the building will meet up (re-group) in the planned areas. In New Brunswick, the parking areas across Suydam and Seaman Streets and in Mt Holly, the Taco Bell parking lot.

Dress Code

For health and insurance reasons, proper clothing including shoes, shirts, and pants or dresses are required of all adults and children at all times while in the building. Sexually provocative dress is not allowed. Inappropriately dressed people will be asked to leave the building and not return until dressed properly.

Behavior in the Building

Loud speech, cursing, or threatening speech will not be tolerated. If an office door is closed, please knock first, and wait to be invited into the room. Do not invite non-clients into buildings to use the restrooms or phones. Non-clients will be asked to leave.

BASIC INFORMATION, RULES AND REGULATIONS

Loitering

Loitering in and around the building is not allowed. You should leave the building and the area around the building as soon as you are done receiving services. This is important for the safety of all clients and staff and for the Program to keep good relations with our neighbors.

If you are loitering, you will be asked to leave immediately. Every patient is expected to arrive early enough to complete their scheduled treatment appointment and leave both the building and clinic area immediately after the appointment is completed. Loitering may lead to you having your appointment times for medication be limited. It is also possible that you will be arrested by the local police if they see you loitering around the building. So, please do not loiter.

Solicitations (asking for money)

Sales, school fundraisers, and/or donation solicitations are not allowed in or near the outside of the building.

Smoking

Both locations of the agency are **Smoke-Free** facilities. Smoking and/or the use of other tobacco products or vaping is not allowed in the building for everyone's safety.

Cellphones

Cellphone use is not permitted in the building. If a patient/visitor is seen on the phone, they will be asked to discontinue the call or leave the building to continue the call. NBCC/BCC does not permit the use of cameras or recording (e.g. recording of sessions visual/audio, taking photos in the building or of others, whether staff, consumers, consultants, or volunteers).

NBCC/BCC uses audio recordings on occasion for clinical training purposes (particularly for interns and/or staff working towards clinical licensure). Those staff members have clients sign a written consent for sole purpose of clinical training; such recording would be destroyed immediately following the review/discussion in your clinician/counselors supervision).

BASIC INFORMATION, RULES AND REGULATIONS

Weapons and Violence

You will be discharged from the program for verbal abuse, threats, engaging in aggressive or violent behavior, or property damage. You are not allowed to bring any weapons or weapon-like instruments into the building. The agency does not practice seclusion or restraint in cases of violence or threats of violence, but we will call local police immediately.

Readmissions

Clients who wish to return to treatment after being discharged will be assessed for readmission. Clients discharged for violence, drug distribution, weapons, property damage, threatening behavior, and other serious non-compliant behavior will not be readmitted and will be referred to other treatment facilities.

Illicit Drugs and Alcohol

You are not allowed to bring illicit drugs and/or alcohol into the building. Anyone possessing alcohol or drugs will be asked to leave the building immediately and not allowed to re-enter until the substance has been disposed of. You should not come to the building if you are intoxicated (high). If you are intoxicated in the building, you will be assessed and asked to leave or referred to the emergency room if appropriate. *Illegal prescription medications (medication not prescribed for you)* are illicit substances. You are not allowed to bring medical marijuana into the building. Additionally, clients not complying with this regulation will be considered for discharge.

Administrative Discharge

Administrative Discharge occurs when a patient is discharged from treatment by the agency for failing to comply with agency rules and regulations

BASIC INFORMATION, RULES AND REGULATIONS FOR OUR OPIOID TREATMENT PROGRAM (OTP)

Reasons for Administrative Discharge:

- Violence or threats directed toward another patient or employee
- Displaying a weapon in the building
- Drug distribution
- Continued profanity
- Damage to or theft of agency property
- Continued use of illicit substances and/or alcohol
- Sexual harassment
- Use of unapproved prescription medications
- Failure to pay fees
- Failure to fully take on-site or take-home medication
- Failure to report promptly for medication
- Providing fake or adulterated urine samples
- Failure to attend counseling sessions
- Being in two Opioid Treatment Programs at the same time
- Failure to report the use of prescription medications or sign a release for prescriber
- Missing medication regularly
- Diversion (giving or selling take-home medication to someone)
- Any other reason as determined by Multidisciplinary Team

Administrative discharge procedure:

During the administrative discharge process, the patient's methadone or buprenorphine dose gradually decreases until the dose reduction is complete. All take-home medication will be stopped. If an administrative discharge is caused by a patient's violent or threatening behavior, or the patient's behavior becomes threatening or violent during the discharge process; a faster dose reduction may be needed and/ or the patient may be required to receive medication at another site.

Clients being administratively discharged will be offered a list of referrals for treatment and offered help, in transferring to, another program helped to find treatment at another program when possible.

BILL OF RIGHTS

This agency formally endorses the recognition and belief in both the rights and responsibilities of clients as the foundation of the relationship between the patient and the agency. The agency therefore, adopts the following:

Please note your rights as a consumer of New Brunswick Counseling Center and Burlington Comprehensive Counseling's Services:

- The right to be informed of these rights, as evidenced by the client's written acknowledgment or by documentation by staff in the clinical record that the client was offered a written copy of these rights and given a written or verbal explanation of these rights in terms the client could understand;
- 2. The right to be notified of any rules and policies the program has established governing client conduct in the facility;
- 3. The right to be informed of services available in the program, the names and professional status of the staff providing and/or responsible for the client's care, and fees and related charges, including the payment, fee, deposit, and refund policy of the program and any charges for services not covered by sources of third-party payment or the program's basic rate;
- 4. The right to be informed if the program has authorized other health care and educational institutions to participate in his or her treatment, the identity and function of these institutions, and to refuse to allow their participation in his or her treatment;
- 5. The right to receive from his or her physicians or clinical practitioner(s) an explanation of his or her complete medical/health condition or diagnosis, recommended treatment, treatment options, including the option of no treatment, risks(s) of treatment, and expected result(s), in terms that he or she understands;
 - a. If, in the opinion of the medical director or director of substance abuse counseling, this information would be detrimental to the client's health, or if the client is not capable of understanding the information, the explanation shall be provided to a family member, legal guardian or significant other, as available;
 - b. Release of information to a family member, legal guardian or significant other, along with the reason for not informing the client directly, shall be documented in the client's clinical record; and
 - c. All consents to release information shall be signed by client or their parent, guardian or legally authorized representative;
- The right to participate in the planning of his or her care and treatment, and to refuse medication and treatment;
 - a. A client's refusal of medication or treatment shall be documented in the client's clinical record;
- 7. The right to participate in experimental research only when the client gives informed, written consent to such participation, or when a guardian or legally authorized representative gives such consent for an incompetent client in accordance with law, rule and regulation;
- 8. The right to voice grievances or recommend changes in policies and services to program staff, the governing authority, and/or outside representatives of his or her choice either individually or as group, free from restraint, interference, coercion, discrimination, or reprisal;

BILL OF RIGHTS

- 9. The right to be free from mental and physical abuse, exploitation, and from use of restraints;
 - i. A client's ordered medications shall not be withheld for failure to comply with facility rules or procedures, unless the decision is made to terminate the client in N.J.A.C. 10:161B-16.2 accordance with this chapter; medications may only be withheld when the facility medical staff determines that such action is medically indicated;
- 10. The right to confidential treatment of information about the client;
 - i. Information in the client's clinical record shall not be released to anyone outside the program without the client's written approval to release the information in accordance with Federal statutes and rules for the Confidentiality of Alcohol and Drug Abuse Client Records at 42 U.S.C. §§ 290dd-2, and 290ee-2, and 42 CFR Part 2 §§ 2.1 et seq., and the provisions of the Health Insurance Portability and Accountability Act (HIPAA) at 45 CFR Parts 160 and 164, unless the release of the information is required and permitted by law, a third-party payment contract, a peer review, or the information is needed by DHS for statutorily authorized purposes; and
 - ii. The program may release data about the client for studies containing aggregated statistics only when the client's identity is protected and masked;
- 11. The right to be treated with courtesy, consideration, respect, and with recognition of his or her dignity, individuality, and right to privacy, including, but not limited to, auditory and visual privacy;
 - i. The client's privacy also shall be respected when program staff are discussing the client with others;
- 12. The right to exercise civil and religious liberties, including the right to independent personal decisions;
 - i. No religious beliefs or practices, or any attendance at religious services, shall be imposed upon any client;
- 13. The right to not be discriminated against because of age, race, religion, sex, nationality, sexual orientation, disability (including, but not limited to, blind, deaf, hard of hearing), or ability to pay; or to be deprived of any constitutional, civil, and/or legal rights.
 - i. Programs shall not discriminate against clients taking medications as prescribed;
- 14. The right to be transferred or discharged only for medical reasons, for the client's welfare, that of other clients or staff upon the written order of a physician or other licensed clinician, or for failure to pay required fees as agreed at time of admission (except as prohibited by sources of third-party payment);
 - i. Transfers and discharges, and the reasons therefore, shall be documented in the client's clinical record; and
 - ii. If a transfer or discharge on a non-emergency basis is planned by the outpatient substance use disorder treatment program, the client and his or her family shall be given at least 10 days advance notice of such transfer or discharge, except as otherwise provided for in N.J.A.C. 10:161B-6.4(c);
- 15. The right to be notified in writing, and to have the opportunity to appeal, an involuntary discharge; and 16. The right to have access to and obtain a copy of his or her clinical record, in accordance with the program's policies and procedures and applicable Federal and State laws and rules.

New Brunswick Counseling Center retains the right to admit and treat only those clients who are appropriate to the agency's mission, capacity, and resources.

New Brunswick Counseling Center is a smoke-free environment

ACKNOWLEDGEMENT

This is to acknowledge that you have received and read the contents of the NBCC/BCC Handbook and the Bill of Rights. You have the right to a paper copy of this handbook. Please let us know if you would like a set. Please note that you will receive an intake packet with the following forms. We request that you complete and submit them before your initial appointment. If you require assistance, please contact our staff, who will assist you to the best of their abilities. You will also have a chance to review anything in this handbook and the forms with your intake counselor.

We thank you for choosing New Brunswick Counseling Center and Burlington Comprehensive Counseling to assist you with your needs. Our dedicated team of qualified professionals will strive to provide compassionate mental health and substance use treatment to empower you to live the life you envision for yourself.