

Policies, Guidelines & Agreements

ACKNOWLEDGMENT: I have been personally advised and have received a copy of these rights at the time of admission to ALTERNATIVES for Better Living.

SMOKING POLICY

We encourage everyone who attends any program at Alternatives for Better Living to quit smoking. We want you to experience a life free from an addiction that is the most likely to cause you health problems and eventually death. If you are interested in quitting, we will do everything possible to support you in your decision.

If you choose to smoke we ask the following of you:

Please keep in mind smoking impacts everyone around you. Therefore, smoking on the Alternatives for Better Living premise is not allowed. This includes our front porch, the front of the building and the parking lot.

Always dispose of your cigarettes. Please do not throw your cigarette butts on the ground. There is a trash can outside next to Nations. We do not want to pick up after you.

Staff is not allowed to smoke with any clients.

Adults should not encourage adolescents to engage in addictive behavior...including smoking. If you are an adult and we see you giving cigarettes or smoking with any client under 18, you may be asked to leave the program.

Most importantly, do not encourage others to smoke and if you know that someone is quitting please do not smoke in front of them.

Please note that smoking is also not allowed during virtual groups conducted through Zoom.

We appreciate your cooperation.

GUIDELINES for PROGRAM PARTICIPATION

PARTICIPATION: You are expected to actively participate in treatment. Please leave cell phones in your car or turn them completely off.

SOBRIETY: Drugs and alcohol interfere with the ability to solve problems. This is an alcohol and drug free program. You will not be able to benefit if you have been using or drinking. Anyone attending under the influence will be asked to leave. It is inappropriate to bring alcohol, drugs or paraphernalia.

ATTENDANCE: If you are going to attend, please come on time in order not to disrupt the other participants. You will be charged for missed groups unless you are excused.

DRESS: Dress casually and comfortably, but fully. Please wear shirts and shoes. Do not wear halter tops, tank tops or revealing clothing. No clothing advertising alcohol or drugs.

VIOLENCE: Violence does not solve problems. Threats of violence are taken seriously and may be reported. This must be a safe environment, any violence against persons or property will result in immediate dismissal from the program. No weapons are allowed.

RECOMMENDATIONS AND COMPLAINTS: Please let us know any recommendations or complaints you may have. We suggest that you speak with staff, or bring up the issue in group when appropriate.

CONFIDENTIALITY: ALTERNATIVES promotes a safe and healthy environment. For people to be able to speak freely everyone must agree to keep information shared confidential. Exceptions: Child abuse elder abuse, harm against self or others. The information you share will be held in professional confidence. This means that staff, since they work as a team, will only share information among themselves to better facilitate treatment. Exceptions are danger to self or others, child abuse or adult abuse.

RESPECTFUL BEHAVIOR: All people and topics will be treated with respect. We expect you to behave toward others the way you want them to behave toward you. Verbal abuse toward other participants or toward staff is not appropriate and cannot be allowed.

PARTICIPANT RIGHTS

As a client of ALTERNATIVES Alcohol and Drug Abuse treatment you have rights which include, but are not limited to the following: The right:

- A. To confidentiality as provided for in Title 42, Code of Federal Regulations, Part 2.
- B. To be treated with consideration, respect and full recognition of your dignity and individuality, including privacy in treatment and in care for your personal needs in contacts with staff, volunteers, board members and other persons associated with the program.
- C. To be accorded safe, healthful and comfortable accommodations to meet your needs.
- D. To be free from verbal, emotional, physical abuse and/or inappropriate sexual behavior.
- E. To be informed of the procedures to file a grievance or appeal discharge including, but not limited to, the address and telephone number of the licensing or certifying agency.
- F. To not be discriminated against in the receipt of services due to ethnic group identification, religion, age, sex, color or disability.
- G. To access information kept in your treatment files in accordance with ALTERNATIVES for Better Living Policy and Procedure on client access to treatment files
- H. To be fully informed, as evidenced by your written acknowledgment prior to or at the time of admission and during stay, of these rights and of all rules and regulations governing client conduct.
- I. To be afforded the opportunity to participate in the planning of your treatment and to refuse to participate in experimental research.
- J. To refuse treatment to the extent permitted by law and to be informed of the consequences of such refusal.
- K. To be transferred or discharged only for medical reasons; or the welfare of other clients; non-compliance of cardinal program rules; or for non-payment for their treatment and to be given personal advance notice when possible in order to ensure orderly transfer or discharge; such actions to be documented in their health record.
- L. To be informed of the expectations of the treatment program and what you must do to successfully complete the program.

If you feel you have been unjustly discharged or denied services or have complaints about possible violations of these rights or complaints about the management of the program you may address your concerns to the Executive Director of ALTERNATIVES, to the Patient's Rights advocate, (707) 253-4306, or in writing to: 2344 Old Sonoma Road, Napa, CA 94559 or the Department of Alcohol and Drug Programs, Licensing and Certification Unit, 1700 K Street, Sacramento, CA 95814, (916) 322-2911.

TREATMENT AGREEMENT

- A. I agree to enter outpatient treatment with Alternatives' Behavioral Health Program and agree to abide by the following program rules.
- B. I will remain current in payments and understand that I may be discharged if I fall two or more sessions behind in payment.
- C. I will attend treatment regularly, free from the effects of drugs and/or alcohol and on time. If I cannot attend I will call 24 hours in advance if possible. If I am more than 15 minutes late for a session I know that I may be refused entry. I will not leave a session early without having received prior permission from the program and understand that regularly leaving sessions early can be grounds for discharge. I agree to participate in discussions and other activities such as presentations, written assignments and homework to the best of my ability.
- D. If I am referred to treatment by the court or some other oversight agency for which I have signed a release of confidentiality, I will provide written documentation of the reason for any absence. If I do not provide satisfactory documentation within a seven day period I understand that the absence will be reported as unexcused.
- E. I understand that attending a treatment session under the influence of drugs or alcohol can cause me to be excluded from the session and can result in my discharge.
- F. I agree not to engage in any form of violence while at the program including physical violence, verbal threats, or insults. I understand that violating this rule can result in my immediate discharge from the program.
- G. I understand that committing a crime or possessing a weapon at the program can result in immediate discharge, as well as criminal charges being filed against me by Alternatives.
- H. Alternatives agrees to provide competent, trained and adequately supervised staff to provide treatment. These staff will read and sign a Code of Conduct contained in a separate document. The Code is publicly posted for clients to read.
- Alternatives agrees to abide by the Client's Rights described in a separate document which the client signs and a copy of which the client receives. Specifically the agency agrees to respect the client's right to have any information kept confidential as required under Federal law (CFR 42, Part 2).
- J. The agency agrees to provide advance written notice of any involuntary reduction or denial of services and to provide access to the grievance procedure discussed in the Client's Rights document for such actions.
- K. The agency agrees to objectively respond to client grievances as discussed in the Client's Rights document and to refrain from any retribution toward clients who grieve the agency's actions.

NOTICE OF INFORMATION PRACTICES AND PRIVACY STATEMENT

How We Collect Information About You: Alternatives for Better Living. (ABL) and its employees and volunteers collect data through a variety of means including but not necessarily limited to letters, phone calls, emails, voice mails, and from the submission of applications that are either required by law, or necessary to process applications or other requests for assistance through our organization.

What We Do Not Do With Your Information: Information about your financial, legal or medical situation and services you receive is held in strictest confidence.

We do not give out, exchange, barter, rent, sell, lend, or disseminate any information about applicants or clients who apply for or actually receive our services that is considered patient confidential, is restricted by law, or has been specifically restricted by a patient/client in a signed HIPAA consent form.

How We Do Use Your Information: Information is only used as is reasonably necessary to process your application or to provide you with services which may require communication between ABL and health care providers, medical product or service providers, pharmacies, insurance companies, and other providers necessary to: verify your medical information is accurate; determine the type services you need.

If you apply or attempt to apply to receive assistance through us and provide information with the intent or purpose of fraud or that results in either an actual crime of fraud for any reason including willful or un-willful acts of negligence whether intended or not, or in any way demonstrates or indicates attempted fraud, your non-medical information can be given to legal authorities

including police, investigators, courts, and/or attorneys or other legal professionals, as well as any other information as permitted by law.

Information We Do Not Collect: We do not use cookies on our website to collect data from our site visitors. We do not collect information about site visitors except for one hit counter on the main page (www.A4BL.org) that simply records the number of visitors and no other data.

Limited Right to Use Non-Identifying Personal Information From Biographies, Letters, Notes, and Other Sources: Any pictures, stories, letters, biographies, correspondence, or thank you notes sent to us become the exclusive property of ABL. We reserve the right to use non-identifying information about our clients (those who receive services or goods from or through us) for fundraising and promotional purposes that are directly related to our mission.

Clients will not be compensated for use of this information and no identifying information (photos, addresses, phone numbers, contact information, last names or uniquely identifiable names) will be used without the client's express advance permission.

You may specifically request that NO information be used whatsoever for promotional purposes, but you must identify any requested restrictions in writing. We respect your right to privacy and assure you no identifying information or photos that you send to us will ever be publicly used without your direct or indirect consent

KEEPING YOUR INFORMATION CONFIDENTIAL

The client information kept Alternatives for Better Living is protected by Federal law and regulations. Generally, Alternatives for Better Living may not tell anyone outside of the program that a person is attending treatment here or give out ANY information identifying a client in any capacity.

UNLESS:

- 1. The client (you or your guardian) consents in writing to.
- 2. The release of information is allowed by Court order.
- 3. The information is needed for medical emergency or program review.
- 4. The information involves certain crimes against individuals sunch as murder, child abuse, etc.

If Alternatives for Better Living violates Federal law or regulations it is a crime. Suspected violations may be reported to appropriate authorities in accordance with Federal regulations (a copy is available).

Federal regulations do NOT protect any information about a crime committed by a client either at the program or against any person(s) who works for the program or about any threat to commit such a crime.

Federal regulations do NOT protect any suspected child abuse or neglect from being reported. (See 62 U.S.C. 290dd-3 AND 42 U.S.C. for Federal laws and 42 C.F.R. Part 2 for Federal Regulations)

ZOOM RULES & GUIDELINES

If you are attending a group via Telehealth (better known as Zoom) please be aware of the following rules and guidelines. Please note that our regular Guidelines for Program Participation also apply to groups held via Zoom.

If you are using a laptop or desktop computer, go to https://zoom.us/download#client_4meeting where you can download Zoom for your laptop/computer. Install it the way you would install any software. If you are using a smartphone or tablet, go to the iOS App Store or Google Play, search for ZOOM Cloud Meetings, and download the app. We encourage you to do this even if you are primarily using a computer – your phone or tablet serves as a useful backup. Whichever path you take is a matter of personal preference.

- A. Come to the group on time and be prepared to be in-group.
- B. Make sure you have a comfortable space to be in and a good internet connection.
- C. Please make sure your phone/computer has plenty of battery. It's always good to have a charger with you.
- D. Have a quiet place with as few distractions as possible. We do not want you walking around during the group.
- E. Be engaged, face your camera. When you spend time looking in another direction it sends a message that the group and other participants are not important to you.
- F. Sit up during the group. You may sit in your bed but please do not lie down.
- G. Please do not write on the shared screen.
- H. You cannot join a group while you are driving. You can sit in your car for a group but not with other people or while the car is moving.
- I. No alcohol or tobacco products including vaping.
- J. Please remember that confidentiality applied to all groups including groups done via Zoom.